

ShowCase

Health on Tap

Topic: Falls reduction

Organisation: Anglian Water Services Ltd;
Lamerton Swales

Location: East Anglia (East of England)

Dates: 2006 to 2008

Budget: £5,000 (excluding design and print costs)

Website: www.anglianwater.co.uk/community/education/water-for-health/care-homes

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Overview

Health on Tap was a 2-stage programme lasting over 18 months, including a 7-week trial with a group of care home residents. The programme aimed to increase water intake in older people in residential care, thus reducing falls. It was targeted at people working with or caring for older people in the UK. Health on Tap encouraged care providers to sign up to the Good Hydration Charter, a voluntary code of practice, which supports:

- Staff training on importance of good hydration
- Fresh tap water to be constantly available, easily accessible and presented attractively
- Establishing a drinking water routine

In return, care providers received: a certificate endorsed by Anglian Water, Water UK and the National Association of Care Caterers; promotional items to help promote drinking more water; and a subsidised mains-fed water cooler offer.

Results:

- Pilot participants recorded health improvements, including better sleep patterns and reduced bladder problems
- Anecdotal evidence of a 50 per cent reduction in recorded falls
- By 2011, 188 Care Homes had signed up to the Good Hydration Charter in the Anglia Water region

1. BEHAVIOUR

Residents:

- Drink up to eight additional glasses of water a day
- Maintain increased water intake and sustain drinking behaviour by establishing daily routine

Care home staff:

- Encourage increased water consumption and improved accessibility to water
- Increase own water intake

Care home management:

- Sign up to the Good Hydration Charter
- Implement changes to water provision and hydration policy

2. CUSTOMER ORIENTATION

- In-depth interviews with care home staff and managers – To understand attitudes to water provision
- Six-month pilot study around increased water consumption
- Seven-week Drinking Water Diary completed by 15 care home residents
- Focus groups around water consumption

3. THEORY

- **Group Relations Theory:** Considers how people think about work and organisations, and can be applied to shift a focus towards the human elements of work and organisational life

4. INSIGHT

- Hydration not part of staff training
- Residents' fear increased toilet trips if they drink more
- Availability and visibility of drinking water are key

5. EXCHANGE

Professional:

- Barriers – Lack of knowledge and training about hydration; English not the first language for many; Reliance on peer-to-peer learning
- Benefits – Training resources and prompts; Residents easier to care for

Residents:

- Barriers – Fear of increased toilet trips; Forget to drink; Inadequate access to water; Plastic cups difficult to hold; Limited mobility
- Benefits – Reduced falls, injuries, sleeplessness, dizziness, urinary infections and constipation

6. COMPETITION

- **Tea and coffee** – Popular beverages, but can increase dehydration
- **Response** – Increase the competitiveness of water as a beverage, e.g. adding slices of lemon and ice cubes, attractive presentation

7. SEGMENTATION

Primary audiences:

- Care home staff
- Care home management

Secondary audiences:

- Care home residents
- Relatives and visitors

8. METHODS MIX

- Installation of mains-fed water coolers
- Establishing drinking water routines
- Promotional materials
- '10 Essential Elements to Good Hydration' chart
- Staff training DVD and hands-on training
- Health on Tap champion badges
- Visual prompts as reminders to drink water – Posters, bookmarks, placemats, coasters
- Drinking water clubs
- Good Hydration Charter Certificate
- Political lobbying
- Media coverage