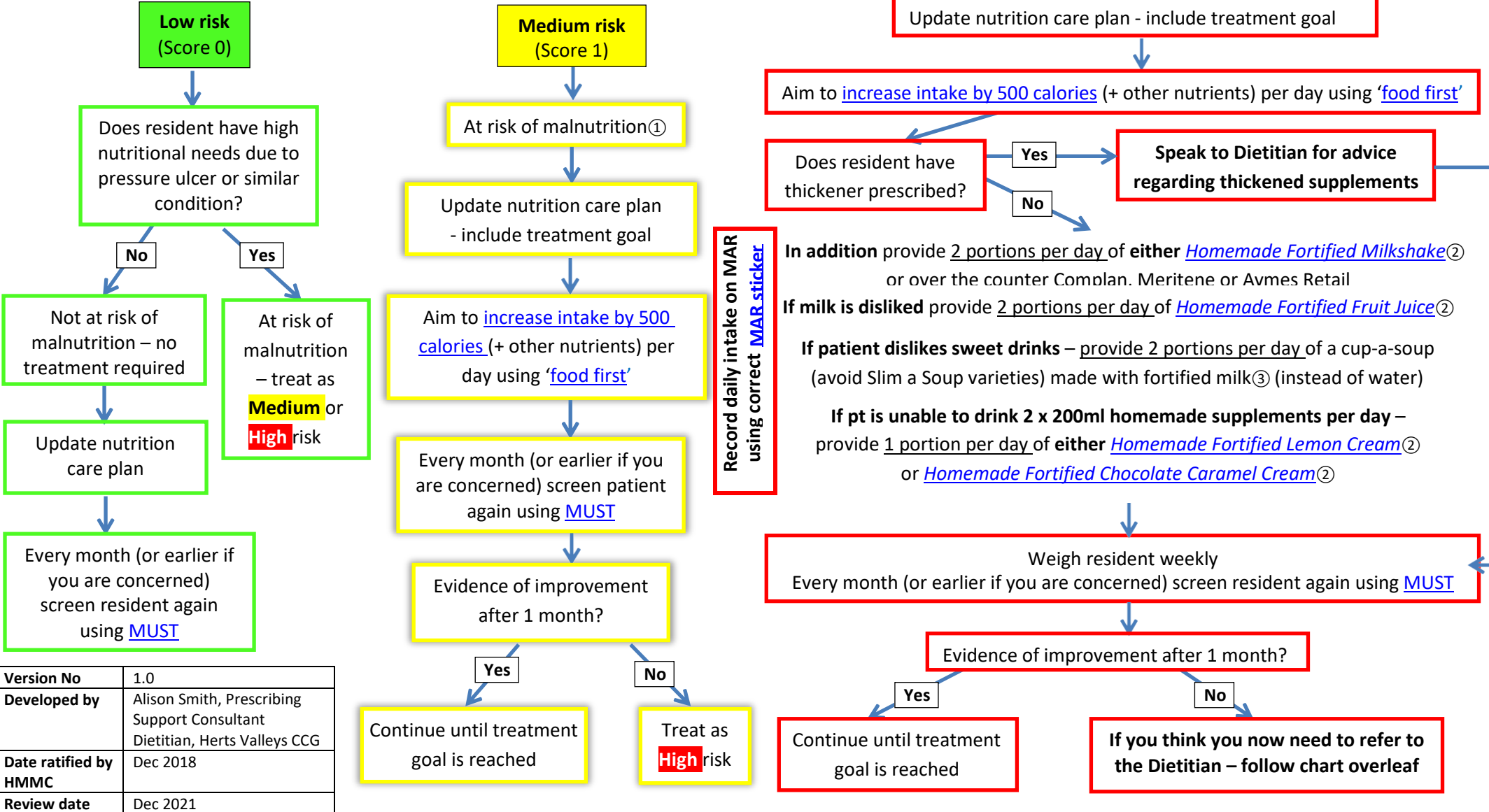


Malnutrition management pathway (based on MUST) – \*Make sure this has been followed before contacting the Dietitian\*

- ① If a resident is currently **overweight** or was overweight prior to unplanned weight loss, consider whether regaining weight is in their best interests. If weight regain is not in the residents best interests, consider treating resident as lower risk category to avoid significant weight regain. Record reason for this in residents nutrition care plan
- ② All **Homemade Supplements must** be made **exactly** according to the recipes provided by Herts CCGs
- ③ Make **fortified milk** by adding 4 tablespoons/60g dried, skimmed milk powder to each pint of full fat milk

