



Group Dining Away From Bedside to Promote Functional Optimization for the Hospitalized Older Adults

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Introduction

The hospitalized older adults are at risk of immobility due to their acutely ill condition during hospitalization. Immobility is associated with poor clinical outcomes, such as a decrease in nutritional and functional status, which lead to a longer stay in the hospital. Having meals in a communal dining area away from bedside, the hospitalized older adults will have the opportunities for mobilization and socialization.

Aims

The aims of this study was: 1) to examine the association between the frequencies of group dining in a common dining area, away from patient's bedside for the hospitalized older patients with their clinical and functional outcome from the hospitalization; 2) To evaluate the patients and their family's subjective perceptions on their experience with group dining

Methodology

It is an observational study with a convenience sampling. Patients admitted to the geriatric unit during April to May 2015, who were able to sit for at least half an hour, were included in the study. Data was collected using a self-developed questionnaire, measuring patients clinical outcomes including average daily fluid intake and meal intake, length of stay, hospital acquired infections and patient's functional status upon discharge compared to that upon admission. Patients and family's perception was evaluated with an open-ended question on how they perceived the experience of group dining.

Nurse in charge	<ul style="list-style-type: none"> Indicate assignment for staff to be at the dining area daily
Nurses	<ul style="list-style-type: none"> Assess patient's condition Select suitable patients for dining out of bed Check vital signs if required
Nurses/ Health care attendant	<ul style="list-style-type: none"> Before Meals Transfer patients to the dining area according to the following sequence: <ul style="list-style-type: none"> Patients on wheelchair/ Geri-chair Patients with walking aids Patients requiring assistance in ambulation Ambulant patients
Nurses/ Health care attendant	<ul style="list-style-type: none"> After Meals Transfer patients back according to the following sequence: <ul style="list-style-type: none"> Ambulant patients Patients requiring assistance in ambulation Patients with walking aids Patients on wheelchair/ Geri-chair

Team effort

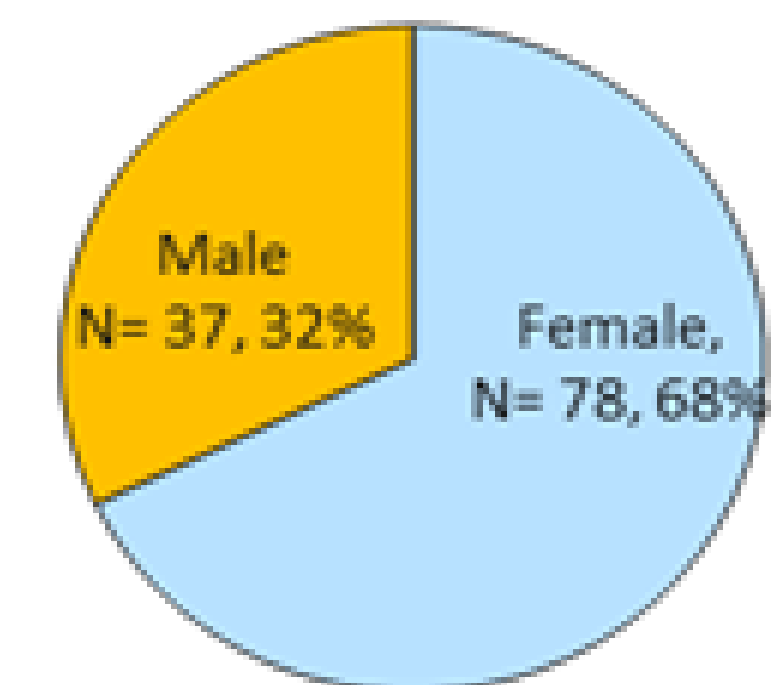
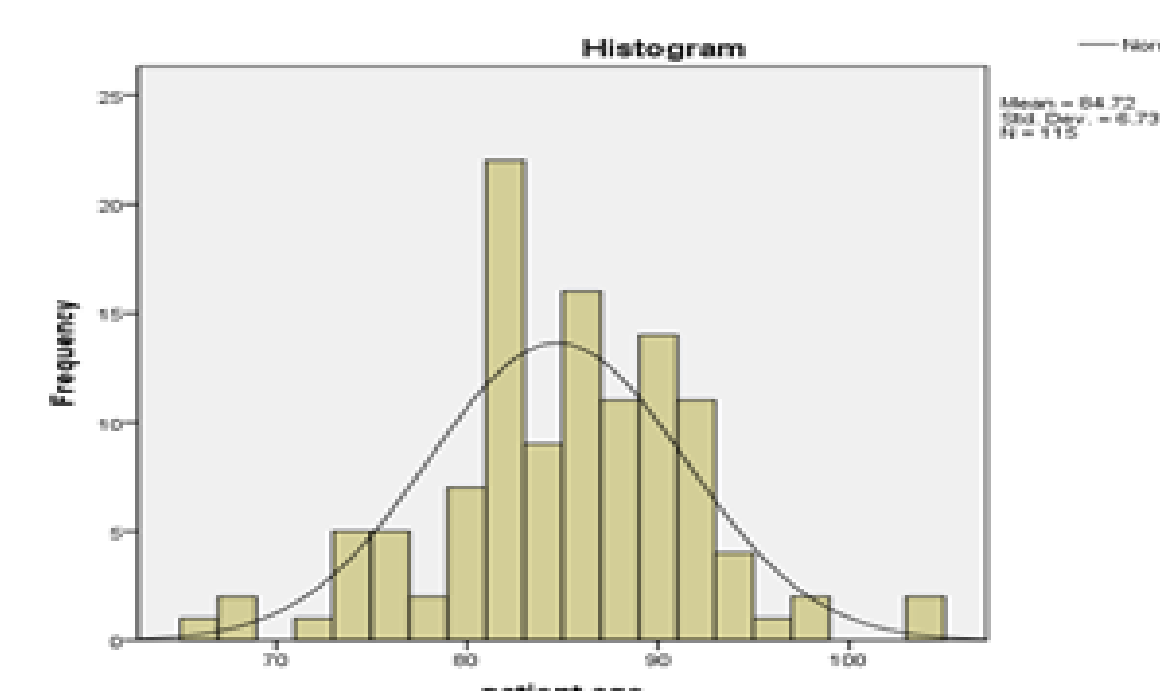


