

Decision Support Tool Height and Weight - Long-Term Care - Measurement

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Purpose

This DST identifies the responsibilities and procedure for measurement and documentation of height and weight in Long-Term Care (LTC) to ensure timely intervention when a resident experiences a significant weight loss or gain.

Outcomes

- Residents will be weighed monthly, or as appropriate for their care goals.
 - Weights will be documented and care plans updated as needed.
- Dietitian (RD) and/or most responsible provider (MRP) will be notified of significant weight changes.
- Residents with significant weight change will be assessed by RD and/or MRP for reasons or causes.

Applicability

This DST applies to:

- All residents or persons in care for more than 30 consecutive days (if appropriate for their care goals).
- All Fraser Health owned-and-operated LTC facilities
- Contracted facilities may use this DST to provide direction and guidance.

Practice Level and Education

Profession(s) and role(s) DST applies to:

- Health care assistants (HCAs)
- Unit clerks (UCs)
- Nurses
- Dietitians (RDs)
- Facilities Management

Education:

- HCAs will receive orientation on the appropriate use of weigh scales and on the weighing procedure.

Policy Statements

- Each LTC Facility must have the appropriate medical [scale\(s\)](#) available for the resident population (e.g., wheelchair, bathing chair scale, bed scale).
 - [Facilities Management](#) will calibrate scales according to the manufacturer's instructions and as needed.
- Team members will follow this DST to obtain and record accurate weights for each resident at the following frequencies:
 - Within 7 days of moving in day:
 - Obtain a measured height in centimeters (cm)
 - Obtain a measured weight in kilograms (kg)
 - Monthly (or as otherwise noted on the care plan as determined by the RD or MRP)
 - Upon return from a hospital admission

Assessment

Assess the resident's height with the most appropriate method to obtain an accurate result. For example, tape measure, standing scale height, alternate arm span method (e.g., double the distance measured from the person's sternal notch to the end of the longest finger).

- Review and adjust the nutritional care plan as needed

- Additional assessments may include a review of:
 - current eating patterns,
 - food preferences,
 - swallowing problems,
 - dental or oral health problems,
 - need for assistance with eating,
 - disease conditions,
 - cognitive or communication problems,
 - depression,
 - medications,
 - special diet requirements,
 - physical and social environment
 - cultural beliefs or preferences related to food and nutrition

Intervention

New Residents

- The nurse or HCA measure the height of the resident on moving in day.
- The HCA weighs the residents following the Weighing Procedure below at the time of the first bath

Weighing Procedure (refer to [Clinical Skills: Weight Measurement - CE](#) as needed)

Before weighing the resident:

- Ask the resident to void, if appropriate, or empty urine drainage bag.
- Ask and assist the resident to remove excess clothing and shoes.
- Check [Individualized Bathing Plan - Long-Term Care and Assisted Living - Form](#) (The equipment used to help me) to identify which [scale](#) to use.
 - If using a different scale than identified on the Bathing Care Plan, note this on the Regional Monthly Weight Worksheet LTC
 - Reset the scale to zero
 - Set the scale to weigh in kilograms.
- Look for conditions or devices that may affect weight (e.g., swelling of the feet, casts, catheter or colostomy bags, splints)
 - Document conditions or devices in the care plan.
 - Subtract wheelchair and prosthesis weights from the total weight, if applicable.

After weighing the resident

- If a weight is 2kg more or less than the previous weight, the HCA weighs the resident again.
 - After repeating the weight if there is still a 2 kg difference:
 - The HCA communicates the weight change to the nurse
 - The nurse assess the resident for [significant weight change](#).

If unable to weigh the resident

- If unable to weigh resident document on the [Regional Monthly Weight Worksheet LTC](#)
 - Nurse will document in the reason in nursing notes and will identify alternate method of assessing nutritional status.
- The HCA is to attempt to weigh the resident on next bath day
 - The actual date the resident was weighed must be recorded.
- When a resident refuses to be weighed, the HCA reports this to the nurse for follow-up.

Additional Steps

- Use [appendix A and appendix B](#) to identify [significant weight changes](#) within 15 days of weighing the resident and ensure an individualized care plan is in place.

- Nurses notify the RD (enter referral in Meditech) and/or MRP of the significant weight change for assessment and follow-up as appropriate.

Monitoring

There will be monthly check for significant weight change with appropriate follow up with team members (e.g. MRP/RD/nurse)

Documentation

Moving in Day

- Nurses ensure the move-in height and weight is recorded on the [Moving Day Interview - Form \(NUXX100850\)](#)
- Nurses or HCAs record [scale](#) type and weighing method on the [Individualized Bathing Plan - Long-Term Care and Assisted Living - Form \(NUXX104719\)](#)
- HCAs add the move-in date, weight, height, and size of hip-protectors, if applicable, to the [Regional LTC Monthly Weight Worksheet](#).

