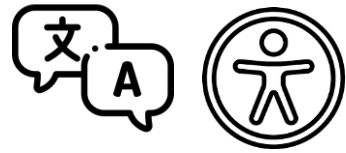




Community Dietitians' Care Home Referrals Pack



The Community Dietitian Service

Who are we?

- A team of six registered Dietitians, one Dietetic Assistant Practitioner, two Dietetic Assistants and various administration staff.
- We are split into two teams – Food First and Clinical Community
- We are open Monday to Friday 0800-1600hrs.
- Telephone: 01908 995416; if we are not available, please leave a message on our secure answerphone. We will respond as soon as possible but this may not be until the next working day.
- The best way to contact us is via email.

Food First Team

We offer a training and accreditation service to Care Homes for older adults registered with a Milton Keynes GP. We work with the BLMK ICB Medicines Optimisation team to ensure appropriate prescribing of Oral Nutritional Supplements (ONS) by GPs and other community professionals.

All care home referrals should be sent to the Food First team.

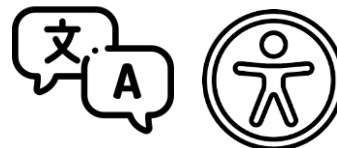
Email: food.first@mkuh.nhs.uk

Clinical Community Team

We see the following people in their own homes, hospices and respite facilities who are registered with a Milton Keynes GP:

- Any adult with a tube feed in place (own home / care home).
- Any adult requiring ongoing dietetic intervention with mobility problems who cannot attend a clinic appointment at Milton Keynes University Hospital.

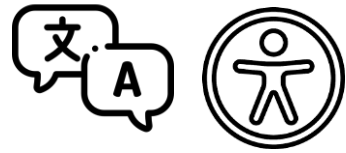
Email: community.dietetics@mkuh.nhs.uk



Nutrition Care Plans

Calculate a Malnutrition Universal Screening Tool (MUST) score each month and follow the guidelines below depending on what nutritional risk score has been recorded.

Malnutrition Universal Screening Tool (MUST)		
Step 1 BMI Score	Step 2 Weight Loss Score	Step 3 Acute Disease Effect Score
BMI kg/m ² Score >20 (>30 Obese) = 0 18.5 – 20 = 1 <18.5 = 2	Unplanned weight loss in past 3-6 months % Score <5 = 0 5-10 = 1 >10 = 2	If the patient is acutely ill and there has been or is likely to be no nutritional intake for >5 days Score = 2
Step 4 - Overall risk of malnutrition / undernutrition		
Add scores together to calculate overall risk of malnutrition Score 0 = Low Risk, Score 1= Medium Risk, Score 2 or more = High Risk		
Step 5 - Management Guidelines		
Score 0 Low Risk Routine clinical care Repeat screening monthly	Score 1 Medium Risk Observe Please turn over for Medium Risk care plan	Score 2 or more High Risk Treat* Please turn over for High Risk care plan * Unless detrimental or no benefit is expected from nutritional support e.g. imminent death
All risk categories <ul style="list-style-type: none"> • Treat underlying conditions and provide help and advice on food choices, eating, and drinking when necessary. • Record malnutrition risk category and care plan in clinical notes. • Record need for special diets and follow local guidelines for those identified as moderate or high risk of undernutrition (see overleaf). • Re-assess subjects as they move through care settings. • If no weight/height available, please use the subjective criteria in the MUST tool to estimate. 		
Obesity: Record the presence of obesity. For those with underlying conditions, these are generally controlled before the treatment of obesity.		



MUST Management Guidelines

Score 0 = LOW RISK:

Aim to maintain a healthy weight and follow a balanced diet.

- If overweight (BMI $>30\text{kg}/\text{m}^2$), encourage healthier alternatives for meals and snacks and inspire to take part in physical activity.

Score 1 = MEDIUM RISK:

Aim to increase oral intake by an **extra 500kcal** per day to prevent further weight loss or to achieve and maintain a healthy BMI ($>20\text{kg}/\text{m}^2$).

- At least 2 nourishing drinks, snacks **or** a fortified diet are offered as per the service user's preference.
- Record food and fluid intake for at least 3 days to highlight problem areas; be specific when recording quantities consumed.
- Follow fortified diet plan for at least one month to encourage weight gain or maintenance.

