

Hydration Review - Guideline for Daily Monitoring Charts or ROC Daily Hydration Review

Hydration Review	After Breakfast				After Lunch				After Supper				Night			
	Primary carer	A	INITIAL		Primary carer	A	INITIAL		Primary carer	A	INITIAL		Primary carer	A	INITIAL	
		B	INITIAL			B	INITIAL			B	INITIAL			B	INITIAL	
		C	INITIAL			C	INITIAL			C	INITIAL			C	INITIAL	
Secondary carer	1	2	3	INITIAL	1	2	3	INITIAL	1	2	3	INITIAL	1	2	3	INITIAL

EXAMPLE taken from the DMC

AIM:

- To prompt all carers to routinely review and take timely and appropriate actions to prevent avoidable (unnecessary) dehydration or weight loss due to poor fluid or food intake
- To enable carers to document how they 'feel' as an individual carer, about how well a person is drinking and eating and communicate any concerns they may have
- To support personal decision making; recognising that all carers have diverse levels of experience and different levels of knowledge about the individual they are caring for
- To support communication about the individual's best interest
- To highlight accountability and track how carers have responded to any concerns, no matter how small

DESCRIPTION:

- **The Hydration Review has two parts 'ABC and '123'**
- **It should be done after breakfast, lunch, supper and end of night shift**

A B C Is completed by the 'primary' carer:

- This is 'whoever' supported the person to have their breakfast, lunch, supper or provided care overnight e.g. registered / unregistered staff, volunteer or family member
- The primary carer is also responsible for monitoring how much the person has had to drink and eat

1 2 3 Is completed by the 'secondary' carer:

- The secondary carer is a registered nurse or senior carer who has either direct or delegated responsibility and accountability to review the person's intake and output as part of an overall 'holistic' review
- The secondary carer is responsible for checking that the Daily Monitoring Chart (DMC) has been correctly filled out and any concerns addressed
- The secondary carer should be familiar with the most current ROC Assessment Grid; DMC; overall individual care plan; medications, medical conditions, escalation and best interest plan
- **If a 'nursing' service is provided, a registered nurse should complete the Hydration Review at least once in 24 hours**
- Please note the secondary carer may also be the primary carer

See following pages for further details on how to complete the Hydration Review in the Daily Monitoring Chart.

continued overleaf

A B C - Hydration Review Guidelines for Primary Carer

<p>After each mealtime, how do you ‘feel’ about the following:</p> <ul style="list-style-type: none"> • How well did the person drink and eat? • Did they drink and / or eat as much as you expected? • Did they seem to need more support than usual? • How did they respond if you tried to encourage more? • Do they seem less alert or more agitated than usual? • Have they passed urine in the last 4 - 6 hours? • How moist are their lips and mouth? • Do you have any other concerns? 		<ul style="list-style-type: none"> • Three choices A B or C • Select which one best matches how ‘you feel’ • Circle the selected letter on the DMC and enter your initial • Follow the Actions to be taken as outlined below or as advised by the secondary carer following their 123 Review
‘I feel’	Description	Action
A ‘Alright’	<ul style="list-style-type: none"> • They drank and ate as well as expected, according to their ROC Assessment Grid • I gave the correct level of ROC support • They seemed to enjoy their drink and / or meal even if they didn’t finish it • Urine output has been recorded as ‘+, ++ or +++’ in the last 4 - 6 hours • No specific concerns noted 	<p>Circle ‘A’ on the DMC</p> <ul style="list-style-type: none"> • No further action needed at this point in time • Continue with same level of ROC support
B* ‘Bit Bothered’	<ul style="list-style-type: none"> • Slightly concerned, they did not drink or eat as much as expected. • But can confirm I gave the correct level of support as outlined in The ROC Assessment Grid • Urine output has been recorded, as ‘+, ++ or +++’ in the last 4 - 6 hours 	<p>Circle ‘B’ on the DMC</p> <ul style="list-style-type: none"> • Continue with same level of support • ‘But’ try to encourage a ‘bit’ more to drink before the next meal service
<p>*If the last two reviews are circled as B, at the next review the carer must select either A or C (not a third B)</p>		
C ‘Concerned’	<p>Select one or more of the following descriptions that best describes your concern(s)</p> <ol style="list-style-type: none"> 1. I am worried about their swallow 2. Did not drink as much as expected 3. Needed more assistance to drink 4. Needed more encouragement to drink 5. Did not eat as much as expected 6. Needed more assistance to eat 7. Needed more encouragement to eat 8. Has not passed urine in the last 4 - 6 hrs 9. Mouth and lips look very dry 10. More sleepy or less responsive than normal 11. More agitated than normal 12. Appears to be in pain/discomfort/nauseous 13. Don’t seem their ‘usual self’ but I don’t know the reason why 14. Unexpected fluid loss due to diarrhoea/ vomiting/ heavy sweating 15. Care / support was interrupted due to other immediate priorities <p>(O) ‘Other’ (enter details on back of Hydration Communication Chart)</p>	<p>Circle ‘C’ on the DMC</p> <ul style="list-style-type: none"> • When you select ‘C’ you must then document your concern(s) on the separate Hydration Communication Chart <p>Hydration Communication Chart</p> <ul style="list-style-type: none"> • Circle the matching number that best describes your concern(s) • Communicate your concern(s) directly to the ‘Secondary carer’ as appropriate • This will prompt further review by the ‘Secondary carer’ <p style="text-align: right;">continued overleaf</p>



