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FREE PROFESSIONAL RESOURCE

Anaemia Awareness in Care Settings

A Practical Guide for Care Staff

Knowledge Hub Resource 069

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Introduction

Anaemia is a condition in which the blood is less able to carry oxygen around the body effectively. This commonly occurs because there are **too few red blood cells or not enough haemoglobin** within the red blood cells.

Haemoglobin is an iron-containing protein that carries oxygen from the lungs to the body's tissues and organs. When haemoglobin levels are too low, the body may not receive the oxygen it needs as efficiently.

There are several different types and causes of anaemia, and treatment depends on the underlying cause. Care staff should therefore **never assume that all anaemia is caused by iron deficiency**.

Why This Resource Matters

Understanding anaemia awareness helps care staff to:

- Understand what anaemia is.
- Recognise some of the common signs and symptoms.
- Understand that anaemia can have different underlying causes.
- Recognise changes in energy levels, mobility and everyday functioning.
- Support prescribed medication or supplements appropriately.
- Support nutrition according to the individual's care plan.
- Recognise symptoms that could indicate blood loss.
- Understand how dizziness or weakness may increase falls risk.
- Record and report significant changes accurately.
- Recognise deterioration that may require urgent medical assessment.
- Promote safe, dignified and person-centred care.

Common Types and Causes of Anaemia

Anaemia can occur for many different reasons.

Iron Deficiency Anaemia

Iron is required for the production of haemoglobin. Iron deficiency may occur because of insufficient iron, problems absorbing iron or **blood loss**.

It is important that unexplained iron deficiency is appropriately medically assessed rather than simply assumed to be dietary.

Vitamin B12 or Folate Deficiency Anaemia

Vitamin B12 and folate are important for producing healthy red blood cells.

Deficiency can develop because of dietary factors, certain health conditions, problems absorbing nutrients or some medications.

Anaemia Associated with Long-Term Conditions

Some long-term illnesses, including **chronic kidney disease and inflammatory conditions**, can contribute to anaemia.

Other types of anaemia can also occur, which is why diagnosis and treatment should always be determined by appropriately qualified healthcare professionals.

Possible Signs and Symptoms

An individual with anaemia may experience:

- Persistent tiredness or reduced energy.
- Weakness.
- Shortness of breath, particularly during activity.
- Dizziness or light-headedness.
- Headaches.
- Palpitations or awareness of their heartbeat.
- Paler skin than is usual for the individual.
- Reduced ability to manage normal activities.
- Difficulty concentrating.
- Feeling generally less well than usual.

Symptoms can develop gradually and may initially be subtle.

These symptoms can also occur with many other health conditions, so care staff should **observe and report rather than attempt to diagnose anaemia themselves**.

Key Message

Anaemia is not a single condition with a single treatment.

Iron deficiency is one possible cause, but anaemia can result from vitamin deficiencies, blood loss, long-term illness and other medical conditions.

Care staff should **never independently start iron supplements or make assumptions about the cause of anaemia**.

Follow the individual's care plan and prescribed treatment, recognise changes from their usual condition and report concerns appropriately.

Supporting an Individual with Anaemia

The effects of anaemia can vary considerably between individuals. Some people may experience relatively mild symptoms, while others may find that tiredness, weakness, dizziness or breathlessness significantly affect their everyday activities.

Care should always be based on the **individual's diagnosis, prescribed treatment, abilities and care plan**.

Care staff can provide important support by recognising changes, promoting independence safely and ensuring concerns are reported appropriately.

Supporting Nutrition

Depending on the cause of anaemia, healthcare professionals may provide specific dietary advice.

Where appropriate to the individual's care plan, staff can support a **balanced and varied diet** containing suitable sources of essential nutrients.

Sources of iron can include:

- Meat and poultry.
- Fish.
- Beans, lentils and pulses.
- Dark green leafy vegetables.
- Fortified breakfast cereals.
- Nuts and seeds.
- Dried fruit.

Vitamin B12 is naturally found mainly in animal-derived foods, including meat, fish, eggs and dairy products, and may also be present in fortified foods.

Folate can be found in foods including green vegetables, peas, chickpeas, beans and some fortified foods.

Care staff should follow any **individual dietary requirements, allergies, texture modifications or specialist nutritional advice**.

Medication and Supplements

Treatment for anaemia depends on its cause.

An individual may be prescribed treatments such as:

- Iron supplements.
- Vitamin B12 tablets or injections.
- Folic acid.
- Treatment for an underlying health condition.
- Other specialist treatment determined by healthcare professionals.

