Hertfordshire and West Essex Integrated Care System

Quick Guide: Oral nutritional supplement (ONS) prescribing

NHS Hertfordshire and West Essex Integrated Care Board

Start by establishing if patient is at risk of malnutrition?

- Weigh patient, obtain height & weight history over approximately the last 6 months
- Calculate MUST (Malnutrition Universal Screening Tool) score MUST calculator (accessible on mobile phones)

Consider reason why malnutrition has occurred and how this could be mitigated:

- Disease, disorder or medical condition – provide disease related advice; treat nausea, vomiting, constipation; ensure source of pain is addressed & pain is controlled
- Social – consider referral to social prescriber; access to food/shopping; use of food banks, luncheon groups, Meals on Wheels, social/support groups, family involvement; treat anxiety/depression & refer to appropriate services
- Dental – ensure good oral hygiene; advise on dental care

MUST score	Nutrition assessment	Initial nutrition intervention	Nutrition Monitoring
Low risk (MUST score 0) **= Low risk of malnutrition** No nutritional treatment required*	BMI >20 **AND** <5% unplanned weight loss in last 6 months	None needed*	Routine monitoring*
Medium risk (MUST score 1) **= At risk of malnutrition** Treat using food based advice*	BMI 18.5 – 20 **OR** 5 – 10% unplanned weight loss in last 6 months	Establish what patient's treatment goal(s) are & Give food based advice using most appropriate resource (short or full) & Consider advising purchase of OTC multivitamin & mineral tablet in addition & Review treatment goal(s), ideally monthly	Measure & record: • Progress against treatment goal(s) • Weight • BMI • MUST score If treatment goal(s) **are** being met, continue until appropriate to stop # If treatment goal(s) are **not** being met, consider treating patient as **High risk**
High risk (MUST score 2 – 6) **= At high risk of malnutrition** Treat using food based advice & either homemade or OTC supplements *(Aymes Retail, Complan or Meritene)* [*except when thickened fluids are required due to diagnosed dysphagia when advice regarding thickened supplements in Herts place or in West Essex place should be followed instead*]	BMI <18.5 **OR** >10% unplanned weight loss in last 6 months **OR** BMI<20 **AND** >5% unplanned weight loss in the last 6 months	Establish what patient's treatment goal(s) are & Give food based advice using most appropriate resource (short or full) & Advise use of Homemade supplements **OR** OTC supplements [**ONS should only be prescribed if patient/carer unable to prepare homemade or OTC supplements, in which case ready to drink products are likely to be most appropriate choice**] & Consider advising purchase of OTC multivitamin & mineral tablet in addition & Review treatment goal(s) monthly & Refer to Dietitian **only** if patient meets Dietetic referral criteria	Measure & record: • Progress against treatment goal(s) • Weight • BMI • MUST score If treatment goal(s) **are** being met, continue until appropriate to stop # If treatment goal(s) are **not** being met, consider whether a prescribed ONS is more likely to be taken than a homemade or OTC supplement? (If not, ONS prescription is unlikely to be appropriate, regardless of patient's level of malnutrition)

*Unless patient has deep wound/pressure injury (Category 2 – 4), in which case treat as Medium/High risk

See 'When to stop prescribing ONS' overleaf

Set treatment goal(s) (what does the patient want to achieve?)

Treatment goal examples	What to measure at each review
Improve or maintain functional ability	Reported ability to undertake activities of daily living
Improve or maintain quality of life	Reported quality of life before & after intervention
Facilitate wound healing	Wound severity/size before & after intervention
Improve or maintain nutritional status/weight	Weigh & calculate MUST score before & after intervention
Minimise decline in nutritional status/weight	Rate of weight loss/percentage of weight lost before & after intervention

When is it appropriate to prescribe ONS?

Patient meets ACBS Criteria for that specific product to be prescribed (evidence of a disease/disorder/medical condition causing malnutrition - see MUST overleaf)

AND ONE of the following to criteria can be evidenced:

1. Patient is at high risk of malnutrition AND evidence suggests that patient/carer is unable to prepare homemade or OTC supplements

2. Patient is at high risk of malnutrition AND is not meeting treatment goal(s) after 1 month of food based treatment & either homemade or OTC supplements AND evidence suggests that patient is more likely to take a therapeutic dose (bd) of prescribed ONS compared with homemade or OTC supplements

Please note: Dietitians may occasionally request an ONS prescription when either 1 or 2 is not applicable, but in this case the dietitian **must provide detailed clinical justification for their request (please see Additional Adult Managing Malnutrition Guidance)**

Which ONS to prescribe (prescribe a **1 week supply initially**, then prescribe monthly **as acute script**)

Criteria	If Care Home resident advise use of 'homemade supplements '	ONS Product (*first line choice*)
✓ Patient/carers can prepare powder ONS ✓ Patient can manage 2 x 230ml ONS per day ✓ Patient likes sweet, milky drinks	**Advise staff to provide 'Homemade fortified milkshake (ICS recipe)' 2 per day**	Food based advice & ***Aymes Shake *** **or** Food based advice & ***Foodlink Complete***
× **Patient/carers cannot prepare powder ONS** ✓ Patient can manage 2 x 230ml ONS per day ✓ Patient likes sweet, milky drinks	**Advise staff to provide 'Homemade fortified milkshake (ICS recipe)' 2 per day**	Food based advice & ***Aymes Actagain 1.5 Complete*** **or** Food based advice & ***Altraplen Energy ***
✓ **Patient is vegan** ✓ Patient/carers can prepare powder ONS ✓ Patient can manage 2 x 230ml ONS per day ✓ Patient likes sweet drinks	**Advise staff to provide 'Homemade fortified vegan milkshake (ICS recipe)' 2 per day**	Food based advice & ***Aymes Actasolve Smoothie*** [suitable for vegans]
× **Patient does not like milky drinks** ✓ Patient can manage 2 x 230ml ONS per day ✓ Patient likes sweet drinks	**Advise staff to provide 'Homemade fortified fruit juice (ICS recipe)' 2 per day**	Food based advice & ***Aymes Actagain Juce*** **or** Food based advice & ***Altrajuce***

Other ONS can be prescribed if they have been requested by a Dietitian who has provided adequate clinical justification for request - please ensure that the Dietitian has advised you of the following:

- Clinical reason for requesting a product other than products listed above
- What the aims/goals of the prescription request are and who is responsible for monitoring/review
- For how long the prescription is likely to be needed

Stop prescribing an ONS when any of the following apply:

- When treatment goal(s) are met
- When patient has BMI >20 and is gaining weight
- When requested to do so by Dietitian
- When patient is unable/unwilling to take ONS as a therapeutic dose (2 per day) (consider whether another product is suitable instead)
- When pt is reaching end of life, continuing to try to take ONS is likely to diminish (rather than improve) patient's quality of life

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