

Protocol

Protocol for the Prescribing of Oral Nutritional Supplements (ONS) and Enteral Nutrition (EN) for Adult Inpatients and Discharge at Medway NHS Foundation Trust (MFT)

Relevant to:

- Hospital Doctors and Nursing staff
- Nutrition Specialist Nurse
- Acute Nutrition and Dietetic Team
- Pharmacy

Purpose of Protocol:

ONS are liquid, semi-solid or powder formulations that are designed to increase nutritional intake. ONS can be used as a sole source of nutrition or to supplement intake. ONS should only be used to improve a patient's nutritional intake, when using a food first approach has been deemed inadequate. Patients can be reliant on oral nutritional supplements (ONS) to maintain or improve their nutritional status in the face of disease, rehabilitation or recovery. Clinical indications for prescribing oral nutritional supplements include:

- | | |
|--|--|
| • Short bowel syndrome | • Inflammatory bowel disease |
| • Dysphagia | • Total gastrectomy |
| • Intractable malabsorption | • Bowel fistulae |
| • Pre-operative preparation of undernourished patients | • Disease related malnutrition (chronic/acute) |

Enteral nutrition delivered into the gut by a tube is used when nutritional requirements cannot be met orally, but the gut is functioning. Common reasons for the use of this type of nutrition include:

- | | |
|---|--|
| • Strokes or other neurological conditions which impair swallowing | • After radiotherapy to the throat or oesophagus |
| • After some types of operations on the face, neck, throat, oesophagus or stomach | • Prophylactically as part of treatment that is likely to affect the ability for oral intake e.g. oncology treatment |
| • Blockages of the oesophagus or stomach | |

Enteral nutrition can be used to completely or partially meet patient requirements. Liquid feed can be given as a continuous feed via a feeding pump, as a bolus via syringe or gravity feed via giving set.

A patient must be discharged with a clear plan for continuation or discontinuation of all ONS and EN prescriptions into the community. If a prescription is indicated on discharge, an adequate supply to meet 7 day requirements must be provided to the patient to take out (TTO's), especially important when this is the patients' only form of nutrition.

Protocol

Protocol for the Prescribing of Oral Nutritional Supplements (ONS) and Enteral Nutrition (EN) for Adult Inpatients and Discharge at Medway NHS Foundation Trust (MFT)

Roles and Responsibilities

Hospital Doctors and Nursing Staff

- To comply with this document ensuring safe prescription and adequate nutritional provision when food intake is inadequate or contraindicated using ONS and EN. To ensure the correct product, volume and frequency is documented on EDN and correct amount given to patient on discharge as required.

Nutrition Nurse:

- Support education, training and awareness of ward staff on the importance of patient nutrition, nutritional practices including ONS and EN facilitation as an inpatient and on discharge

Acute Nutrition and Dietetic Team:

- Dietitians are uniquely qualified to provide appropriate dietetic advice based on a clear assessment of a patient's nutritional status and intake. They have a sound knowledge of ONS, the nutritional content of these products and the suitability for different disease states and patient preference
- Any ONS available at Medway Maritime Hospital can be prescribed by the competently trained dietetic team member.

Pharmacy

- Pharmacists are uniquely qualified to provide pharmacy advice on appropriate prescription of ONS in relation to pharmacological concerns and interactions. All ONS prescribed at Medway Maritime Hospital will be reviewed by the ward pharmacist, who will also ensure an adequate provision is available to fulfil the prescription during an inpatient stay and also to fulfil a 7day supply on discharge.

Protocol to Follow (no deviation is permitted)

All patients requiring ONS prescription should be referred to the Dietitians in the first instance.

If a patient has been prescribed an ONS then only the prescribed ONS should be given and not an alternative as each supplement has a different nutritional profile. It is the responsibility of the nursing staff and pharmacy to ensure there is an adequate stock of the required ONS on the ward. The pharmacy teams have lists of approved stock levels for each ward and provide regular replenishment via a timely rota. In the event of low stock levels the staff nurse can source stock from another ward or request via the pharmacy pink book.

Protocol

Protocol for the Prescribing of Oral Nutritional Supplements (ONS) and Enteral Nutrition (EN) for Adult Inpatients and Discharge at Medway NHS Foundation Trust (MFT)

Patients should take ONS in addition to their normal meals and not as a meal replacement, unless directed by the medical or dietetic team.

For patients able for food intake, ONS should be given between mealtimes or after meals. They should not be given prior to serving a meal, as this may lead to early satiety and reduced intake at mealtimes.

If the plan for a patient is to have EN then a ward must make an urgent referral to dietitians. Out of hours regimes are available on Q pulse and can be used providing there is clear documentation on appropriateness of enteral feeding in medical notes.

For patients on the ERAS pathway, please see trust protocol for prescribing advice specific to this group.