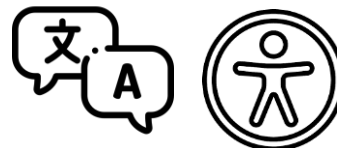
Score 2+ = HIGH RISK:

Aim to increase oral intake by an **extra 500-1000kcal** per day to prevent further weight loss and to achieve and maintain a healthy BMI ($>20\text{kg}/\text{m}^2$).

- At least 2 nourishing drinks, snacks **and** a fortified diet are offered as per the service user's preference.
- Record food and fluid intake for at least 3 days to highlight problem areas; be specific when recording quantities consumed.

Notes:

- If weight is stable or increases after one month of following a fortified diet, continue to follow the above plan until MUST score is lowered.
- All service users who have a MUST score of 2 or more and continue to lose weight after one month of following a fortified diet plan should be referred to the Food First service as specialist intervention may be indicated.
- Food fortification and homemade boosters should always be the first choice for managing malnutrition. However, over the counter or prescribed oral nutritional supplements may sometimes be recommended by Dietitians as an addition. All service users taking oral nutritional supplements must be under regular review.



Process Pathway

<p>All service users who have a MUST score of 2 or more and continue to lose weight after one month of following the MUST Management Guidelines should be referred to the Food First service.</p>	
<p>Referrals will also be accepted if service users:</p> <p>Have been following MUST management guidelines for at least one month but still have:</p> <ul style="list-style-type: none"> ○ A stable BMI of <math><18.5\text{kg/m}^2</math> and are keen to gain weight ○ A Grade 3 or 4 pressure wound/non-healing wound ○ Frequent falls ○ Weight loss of >2kg in any one month after confirmation of at least two readings <p>Or:</p> <ul style="list-style-type: none"> ○ Have complex nutritional needs such as uncontrolled diabetes, renal failure, CKD 3 with high potassium, heart failure with volume restrictions, gastrointestinal disorders. ○ Are at risk of developing refeeding syndrome (BMI <math><16\text{kg/m}^2</math>, or who have had little or no nutritional intake for the last 10 days, or who have lost >15% body weight in the last 3-6 months but excluding those at the end of life). ○ Are reliant on fluid as the sole source of nutrition. ○ Are admitted to a Care Home already on a prescription of ONS. This includes residents discharged from hospital on ONS or started by the GP without a recommendation from a Dietitian. Referral should be completed as soon as possible and certainly within 1 month of admission to the care home 	
<p>Prescribing ONS:</p> <p>Do not continue ONS after hospital admission unless specifically requested by a Dietitian (nutrition statement on discharge summary/dietetic letter, not TTO list). Service users being discharged to care homes should not routinely be prescribed ONS – MUST Management Guidelines should be followed.</p> <p>Do not start ONS for service users without specific request from a Dietitian – MUST Management Guidelines should be followed.</p>	<p>Referrals</p> <p>Care homes will receive a triage telephone call upon receipt of referral. Staff should provide all the required information on the referral form.</p> <p>After triage, Food First dietitians will aim to:</p> <ul style="list-style-type: none"> ○ Suggest ways to improve Food First approach implementation. ○ Recommend appropriate prescribed ONS (if required). ○ If necessary, refer on to Clinical Community Dietetics for ongoing follow up.



