

# ***Authentic Assessment for Employability***

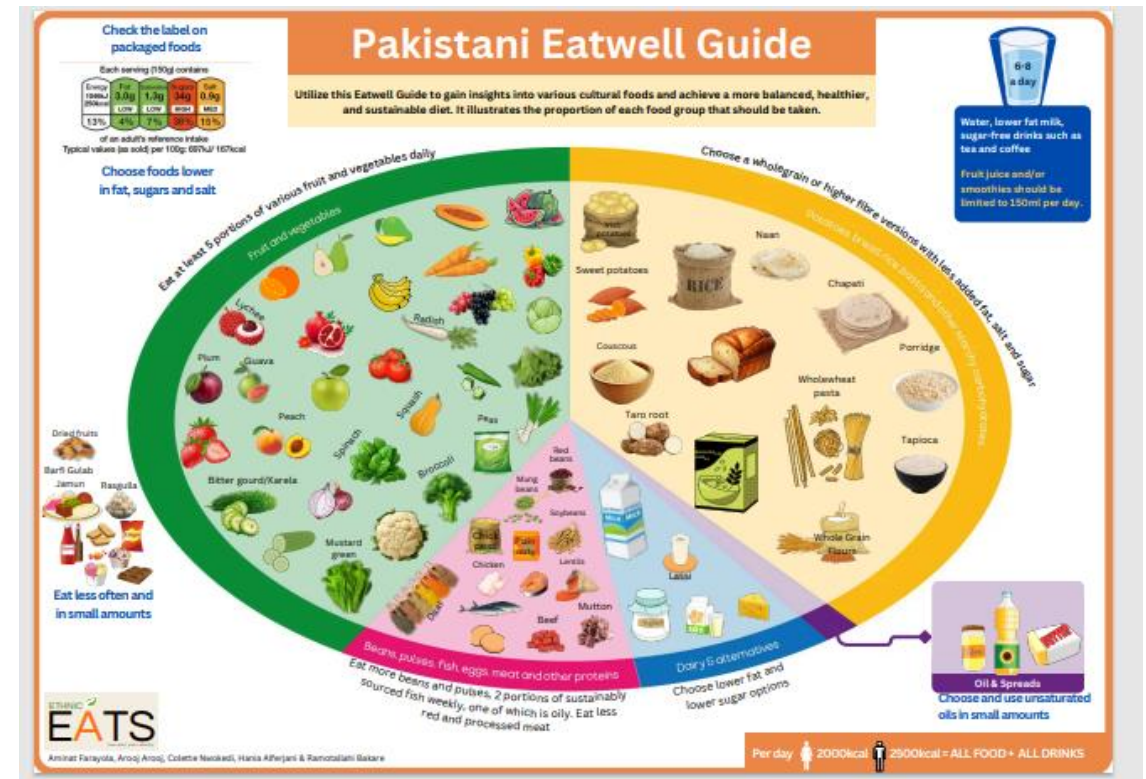
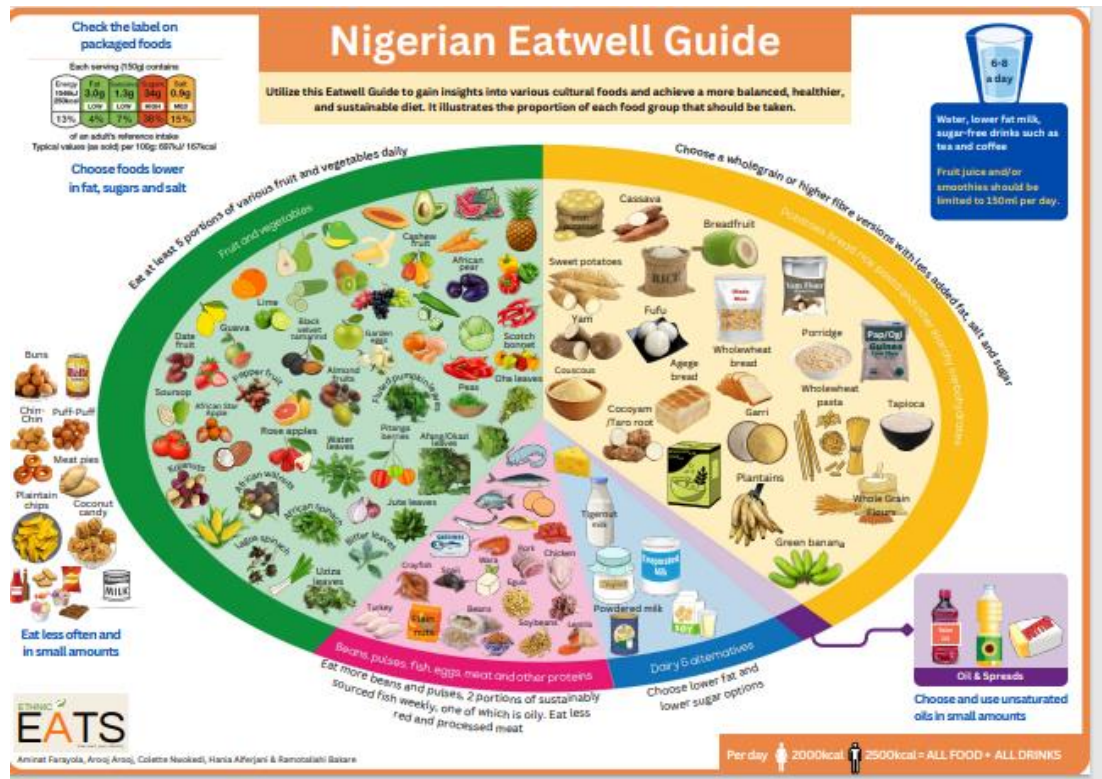
## Examples of practice.