Acknowledgement

We would like to acknowledge the passion and dedications of all nurses from Ward 57, who always strive to improve the life of the hospitalized older adults. They are the ones that make this study possible!

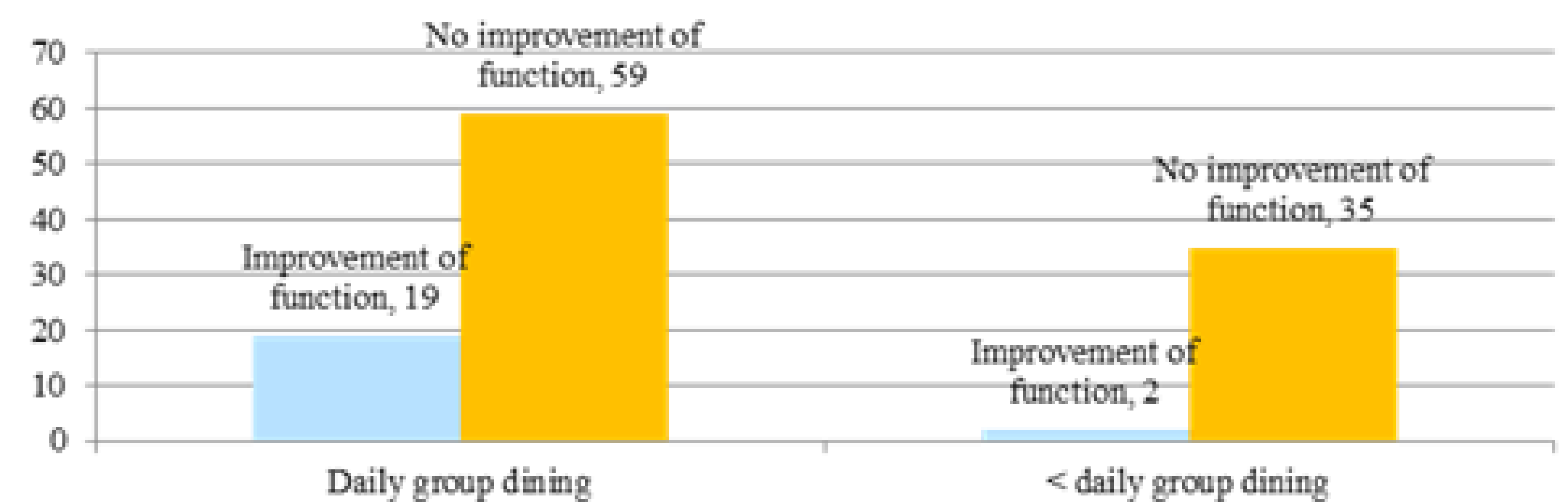
Results

Total of 115 patients participated in the study, aged from 66 to 104 year old. 67.8% (N=78) of whom were female and 78% (N=90) were Chinese.



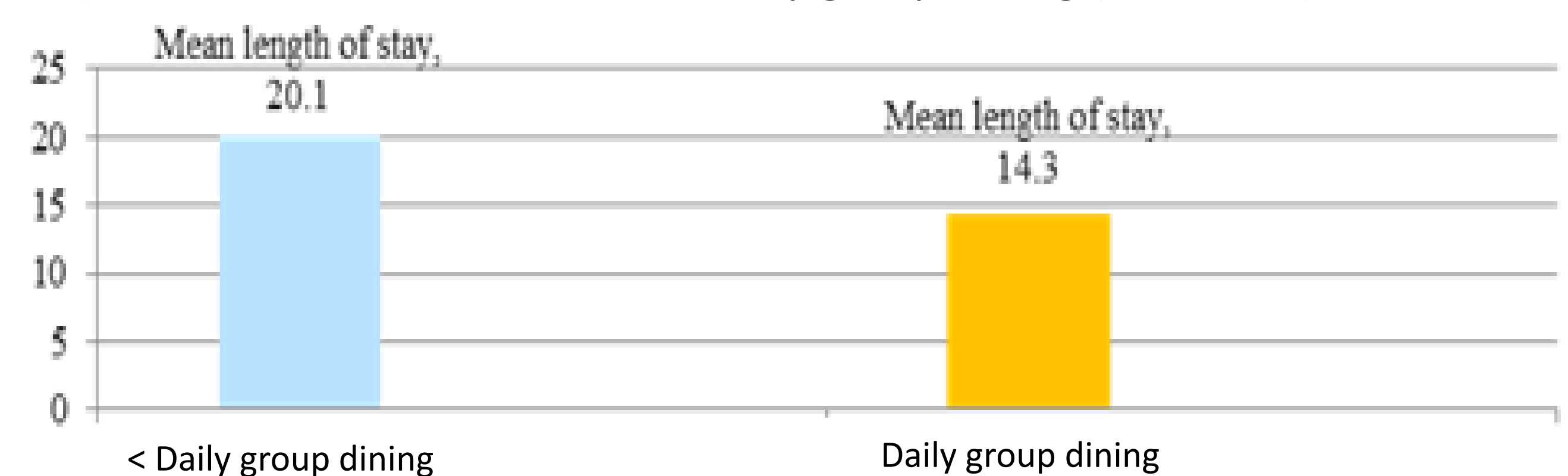
1) Improvement on functional status

The frequency of group dining had significant association with patient's functional status ($\chi^2 = 6.040, p = .014$) with those having at least once daily group dining being 5.6 times more likely to have improvement on functional status upon discharge as compared to that upon admission.



2) Shorter length of stay

There was a statistically significant difference on patient's length of stay ($t = -2.388, p = .019$) between patients having at least once daily group dining (M= 20.03) and those who had less than daily group dining (M= 14.31).



3) Feedback from the participants

Patient and family reported positive feedbacks on group dining away from bedside:

- 😊 Common dining area offered a more home-like environment, which is spacious and well ventilated.
- 😊 Enjoyed watching television program after their meal, which is part of their home routine
- 😊 Enjoy the opportunity to dine with their family to continue family bonding while they are in hospital
- 😊 Appreciated the opportunity to meet and talk to other people

Conclusions

Group dining in a common dining area provides older patients with opportunities for physical activities away from bedside and is associated with positive functional outcome and shorter length of stay. However, there were no associations found between the frequency of group dining and amount of food and fluid intake.

Future study should explore the psychological effects of group Dining on the hospitalized older adults.