HCA

- HCAs record on the [Regional LTC Monthly Weight Worksheet](#) to document:
 - Resident's monthly weight, including the weighing date, the measurement (in kg), the fit of hip-protectors (if applicable) and initial.
 - If a change in resident condition is identified, consult with the nurse to update the [scale](#) type and/or method of weighing and update the information on the [Individualized Bathing Plan - Long-Term Care and Assisted Living - Form \(NUXX104719\)](#)
 - If the resident refuses to be weighed, or the resident cannot be weighed, the HCA records on the [Regional LTC Monthly Weight Worksheet](#)

UC

- UCs (or designates) enter heights and weights into in the designated section(s) of Meditech.
 - For new residents, enter move-in height and weight (as documented on the [Moving Day Interview - Form \(NUXX100850\)](#))
 - By the 15th of each month, enter the measured weight (as documented on the [Regional LTC Monthly Weight Worksheet](#)).
- UCs (or designates) check for significant weight changes and notify the nurse.

Nurses

- Nurses review weight trend and enter the height and weight into the MDS RAI and also indicate significant changes
- If significant change identified, nurses notify RD via Meditech referral and/or MRP.
- Nurses ensure and update care plan entries regarding any foci of concern.

RDs

- RDs document in the designated section(s) of Meditech. Annually, and as needed, RDs document the following:
 - Nutrition assessments, goals, and interventions
 - Rationale if deviating from monthly weighing intervals
 - Alternate strategies to monitor nutritional status if a resident consistently refuses to be weighed

Evaluation

- Designated unit staff complete a weight-monitoring audit once or twice per year as delineated in *Audits & More*.
- Licensing weight audit

Related Resources

- [A Comprehensive Approach to Person–Centred Bathing – Clinical Practice Guideline](#)
- [Regional LTC Monthly Weight Worksheet](#)
- [Individualized Bathing Plan - Long-Term Care and Assisted Living - Form \(NUXX104719\)](#)
- [Moving Day Interview - Form \(NUXX100850\)](#)
- [Clinical Skills: Weight Measurement - CE \(elsevierperformancemanager.com\)](#)
- [InterRAI Clinical Assessment Protocols \(CAPs\) for Use with interRAI's Community and LTC Assessment Instruments](#). (Also referred to as the InterRAI CAP Manual)

Additional Information

- In LTC, resident height and weight is required to:
 - Monitor the resident's nutritional status
 - Calculate medication dosages
 - Assess medical status (e.g., fluid retention)
- [Community Care and Assisted Living Act: Residential Care Regulation](#) and *Resident Assessment Instrument (RAI)* inform this DST.

Definitions

- **Scale:** Includes various types of scales, including: wheelchair, bathing chair with scale, ceiling lift scale, bed scale, etc.
- **Significant weight change:** more than 5% change over 1 month; more than 7.5% change 3 months; or more than 10% change over 6 months.⁴ Refer to [Appendix A – Significant weight Loss Table and Appendix B – Significant Weight Gain Table](#).

Appendices

- [Appendix A: Significant Weight Loss Table](#)
- [Appendix B: Significant Weight Gain Table](#)

References

A literature search was completed and all references reviewed on April 2023, and no new evidence is available at this time.

1. Davison K, Dominik B. Audits & More: A Nutrition and Food Service Audit Manual for Adult Residential Care Facilities with 25 or more Persons in Care. Victoria: Crown Publications. 2008. Retrieved from: http://www.health.gov.bc.ca/library/publications/year/2008/Audits_and_More_Manual.pdf
2. interRAI (Organization). Instrument and Systems Development Committee, Morris JN, Belleville-Taylor P et al. [interRAI Clinical Assessment Protocols \(CAPs\) For Use With Community and Long-Term Care Assessment Instruments](#). InterRAI; 2008.
3. Morris JN, Hawes C, Mor V, Phillip C, Frieo BE, Nonemaker S, Murphy K. [Resident Assessment Instrument \(RAI\) RAI-MDS 2.0 User's Manual](#). Canadian version. Ottawa, ON: Canadian Institute for Health Information. 2012.
4. Mueller CM (ed.). The ASPEN adult nutrition support core curriculum. Short Bowel Syndrome. 3rd ed. Silver Spring: American Society for Parenteral and Enteral Nutrition. 2017:587-601.
5. Regulation Residential Care. Community Care and Assisted Living Act; 2023. Retrieved from: http://www.bclaws.ca/EPLibraries/bclaws_new/document/ID/freeside/96_2009

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