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# Eatwell Guides adapted to different cultures.



# Vitamin A deficiency: video of PHN in practice



# Educating parents on vitamins for children



## Mini Vits

### Calcium & Vitamin D



Group	Age (yrs)	Vitamin D (µg) per day
Infants	< 1	8.5-10
Children	1-10	10
Adolescents	11-18	10

(British Nutrition Foundation, 2021)



@MINI\_VITS

<https://minivits.wixsite.com/minivits>

muscles and teeth healthy and is important in preventing rickets (a condition characterised by weak bones). It helps us to absorb calcium from our diet as even if our diet is rich in calcium, without adequate Vitamin D we cannot absorb calcium where it is needed.

Most of our Vitamin D comes from sunshine and it's difficult to get enough Vitamin D through diet alone, but some sources include:

- oily fish e.g. salmon, sardines
- egg yolks
- fortified foods – such as some spreads and breakfast cereals, infant formula milk

All infants under 1yrs old should be given a daily supplement except when having 500ml or more fortified formula milk. Children 1-4yrs and those at risk of Vitamin D deficiency should be given a daily supplement.

Children 5yrs+ a daily supplement during autumn and winter is recommended due to reduced sunlight exposure.

(British Dietetic Association, 2019b)

Food	Portion	Calcium (mg)
Cow's milk	100ml	120
Lacto-free milk	100ml	120
Calcium fortified plant-based milk	100ml	120
Cheddar	30g	222
Cheese triangle	15-17.5g	84-138
Fromage frais	47-85g	80-128
Calcium-fortified cereals	30g	174
Calcium-fortified infant cereal	20g	120
Calcium-fortified	30g	400

### What is Calcium?

Calcium is a mineral that is needed to build strong bones and teeth during childhood and adolescents, it also regulates muscle function and heartbeat. We cannot make calcium so we must get this from our diet.

### Reference Nutrient Intakes (RNI)

Group	Age (yrs)	Calcium (mg) per day
Infants	< 1	525
Children	1-3	350
	4-6	450
	7-10	550
Adolescents	11-18	800 (girls) 1000 (boys)

Food	Portion	Calcium (mg)
Sardines (with bones)	60g	273-407
Calcium-set tofu	100g (uncooked)	350-400
White bread	2 slices	155
Wholemeal bread	2 slices	106
Pitta/chapatti	65g	90
Rice pudding	200g	198
Orange	120g	29
Broccoli	85g	36
Kale	100g	150

# Protein in the elderly

**How to boost your daily protein**

**E.A.T. Protein**  
Elevate Ageing Through Protein

Stick me on your fridge!