Care staff should:

- Support prescribed treatment only when trained, competent and authorised.
- Follow the prescription and Medication Administration Record (**MAR**) accurately.
- Never independently start, stop or change supplements or medication.
- Observe for possible side effects.
- Report concerns according to organisational procedures.

Iron supplements can sometimes cause gastrointestinal effects such as **constipation, nausea, abdominal discomfort or darker stools**. Staff should follow the individual's care plan and report concerns appropriately.

Anaemia, Weakness and Falls

Tiredness, weakness, dizziness and light-headedness may affect an individual's mobility and increase their risk of falling.

Care staff should:

- Encourage the individual to take their time when changing position.
- Follow existing mobility and falls-prevention plans.
- Ensure prescribed mobility aids are readily available.
- Provide assistance with mobility according to the person's assessed needs.
- Observe for new or worsening dizziness or weakness.
- Report falls, near misses or significant changes in mobility.

A noticeable reduction in an individual's ability to walk or complete their normal activities should **not simply be attributed to ageing**.

Recognising Possible Blood Loss

Blood loss can contribute to some forms of anaemia and may sometimes require urgent medical assessment.

Care staff should report unexplained signs such as:

- Visible blood in urine.
- Blood in stools.
- Vomiting blood.
- Coughing up blood.
- Unusual or prolonged bleeding.
- Unexplained significant bruising.
- Persistent bleeding from a wound.
- Menstrual bleeding that the individual reports as unusually heavy, where relevant.

Very dark or black stools can occur with gastrointestinal bleeding, although **iron medication can also make stools darker**. Staff should not attempt to determine the cause themselves.

Any concerning or unexpected change should be reported according to the individual's care plan and organisational procedures.

Supporting Everyday Wellbeing

Anaemia can leave an individual feeling unusually tired and less able to manage their normal routine.

Care staff can help by:

- Allowing sufficient time for everyday activities.
- Providing appropriate opportunities for rest.
- Supporting independence without unnecessarily taking over.
- Planning activities around the individual's energy levels where possible.
- Supporting appropriate nutrition and hydration.
- Listening when the individual reports tiredness, dizziness or breathlessness.
- Recognising changes from their normal abilities.
- Recording and reporting concerns accurately.

Remember

Do not assume that persistent tiredness or weakness is simply part of getting older.

Changes in energy, breathlessness, dizziness, mobility or everyday functioning may indicate an underlying health problem.

Care staff should know what is normal for the individual, **recognise changes, record accurately and report concerns promptly**.

Professional Responsibilities

Care staff have an important role in supporting individuals who have anaemia or are being investigated or treated for the condition.

Because symptoms such as tiredness, weakness and breathlessness may develop gradually, staff should understand the individual's **usual level of health, mobility and independence** so that significant changes can be recognised.

As a care professional, you should always:

- Treat the individual with dignity, patience and respect.
- Follow the person's individual care plan and prescribed treatment arrangements.
- Support prescribed medication or supplements only when trained, competent and authorised.
- Never independently start, stop or alter iron, vitamin supplements or other prescribed treatment.
- Follow individual nutrition and hydration arrangements.
- Observe for changes in tiredness, weakness, breathlessness, dizziness or mobility.
- Take reports of new or worsening symptoms seriously.
- Be alert to unexplained or significant bleeding.
- Follow falls-prevention and mobility arrangements where appropriate.
- Record relevant observations accurately and objectively.
- Report significant changes promptly.
- Follow organisational escalation and emergency procedures.

When to Raise Concerns

Report concerns promptly if the individual:

- Becomes noticeably more tired or weak than usual.
- Develops new or worsening breathlessness.
- Experiences persistent or increasing dizziness or light-headedness.
- Develops palpitations or reports that their heart is racing.
- Experiences fainting or near-fainting.
- Shows a significant reduction in mobility or ability to manage usual activities.
- Has repeated falls or becomes increasingly unsteady.
- Has significantly reduced food or fluid intake.
- Develops concerning side effects from prescribed treatment.
- Has unexplained bruising or bleeding.
- Develops blood in their urine or stools.
- Develops black, tar-like stools that are unexpected or accompanied by other concerning symptoms.
- Shows any other significant deterioration from their usual condition.

Care staff should **report what they observe rather than attempt to determine whether anaemia is responsible**.

When to Call 999

Some symptoms may indicate **serious blood loss or another medical emergency**.

