

Dietary Guidelines Older Australians

Priorities for the 2023-24 Federal Budget

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Nutrition for Older Australians Alliance

This submission was prepared by an alliance of industry leaders, who seek to improve and protect the nutritional health and well-being of older Australians.

Members of the Nutrition for Older Australians Alliance (NOAA) include:

- Dietitians Australia
- Nutrition Australia VIC, SA, TAS, WA
- The Maggie Beer Foundation
- Meals on Wheels® Australia, and
- The Public Health Association of Australia



The Nutrition for Older Australians Alliance would like to acknowledge the valuable contribution of:

Professor Karen Walton PhD AdvAPD

Associate Dean Education/Interim Discipline Lead in Nutrition & Dietetics
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"It is most important that the right nutrition is in the food, that it is full of flavour and the dining experience is welcoming for residents and people in the community to support their social wellbeing."

Maggie Beer

Recommendations

1. Fund the development of a specific set of 'Dietary Guidelines for older Australians'.
2. Fund successful public education, implementation support, monitoring and evaluation of the 'Dietary Guidelines for older Australians'.

Discussion

Australian Dietary Guidelines

Recommendation 1: Fund the development of a specific set of ‘Dietary Guidelines for older Australians’.

COST

- \$3 million over three years

BENEFITS

- The development of ‘Dietary Guidelines for older Australians’ will provide clarity and evidence-based guidance to older Australians, their carers, aged care providers, aged care foodservice staff and aged care quality assessors regarding what to eat and drink to meet the unique dietary needs of people aged over 70 years. Older adults want to eat well to age well, yet the current dietary guidelines for Australian adults focus on low fat, moderate carbohydrate and moderate protein foods, with limited discretionary items. These guidelines are misaligned with actual dietary needs for those over 70 years of age and could escalate malnutrition and weight loss.
- Dietary Guidelines for people over 70 years of age will underpin national nutrition policy and guidelines in aged care, such as:
 - **The ‘Aged Care Quality Standards’ for food, nutrition and clinical care in residential aged care homes.** ‘Dietary Guidelines for older Australians’ can be used as an evidence base in standards for meals, snacks & beverages (including texture modified foods/beverages); standards for the mealtime environment; and standards for clinical care (to prevent diet related issues such as malnutrition, weight loss, dehydration, falls, wounds etc).
 - **The ‘Star Rating’ for residential aged care.** A rating for food and nutrition can be derived from an assessment against specific ‘Dietary Guidelines for older Australians’.
 - **The ‘National Meal Guidelines for home delivered and centre-based meal programs for older Australians’.** ‘Dietary Guidelines for older Australians’ will be used to update the existing National Meal Guidelines.
 - **Food and nutrition benchmarks for the ‘Aged Care Quality & Safety Commission’ and its Quality Assessors.** ‘Dietary Guidelines for older Australians’ can be used to develop food and nutrition benchmarks against which food services and nutritional care can be monitored and measured, for assessments undertaken in residential aged care.
- ‘Dietary Guidelines for older Australians’ will support better nutrition outcomes and ultimately health in this population. Improving nutritional status has been shown to reduce the risk of malnutrition, sarcopenia, falls, fractures from falls, pressure injuries, wounds, lower disease risk and improve quality of life.
- The development of Dietary Guidelines for older Australians will help to address Aged Care Royal Commission Recommendations specific to food and nutrition care - Recommendations 13, 19, 22 and 112.

BACKGROUND

Malnutrition in aged care in Australia is estimated to cost the government approximately \$9 billion per annum and to increase care costs by a factor of two to three.¹ Around 1.2 million older people living in the Australian community are either malnourished or at risk of malnutrition.² In 2010, Access Economics estimated that under-nutrition in 40,000 community dwelling people aged 70 years and above, cost the Australian health system \$158.2 million annually.³

In July 2020, the Government committed a \$2.5 million investment to review and update the Australian Dietary Guidelines, which was welcomed by the members of the Nutrition for Older Australians Alliance (NOAA) as an important step in promoting the health of all Australians. This review is underway, and the outcome is expected in 2025. In addition to the Australian Dietary Guidelines, funding is needed to provide specific guidelines for older adults (aged 70+), who have different nutrition needs to the rest of the population. These specific guidelines would be designed to recognise the diversity of people over 70 years and include advice for older adults who are physically active, those who have low appetite and those who are preventing unintentional weight loss. Through funding dietary guidelines for Older Australians, the Albanese Government has an opportunity to demonstrate its leadership and commitment to improving nutrition. Specifically it can help the Government to achieve its pre-election, aged care priority of better food for aged care residents.