Stay stronger for longer!

My daily protein goal is...

Snack it up!

Maintain your strength with protein

- 30g cheddar cheese (matchbox size) **8g**
- 30g paneer cheese **6g**
- 1 large egg **8g**
- 1 teaspoon skimmed milk powder - add to mash potato, soups, hot drinks **4g**
- 80g cooked red lentils (30g dried) **6g**
- 1/2 can baked beans **10g**
- 3 tablespoons (80g) green peas **4g**
- 1/2 can of tuna (70g) **13g**
- 30g handful of nuts **6g**
- small pot low fat Greek Yogurt **7g**

## Introduction

Protein is a crucial nutrient that significantly impacts the health of older adults. Present in every cell of the body, it plays a key role in maintaining good health, preserving muscle mass and enhancing physical function in older individuals. Approximately half of the body's protein is located in the muscles which tend to diminish with age, which heightens the necessity for protein intake among older adults.

## Impact of Sarcopenia

Sarcopenia, meaning "muscle poverty" in Greek, is an age-related condition characterized by muscle loss. This can lead to:

- Heart problem
- Breathing problem
- Loss of autonomy
- Poorer Metabolic Health
- Decreased Mobility
- Increased Risk of Falls

**Did you know?**

- In the UK, 4% to 25% of older, independent adults have muscle loss (sarcopenia), a number set to rise with an aging population.
- 250g/year muscle loss occur in the average adult between 30-60 and accelerates to 15% per decade after 70.

## How much protein is needed?

Category	Protein requirements g/kg body weight/day
Healthy older adults	1.0-1.2g
Older adults with an acute/chronic condition	1.2-1.5g
Older adults with severe illness/Injury	>1.5g
Older adults with a BMI >30 kg/m <sup>2</sup>	Use 75% of value above dependent on category
Older adults with a BMI >50 kg/m <sup>2</sup>	Use 65% of value above dependent on category

**Example Calculation**  
To calculate protein requirement, multiply weight in kilograms with the values above which applies to an individual. For example, if a healthy older adult weighs 56kg, protein requirement would be: 56 x 1.2 = 67g of protein per day.

## Identifying Sarcopenia

A feasible approach for community healthcare providers:

**SARC-F Questionnaire:** This quick 5-question tool helps determine the likelihood of sarcopenia (Resource link: [https://www.physio-pedia.com/SARC-F\\_A\\_Simple\\_Questionnaire\\_to\\_Rapidly\\_Diagnose\\_Sarcopenia](https://www.physio-pedia.com/SARC-F_A_Simple_Questionnaire_to_Rapidly_Diagnose_Sarcopenia))

**Strength Measurements:** If the SARC-F score suggests sarcopenia (generally, a score of 4 or higher), follow up with simple strength tests like handgrip strength and the sit-stand test (Resource link: <https://www.cdc.gov/steady/materials.html>)

## Manchester Focus

**Manchester Health and Social Care Cohort Profile**

4,081 adults which equates to 6.7% of the adult population aged 65+ are frail and experience:

- 3 times higher rate of A&E attendance compared to other 65+ year olds.
- 70% of A&E visits result in admission compared to 57% for all 65+ adults.
- 4 times higher average cost per emergency admission
- Frail older adults have more long term conditions

**Falls are a major problem for over 65s:**

- Leading cause of hospital admissions for injuries (particularly hip fractures).
- Half of those with hip fractures have serious complications or die within 3 months.

**Preventing falls can save lives and reduce hospital admissions:**

- Targeting 50-64 year olds now can prevent future falls in older adults.
- Reducing sarcopenia (muscle loss), linked to protein deprivation, is key to fall prevention.

# Other nutrition campaigns

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