

Feasibility and Acceptability of a Nutritional Care Intervention for People Living with Dementia Receiving Home Care: **TOMATO** Study

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TOMATO Project offers new evidence-based resources to equip family carers/friends and home care workers with practical tools, raise awareness on nutrition, while emphasising the importance of person-centred nutritional support for dementia care at home.

INTRODUCTION	METHODS	RESULTS	CONCLUSIONS	REFERENCES								
• Around 982,000 people in the UK are living with dementia.¹ • Two-thirds of people living with dementia (PwD) in the UK live at home and rely on family and friends for support with eating and drinking as dementia progresses. • Many are at risk of undernutrition due to reduced appetite, eating and swallowing problems, which negatively impact health, quality of life, and increase healthcare costs. • Home care workers (HCWs) frequently support PwD but often lack training and resources for proactive nutritional assessment and management. • Following the co-adaptation of our care home intervention² to the home care context, this study aimed to assess the feasibility and acceptability of a nutrition intervention for PwD receiving home care as part of the nuTritiOn and deMentia AT hOme (TOMATO) study.	• We conducted a mixed-methods single-arm feasibility study with an intervention comprising new co-produced resources and a two-hour nutrition awareness training for HCWs. • Feasibility measures included recruitment, retention, and adherence. Outcome measures were collected at baseline and 4-months, including functional status, quality of life, and carer burden and resource use data at 4-months. • Semi-structured interviews with PwD, family carers, HCWs, and home care managers were undertaken to explore barriers and facilitators. “ Overall, people are getting a lot from the resource. And it'll be really nice to have that as like a widely used tool across all seven of our businesses.” Senior Home Care Worker “ It's very durable, easy to use, and very colourful. It's very helpful even for myself” Family Carer	<table><tr><th>Recruited Triads</th><th>Number of Participants</th></tr><tr><td>People living with dementia (Mean age 84; 6 male, 9 female)</td><td>15</td></tr><tr><td>Family Carers/Living Carers</td><td>15</td></tr><tr><td>Home Care workers</td><td>21 (6 staff in pairs)</td></tr></table> • Trained 69 HCWs (face-to-face and online, retained 21). • 13 dyads (PwD and family carers) completed the intervention, meeting progression criteria for adherence and retention (86.7%). • No statistically significant differences were observed in health outcomes, and NHS utilisation/costs varied widely (£543–£4,084 per participant/month), with home care accounting for 89% of costs. • Family carer engagement and buy-in was a key facilitator, while time constraints for HCWs were a major barrier. • The adapted resources were well received, and participants reported positive practice changes.	Recruited Triads	Number of Participants	People living with dementia (Mean age 84; 6 male, 9 female)	15	Family Carers/Living Carers	15	Home Care workers	21 (6 staff in pairs)	• The TOMATO nutrition intervention was acceptable to home care workers and family carer dyads receiving home care. • These findings will inform a larger efficacy trial to evaluate the health outcomes and cost-effectiveness over a longer intervention period. Social interaction during mealtimes at home Mealtimes at home can be cherished moments of the day, providing nourishment, a sense of enjoyment, and opportunities for social interaction. Social interaction at mealtimes can evoke familiar memories of past mealtimes experiences and be an encouragement to prompt eating and drinking. Consider having your lunch at the same time with the client, where appropriate. Encourage family members and friends to join clients for meals where this is possible! Respecting and knowing the person with dementia will help with understanding how best to communicate and establish strong relationships. FUNDED BY NIHR National Institute for Health and Care Research This project is funded by the National Institute of Health and Care Research (NIHR) [Research for Patient Benefit programme: NIHR203110]. The views expressed are those of the authors and not necessarily those of the NIHR or the Department of Health and Social Care.	1. Alzheimer’s Society and Carnell Farrar, 2024. The Economic Impact of Dementia – Module 1. https://dementiastatistics.org/statistics/numbers-of-people-in-the-uk-2/ 2. Murphy JL, Holmes J, Brooks C. Nutrition and dementia care: developing an evidence-based model for nutritional care in nursing homes. BMC Geriatr. 2017;17(1):1-14. https://doi.org/10.1186/s12877-017-0443-2 Now Available! Contact: Dr Gladys Yinusa Email: Yinusagg@bournemouth.ac.uk ALZHEIMER’S ASSOCIATION AAIC>26
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