Helpful tips to remember

- **Eat 'little and often'**: try small nourishing meals, snacks and drinks every 2-3 hours throughout the day
- **Have nutrient dense snacks between meals and at bedtime.** Such as toast with butter and jam, creamy or Greek yoghurt, cake, chocolate, cereal with milk, full fat mousse, cheese sandwich, cream cheese and crackers, fruit juice and nuts, biscuits, or try a nourishing drink
- **Serve main meals** with a creamy sauce e.g. cheese sauce, curry sauce, parsley sauce
- **Choose full fat and full sugar*** products rather than 'diet' 'reduced/low fat'
- **Fortify whole milk and aim for 1 pint / 568mls per day.** Add 4 heaped tablespoons of dried skimmed milk powder into 1 pint / 568mls of whole milk and stir until dissolved. Chill in the fridge and then use on cereals, porridge, sauces, soups, desserts, jellies, milky drinks etc.
- **Have plenty of nourishing fluids:** aim for 8 glasses (2 litres) a day. Try sweetened fruit juice*, chilled or warm fortified milk, coffee, hot chocolate, milkshakes, or malted drinks made with all milk (fortified). Choose drinks with high sugar content e.g. fruit juice, full-sugar squash, smoothies, full-sugar lemonade, cola
- **A little alcohol** before a meal can stimulate appetite, but check with your GP or pharmacist first if you take any medications
- **For a balanced diet choose a wide variety of foods.** At each meal try to have a protein food (meat, fish, egg, cheese, milk, vegetarian alternative i.e Quorn, soya) and a starchy food (bread, cereals, potato, rice, pasta). Eat fruit and vegetables every day – puree or take as juice if easier
- **Consider an over-the-counter A-Z multivitamin and mineral supplement** if you are only eating a small amount or a limited variety of foods. Avoid these however if you are taking 2 or more nutritional supplement drinks daily (such as Complan, Meritene or Foodlink Complete)



*** If you have diabetes, continue to choose sugar-free drinks. You can have a moderate amount of sugar containing foods.** Contact your Nurse or GP if you have concerns such as continued weight loss, difficulty taking solids, worsening appetite, limited food variety, or if you have diabetes and are experiencing high blood glucose levels.



Booster drinks

Milky

1/3 pint/180ml hot/cold full fat milk
2 generous tablespoons (30g) skimmed milk powder
2 tablespoons double cream
4 heaped teaspoons (20g) vitamin fortified milkshake powder or other powdered milk drinks

Or, for a **plant-based** option

1/3 pint/180ml Alpro Growing Up Soya Drink
20g soya protein powder
20g plant-based vitamin fortified milkshake powder / 40ml undiluted premium cordial (not sugar free/diet/no added sugar)

- Mix dry ingredients together in a glass/mug.
- Gradually mix in liquid and stir well.

These recipes provide equivalent calories and protein to most prescribed milky ONS: **300-400kcal, 17g protein.**

Juicy

1/3 pint/180ml pure fruit juice (using a multivitamin juice will provide more vitamins)
40ml undiluted premium cordial (not sugar free/diet/no added sugar)
10g (2 x 5g sachets) egg white powder (found in the home baking section of most supermarkets or larger, better value packs can be purchased online)

- Put egg white powder in a glass.
- Gradually stir in undiluted cordial (do not whisk).
- Add the fruit juice slowly and stir well.

This recipe provides equivalent calories and protein to most prescribed juice style ONS: **~250kcal, 9g protein**

People with diabetes should take care with these recipes due to their high carbohydrate content. It is recommended that they are sipped slowly and/or taken at mealtimes.

If you have been recommended Thickened Fluids by a Speech and Language Therapist, you will need to thicken the drinks recipes to your recommended stage with your prescribed thickening powder.

Further Resources

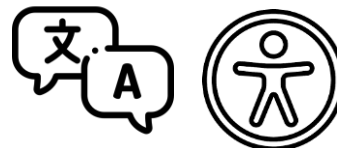
[100kcal Boosters \(cambcommunityservices.nhs.uk\)](http://cambcommunityservices.nhs.uk)

[BLMK Nourishing Of Drinks \(cambcommunityservices.nhs.uk\)](http://cambcommunityservices.nhs.uk)

[Fortified Diet Plan \(cambcommunityservices.nhs.uk\)](http://cambcommunityservices.nhs.uk)

[BLMK Food Enrichment \(cambcommunityservices.nhs.uk\)](http://cambcommunityservices.nhs.uk)

Visit www.mkuh.nhs.uk for accessibility and translation services.



We encourage patients to be involved in their care by:

1. Being part of the conversation and shared decision making
2. Asking questions if something is not clear
3. Speaking up if you have concerns

Checks are there to protect you and you can be part of them. Behave with respect and kindness towards healthcare professionals.

We ask for information about you so that you can receive proper care and treatment. This information remains confidential and is stored securely by the Trust in accordance with the provisions of the Data Protection Act 2018/GDPR. Further guidance can be found within our privacy notice found on our Trust website: www.mkuh.nhs.uk

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