Nutrition needs change as people enter different stages of life. Older people require more protein to maintain protective muscle mass, as well as adequate calcium, vitamin D and riboflavin (vitamin B2) to maintain bone strength and sufficient energy (calories/kilojoules) to prevent unintentional weight loss when a person has a reduced appetite.⁴ On a social level, loneliness and lack of the social aspects of eating can reduce the amount of food an older adult eats, leading to poor health.^{4,5} Failure to meet these needs leads to the serious consequences of malnutrition and associated poor health, as demonstrated by the findings of the Royal Commission into Aged Care Quality and Safety.⁶ Malnutrition also increases costs in both the aged care sector and broader healthcare system.⁷

Whilst the 2017 NHMRC Nutrient Reference Values (NRV)⁸ table recommends essential nutrient intake for adults over 70, the current Australian Dietary Guidelines do not account for the unique dietary needs of older adults, instead providing guidelines for the generally well adult population.⁹

The absence of specific dietary guidelines for older Australians (which draw on NRVs for adults aged over 70 years) reduces the capacity of the aged care sector (including both residential aged care and community aged care providers), hospitals and home delivered/centre-based meal programs for older Australians to prepare nutritionally tailored meals, snacks and beverages for an older cohort.¹

Consequently, industry guidelines such as the 'National Meal Guidelines: A Guide for Service Providers, Caterers and Health Professionals Providing Home Delivered and Centre Based Meal Programs for Older Australians',¹⁰ are open to conjecture and other providers are reliant on varying interpretations, or nothing at all.

Funding to develop a specific set of 'Dietary Guidelines for older Australians', drawing on the revised Nutrient Reference Values for people over 70 years would provide a basis to:

- a. Underpin standards and compliance obligations for food, nutrition and clinical care standards in residential aged care as part of the 'Aged Care Quality Standards' currently under revision.
- b. Establish a 'Star Rating' for food and nutrition in residential aged care, based on an assessment against specific 'Dietary Guidelines for older Australians'.
- c. Update the 'National Meal Guidelines for home delivered and centre-based meal programs for older Australians', with this new evidence.
- d. Establish food and nutrition benchmarks for the 'Aged Care Quality & Safety Commission' and its Quality Assessor to monitor and measure food services and nutritional care against.

Recommendation 2: Fund successful public education, implementation support, monitoring and evaluation of the ‘Dietary Guidelines for older Australians’.

COST

- Year 1 \$250k to undertake an umbrella review of suitable community support programs and systems level initiatives promoting healthy eating and other healthy behaviours for older Australians to support the implementation of the guidelines.
- Year 1 \$150k required to determine the costs of monitoring and evaluating the implementation of ‘Dietary Guidelines for older Australians’.
- Years 2-3 \$350k to develop effective public education strategies and a targeted campaign designed for older Australians and their care providers, to improve their understanding about age-appropriate nutritional requirements and to support targeted behaviour modification strategies.

Further funding will be required to support the implementation and ongoing evaluation of the guidelines and these campaigns once developed.

BENEFITS

- Increased awareness among older people and their carers of dietary requirements for people aged over 70, which may reduce health costs related to poor nutrition in people over 70 years of age living in the community.
- Increased awareness and service delivery among aged care providers, their staff, aged care foodservice teams and quality assessors, which will ultimately lead to better food and nutrition and quality of life among people in their care.
- Increased utilisation of early-intervention and preventive support to reduce future and ongoing health costs due to malnutrition in older Australians.
- Monitoring and evaluation of nutrition programs, initiatives and other actions will support cost effectiveness and efficacy of current and future programs.

BACKGROUND

The current review of the Australian Dietary Guidelines is an important step in promoting the health of all Australians. Along with the valued review of the Guidelines, now underway, funding is needed to provide advice specific to older adults, who have different nutrition needs to the rest of the population, and to support the effective implementation and evaluation of the Guidelines.

There is a lack of education on food and nutrition for people over 70 years of age.¹ Older people are poorly informed about their changing nutrition requirements and those who are most at risk are unlikely to recognise their need for more nourishing meals.¹¹ There is little evidence-based educational material available for older people living at home, for residential aged care providers, community health providers and GPs about the nutrition needs of the older adults.¹ It is important

we raise awareness and educate the community on the importance of meeting dietary requirements, maintaining muscle mass and avoiding unplanned weight loss among older Australians.

With less than 4% of the population eating a diet consistent with the Australian Dietary Guidelines,¹² it is crucial that the time and effort put into 'Dietary Guidelines for older Australians' is translated into real action to support health and quality of life.

A comprehensive implementation plan may include effective strategies such as mass media campaigns,¹³⁻¹⁵ community support programs and systems level actions.^{16, 17} A targeted campaign designed for older adults and their care providers would improve their understanding about age-appropriate nutritional requirements to support targeted behaviour modification strategies.

Components of the plan should include:

- a. Health professional education (GPs, geriatricians, registered nurses, allied health professionals).
- b. Education and training for residential aged care providers and their staff including cooks/chefs/food service staff and care workers.
- c. Education and training for community aged care providers and their staff including care workers.
- d. Education and training for Aged Care Quality Assessors employed by the Aged Care Quality & Safety Commission.
- e. Promotion of nutrition as part of 75 years plus health checks (GP and primary healthcare-led)
- f. Public health campaign for older Australians and their informal carers, across various mediums
- g. Monitoring of nutrition status among older people (clinical indicators, epidemiological monitoring via My Health Record) to assess the impact

Campaigns, programs, initiatives and other actions must be evaluated to indicate the returns of Government investments in terms of population health, community wellbeing and financial implications.¹⁸⁻²⁰

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