Call **999** if the individual:

- Has severe difficulty breathing.
- Develops severe or sudden chest pain.
- Collapses, loses consciousness or is difficult to wake.
- Vomits a significant amount of blood.
- Experiences severe or uncontrolled bleeding.
- Passes a significant amount of blood and appears seriously unwell.
- Develops sudden severe weakness, confusion or other signs of serious deterioration.
- Appears critically unwell or is deteriorating rapidly.
- Has symptoms that make you believe their life is at immediate risk.

If a life-threatening emergency is suspected, **call 999 and follow organisational emergency procedures**.

Anaemia and Other Health Conditions

Anaemia may occur alongside other long-term conditions.

For example, individuals living with **chronic kidney disease, inflammatory conditions or other illnesses** may develop anaemia as part of their overall health condition.

This means that changes such as fatigue, weakness or breathlessness should be considered alongside the person's:

- Existing diagnoses.
- Normal level of functioning.
- Current medication.
- Care plan.
- Recent changes in health.
- Prescribed monitoring arrangements.

Care staff should avoid assuming that a symptom has one particular cause.

Recording and Reporting

When raising a concern, useful information may include:

- What has changed from the individual's usual condition.
- When the change was first noticed.
- Whether symptoms occur at rest or during activity.
- Changes in mobility or ability to complete everyday activities.
- Any dizziness, fainting, breathlessness or palpitations.
- Changes in appetite or food and fluid intake.
- Any observed or reported bleeding.
- Falls or near falls.
- Relevant prescribed treatment and any reported side effects.

Clear, factual documentation can help healthcare professionals assess changes appropriately.

Good Practice Reminder

Anaemia should not be diagnosed from symptoms alone.

Tiredness, weakness, dizziness and breathlessness can occur for many different reasons.

Care staff should focus on the **whole person**, recognise changes from their normal condition and abilities, record observations accurately and **report concerns promptly for appropriate assessment**.

Summary

Anaemia is a condition in which the blood is less able to carry oxygen around the body effectively, commonly because there are **too few red blood cells or insufficient haemoglobin**.

There are several different types and causes of anaemia, including **iron deficiency, vitamin B12 or folate deficiency, blood loss and some long-term health conditions**. Treatment therefore depends on the underlying cause.

Possible symptoms include tiredness, weakness, breathlessness, dizziness, headaches, palpitations and reduced ability to manage everyday activities.

Care staff play an important role by understanding what is normal for the individual, supporting prescribed treatment, following nutrition and care plans, recognising possible signs of blood loss and reporting significant changes promptly.

Anaemia Awareness Checklist

✓ Understand that there are **different types and causes of anaemia**.

✓ Never assume that all anaemia is caused by iron deficiency.

✓ Know the individual's usual health, mobility and level of independence.

✓ Observe for increased tiredness, weakness, breathlessness or dizziness.

✓ Recognise changes in mobility or ability to complete everyday activities.

✓ Support a balanced diet according to the individual's care plan and nutritional requirements.

✓ Support prescribed medication or supplements only when trained, competent and authorised.

✓ **Never independently start, stop or alter iron, vitamin supplements or other prescribed treatment.**

✓ Be alert to possible side effects from prescribed treatment.

✓ Recognise that dizziness and weakness may contribute to an increased risk of falls.

✓ Be alert to unexplained or significant bleeding.

✓ Record relevant observations accurately and objectively.

✓ Report significant changes from the individual's usual condition promptly.

✓ Recognise serious deterioration or significant blood loss as potentially requiring emergency assistance.

✓ **Call 999 if a life-threatening medical emergency is suspected.**

Further Information

For further guidance on anaemia, visit:

NHS – Iron Deficiency Anaemia
https://www.nhs.uk/conditions/iron-deficiency-anaemia/

NHS – Vitamin B12 or Folate Deficiency Anaemia
https://www.nhs.uk/conditions/vitamin-b12-or-folate-deficiency-anaemia/

NICE – Anaemia
https://cks.nice.org.uk/topics/anaemia-iron-deficiency/

British Society for Haematology
https://b-s-h.org.uk/

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Related Knowledge Hub Resources

- Resource 007 – Preventing Dehydration in Care Settings
- Resource 008 – Encouraging Good Nutrition in Care Settings
- Resource 014 – Preventing Falls in Care Settings
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- Resource 034 – Recognising Deterioration in Care Settings
- Resource 049 – Frailty Awareness
- Resource 065 – Chronic Kidney Disease (CKD) Awareness in Care Settings

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