1 2 3 - Hydration Review Guideline for Secondary Carer

Description	Following my holistic review of the individual I can confirm:	Action
1 No concerns noted	<ul style="list-style-type: none"> • ROC Assessment Grid – still reflects the correct level of support • Intake and output appears satisfactory for the person’s individual needs or circumstances • I have no additional concerns about their risk of dehydration at this point in time 	<p>Circle (1) on the DMC</p> <ul style="list-style-type: none"> • No further action needed at this point in time • Give reassurance as needed
2 ROC Assessment Grid needs updating	<p>I have decided to either / or</p> <ul style="list-style-type: none"> • Increase the level of support needed to drink • Increase the level of support needed to eat • Reduce the level of support needed to drink • Reduce the level of support needed to eat • Make a change to another section of care 	<p>Circle (2) on the DMC</p> <ul style="list-style-type: none"> • Update ROC Assessment Grid • Inform all concerned of any changes
3 Escalate concern(s)	<ul style="list-style-type: none"> • I have concerns about the person’s risk of dehydration and / or associated wellbeing and need to escalate this according to my normal protocol 	<p>Circle (3) on the DMC</p> <ul style="list-style-type: none"> • Action as appropriate • Inform all concerned • Document brief details on reverse of the Hydration Communication Chart • Document full details according to your normal protocol

The secondary carer should be aware of any of the following in order to carry out a ‘holistic’ 1 2 3 Hydration Review

(NB: this is a guideline and should not be considered an exhaustive list)

<ul style="list-style-type: none"> • Person centred care plan • Swallow issues • Dental and mouthcare needs • Usual fluid and food intake • Usual urine output • Usual bowel pattern • Usual output from a stoma, drain or wound • Pressure area risk • Malnutrition risk e.g. MUST score 	<p>Normal vital signs e.g.</p> <ul style="list-style-type: none"> • Temperature, respiratory rate, heart rate, blood pressure, oxygen saturations, blood glucose, capillary refill time, conscious levels • Diagnosis / long term conditions • Acute admissions in past 3 months • Recent or current illness e.g. UTI, chest infection • Unexpected fluid loss due to diarrhoea, vomiting, stoma, wound, drain
<ul style="list-style-type: none"> • Falls risk • Manual Handling needs • Mental capacity / cognitive impairment • Frailty Score • Choice of drinking aid • Best interest review 	<ul style="list-style-type: none"> • Medications; e.g. diuretics, laxatives, pain relief, anti-psychotics, oral nutritional supplements and common side effects of all prescribed medications • Time dependent medications e.g. for Parkinson’s, diabetes, pain relief • Non-oral fluids e.g. sub-cut / I.V / enteral / parenteral
<ul style="list-style-type: none"> • Advanced care planning / escalation plan • End of life care / Family wishes 	<ul style="list-style-type: none"> • Diagnosis of dehydration and or delirium in past 3 months

Example of A B C - ROC Hydration Review

This shows that the Primary Carer felt a 'Bit bothered' after lunch and supper. So, at the next review, at the end of the night shift the carer must not put another 'B' (i.e. no third B). Instead they must decide if they feel the person is now 'Alright' (circle A) or if they now feel 'Concerned' (circle C).

Hydration Review	After Breakfast				After Lunch				After Supper				Night Shift			
	Primary carer	A	INITIAL		Primary carer	A	INITIAL		Primary carer	A	INITIAL		Primary carer	A	INITIAL	
		B	INITIAL			B	INITIAL			B	INITIAL			X	INITIAL	
		C	INITIAL			C	INITIAL			C	INITIAL			C	INITIAL	
Secondary carer	1	2	3	INITIAL	1	2	3	INITIAL	1	2	3	INITIAL	1	2	3	INITIAL

*If the last two reviews are circled as B, at the next review the carer must select either A or C (not a third B)

The carer has selected 'C' in the ABC review and must now communicate their concern(s) by completing the Hydration Communication Chart and selecting the description that best matches their concern(s).

Simple Measures™

Hydration Communication Chart

As the 'primary carer' if you selected 'C' in the ABC review - 'circle' the number(s) that best matches the description of your concern(s) and initial below ('If 'other' enter specific details on reverse)

Name _____ Page _____

'Concern'	0*	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	Print Name 'Primary carer'	Secondary carer
Date: 21.8.17 Time: 0500 Initial: JR	0*	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15		INITIAL
Date: 22.8.17 Time: 0900 Initial: CG	0*	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15		INITIAL
Date: 22.8.17 Time: 1800 Initial: JR	0*	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15		INITIAL
Date: _____ Time: _____ Initial: _____	0*	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15		INITIAL
Date: _____ Time: _____ Initial: _____	0*	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15		INITIAL
Date: _____ Time: _____ Initial: _____	0*	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15		INITIAL

This example of a completed Hydration Communication Chart shows that the Primary Carer has been concerned about:

- Needed more assistance to drink
- Has not passed urine in the past 4 - 6 hours
- More agitated than normal
- Did not eat as much as expected
- Appears to be in pain/discomfort/nauseous
- Needed more assistance to eat
- More sleepy or less responsive than normal
- Don't seem their usual self
- Care support was interrupted due to other immediate priorities