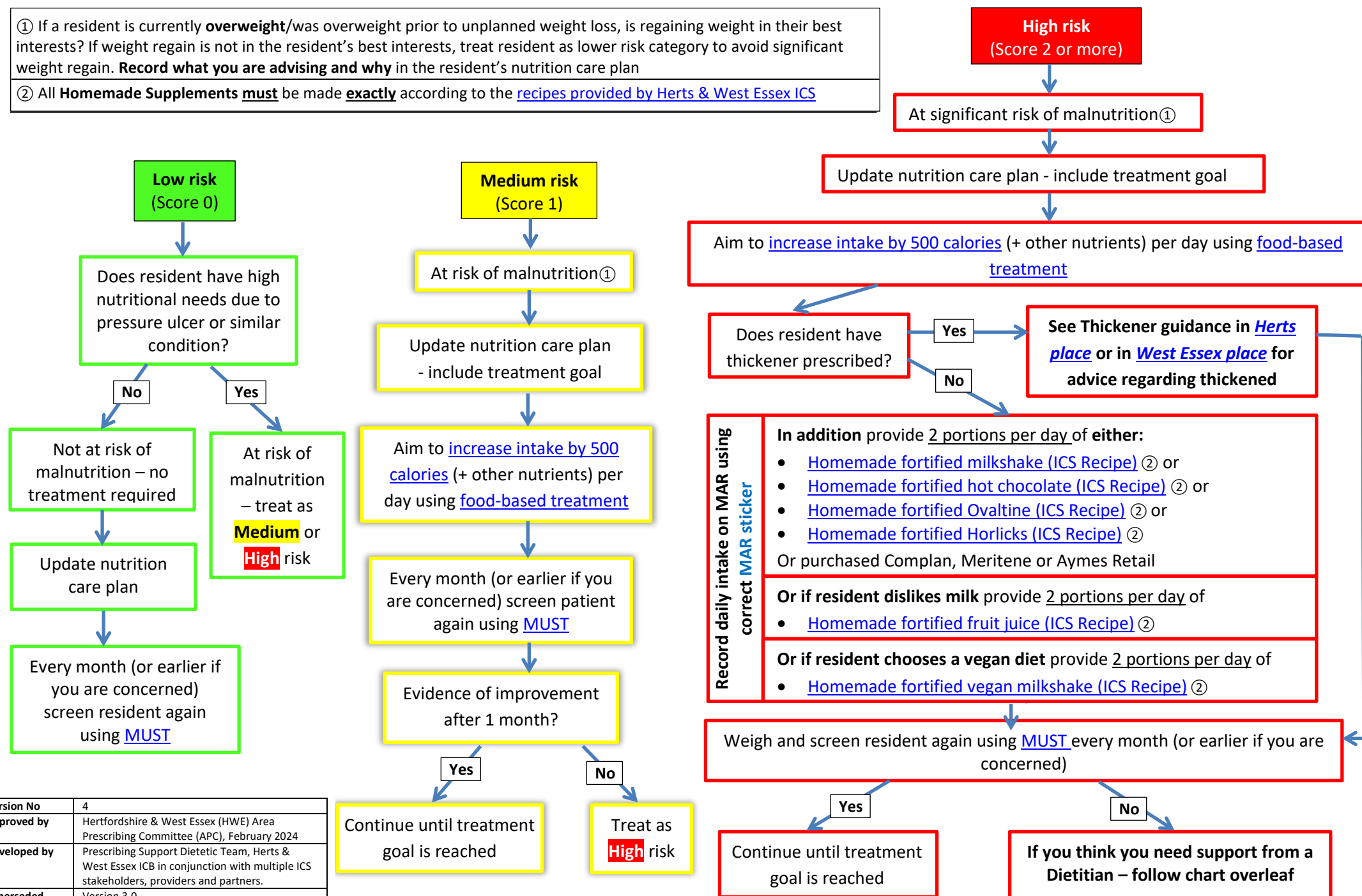


Care Home malnutrition management pathway (based on MUST) – *Pathway must be followed before referring to the Dietitian*

① If a resident is currently **overweight**/was overweight prior to unplanned weight loss, is regaining weight in their best interests? If weight regain is not in the resident's best interests, treat resident as lower risk category to avoid significant weight regain. **Record what you are advising and why** in the resident's nutrition care plan

② All **Homemade Supplements** **must** be made **exactly** according to the [recipes provided by Herts & West Essex ICS](#)



Version No	4
Approved by	Hertfordshire & West Essex (HWE) Area Prescribing Committee (APC), February 2024
Developed by	Prescribing Support Dietetic Team, Herts & West Essex ICB in conjunction with multiple ICS stakeholders, providers and partners.
Superseded version	Version 3.0

Care Home malnutrition management pathway - 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 Care Home**. The Dietitian is therefore likely to review nutrition for all residents

Is resident at **high** risk of malnutrition?

No

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

Yes

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

No

Yes

No

Make sure that **food-based treatment** 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 using nutrient dense ingredients for residents at medium & high risk only
- Provide 2 nutritious snacks between meals every day
- Provide **Homemade supplements (ICS recipes)** twice a day every day – follow high risk plan

Has resident improved?

Please note: Improvement can mean weight gain, no further weight loss, a slower rate of weight loss

Yes

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

- Make sure that **for at least 1 month** you and your colleagues have done everything you can to support the resident to eat and drink enough
- **If you still think you need support from a Dietitian** see below for what to do in your area:

Dietitian referral criteria met?

No

Dietetic referral criteria NOT met but you would still like advice:	East & North Herts	South & West Herts	West Essex
	on Thursdays at 10 – 12 noon you can ring 07876 597532 for support, or email hct.eastnorthherts.diet@carehome@nhs.net	on Tuesdays at 2 - 4pm you can ring 07920 723577 for support, or email hct.westherts.diet@carehome@nhs.net	you can ring 01992 938462 for support, or email westessex.dietitians@nhs.net

Yes

If resident **meets** Dietetic referral criteria complete appropriate area referral form and send with 3 days detailed food record charts & copy of residents MAR to:

- | | |
|--|--|
| • West Essex form available via email from: | westessex.dietitians@nhs.net |
| • East & North Herts referral form | hct.dietetic.enherts@nhs.net |
| • South and West Herts referral form | hct.westherts.dietinfo@nhs.net |

Dietetic service: Referral is complete and resident meets referral criteria?

No

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

Yes

Dietitian will accept referral and is likely to work with whole Home

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

- Adequate **food-based treatment** has not been provided every day for at least 1 month
- Resident has been unwell and/or has had hospital admission recently - 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)