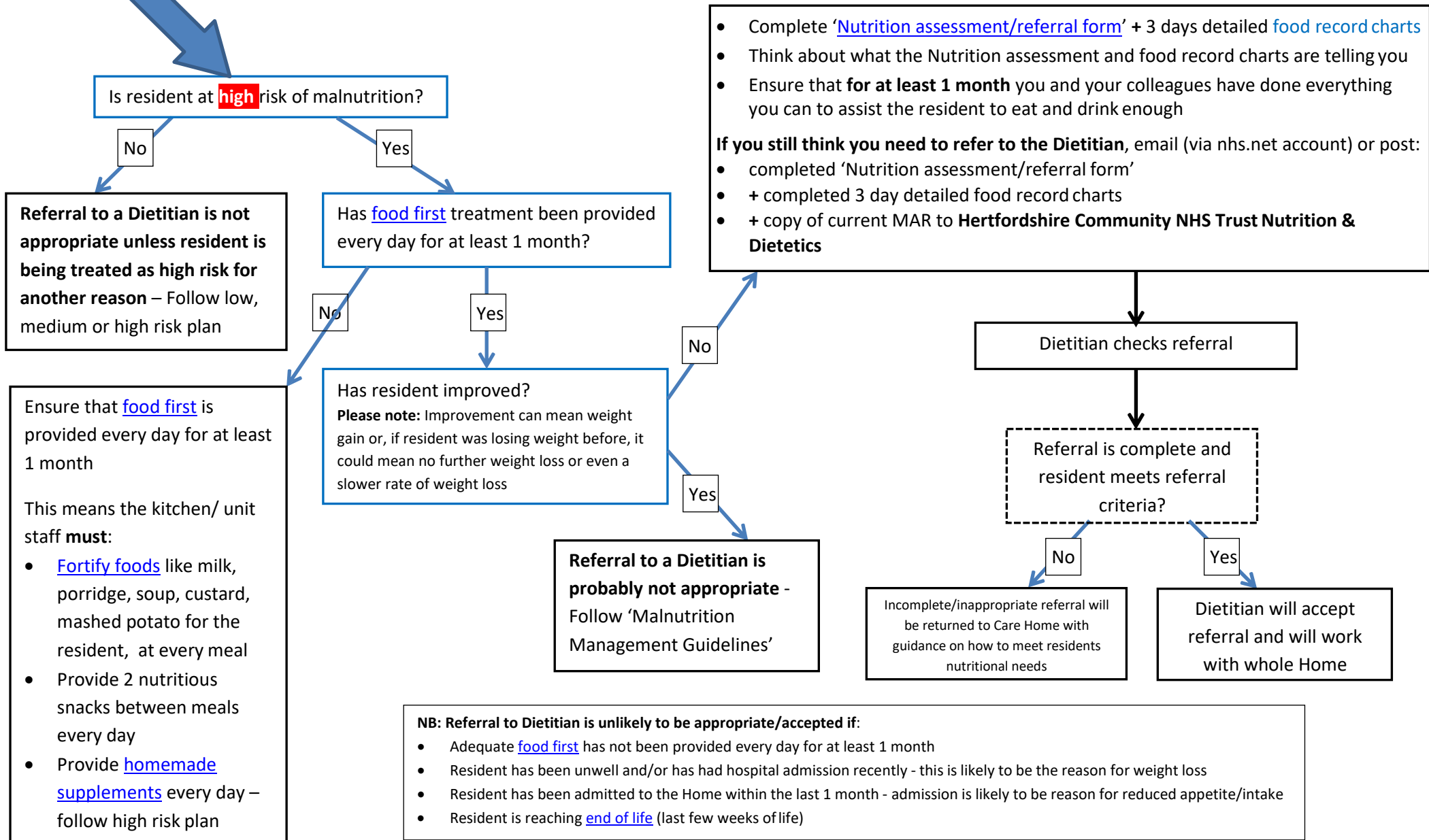


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# Malnutrition Management Guidelines - Referring a care home resident to the Dietitian because of malnutrition

**START HERE**

**Please note:** In most cases referral of a resident will be treated as a referral for your whole Home. The Dietitian is therefore likely to review nutrition for all residents



**Referral to a Dietitian is not appropriate unless resident is being treated as high risk for another reason – Follow low, medium or high risk plan**

Ensure that **food first** is provided every day for at least 1 month

This means the kitchen/ unit staff **must**:

- **Fortify foods** like milk, porridge, soup, custard, mashed potato for the resident, at every meal
- Provide 2 nutritious snacks between meals every day
- Provide **homemade supplements** every day – follow high risk plan

Has **food first** treatment been provided every day for at least 1 month?

Has resident improved?  
**Please note:** Improvement can mean weight gain or, if resident was losing weight before, it could mean no further weight loss or even a slower rate of weight loss

**Referral to a Dietitian is probably not appropriate - Follow 'Malnutrition Management Guidelines'**

- Complete '**Nutrition assessment/referral form**' + 3 days detailed **food record charts**
- Think about what the Nutrition assessment and food record charts are telling you
- Ensure that **for at least 1 month** you and your colleagues have done everything you can to assist the resident to eat and drink enough

**If you still think you need to refer to the Dietitian**, email (via nhs.net account) or post:

- completed '**Nutrition assessment/referral form**'
- + completed 3 day detailed food record charts
- + copy of current MAR to **Hertfordshire Community NHS Trust Nutrition & Dietetics**

Dietitian checks referral

Referral is complete and resident meets referral criteria?

Incomplete/inappropriate referral will be returned to Care Home with guidance on how to meet residents nutritional needs

Dietitian will accept referral and will work with whole Home

**NB: Referral to Dietitian is unlikely to be appropriate/accepted if:**

- Adequate **food first** has not been provided every day for at least 1 month
- Resident has been unwell and/or has had hospital admission recently - this is likely to be the reason for weight loss
- Resident has been admitted to the Home within the last 1 month - admission is likely to be reason for reduced appetite/intake
- Resident is reaching **end of life** (last few weeks of life)