Doctors

Doctors within MFT should only prescribe the following ONS to patients whilst admitted:

- Ensure Compact (maximum 3 times daily) – these are IDDSI Level 2 compliant
- Ensure Plus Juice – not for routine prescription for patients with diabetes

Both these supplements come in a variety of flavours to provide choice and enhance patient compliance.

Contraindications to the prescription of these supplements without dietetic advice include:

- Patients at risk of refeeding syndrome
- Patients with electrolyte imbalances e.g. high potassium levels
- Consider SLT recommendations and if unsure refer to Dietitians

If a patient is admitted to MFT known to have a prescription of ONS in the community then the Doctors should continue this exact prescription of ONS on the drug chart AND refer to the Dietitians

Nursing Staff

Ward nursing staff to complete nutritional assessment for each patient, including completion of the Malnutrition Universal Screening Tool ('MUST')/ Weight and Nutrition Assessment on extramed upon hospital admission (within 24hrs for audit purposes). The nursing staff are responsible for implementing the recommended care plan for each patient and repeating screening weekly thereafter. All patients with a MUST score of 2 (denoting high malnutrition risk), those requiring enteral or parenteral nutrition and those admitted already on an ONS

Protocol

Protocol for the Prescribing of Oral Nutritional Supplements (ONS) and Enteral Nutrition (EN) for Adult Inpatients and Discharge at Medway NHS Foundation Trust (MFT)

prescription in the community must be referred to the acute nutrition and dietetic service online via the Trust intranet, under 'internal systems'.

Nursing staff will discuss with the patient taste preferences and ensure these are available on the ward for the patient during the admission.

Acute Nutrition and Dietetic Team

The acute nutrition and dietetic team will assess the patients' nutritional needs and their current dietary intake.

If ONS or EN are required, the competently trained dietetic team member will prescribe these on the drug chart, and document this in the medical notes. The drug chart must be signed, name printed, bleep number documented and "RD" written in the signature box (denoting Registered Dietitian). If EN is required a feeding regimen will be placed in the bed end folder and also in the medical notes.

Due to the pace at which patients can be discharged, at the time of initial prescription the Dietitian will make an assumption if the ONS /EN is indicated for continuation in the community. If a prescription is required to continue when the patient is discharged home, the Dietitian will note 'for TTO's' in the 'supply' section of the drug chart. If a prescription is not required the Dietitian will note 'NOT for TTO's' in the 'supply' section of the drug chart. The patient will continue to be reviewed by the acute nutrition and dietetic team during their admission. Compliance with the prescribed ONS will be assessed as well as the on-going need for ONS / EN. TTO plans will be updated dependent on these assessments. On discharge if 'for TTO's' has been documented by the Dietitian the patient should receive adequate ONS / enteral feed to meet their prescription for 7 days.

It should be clearly stated on the EDN for the GP to follow the dietetic plan and only continue a prescription of ONS /EN if requested by the Dietitian and for the time specified. **All** patients prescribed ONS /EN on discharge will be referred to the community Dietitians for review and their ongoing requirements will be managed at that point.

Within 5 working days of discharge, the acute nutrition and dietetic team will update the patients' EDN (under the notes section) and request for the GP to prescribe ONS as above if required. When requesting a prescription for ONS to the GP via EDN, the acute nutrition and dietetic team will refer to Medway and Swale Clinical Commissioning Groups' ONS prescribing guidelines unless otherwise justified.

For patients on EN (those with PEG/RIG/NG tubes), the Dietetic team require 2 working days' notice prior to discharge to ensure safe discharge. This will include organisation of training on feed administration, registration with the nutrition company and nutrition nurse, GP

Protocol

Protocol for the Prescribing of Oral Nutritional Supplements (ONS) and Enteral Nutrition (EN) for Adult Inpatients and Discharge at Medway NHS Foundation Trust (MFT)

prescription and transfer to community Dietitians. A patient cannot be discharged until it is confirmed that there is a competent person able to care for the feeding tube at the discharge destination, and the equipment is available there. The patient should be provided with a 7 day supply of EN and appropriate equipment requested by the Dietitians A patient being discharged with an enteral feeding tube must be discharged with a 7 day supply of syringes and/or giving sets.

Pharmacy

Pharmacy distribution staff are responsible for maintaining ward ONS stock levels in line with up to date stock lists provided by the Dietitians.

Pharmacists are responsible for checking the accuracy of the prescription on the drug chart and including patient flavour preference within this. If a specific flavour is documented this shall be ordered to aid compliance.

The ward pharmacist will ensure the correctly prescribed ONS product and volume is on EDN if designated 'for TTO's'

Each patient with 'for TTO's' on their drug chart must be discharged with a **minimum** of a 7 day supply of supplements. This will need to be ordered to the ward and supplied as medications would be. Some ONS and EN prescriptions will be for the patient's sole source of nutrition e.g. Modulen, enteral feeds, and it is essential that a full 7 day supply is provided.

If the patient is transferred to ADL prior to actual discharge a 7 day supply of ONS will be transferred with them from the ward they have been residing during their stay. It is the responsibility of the ward staff and pharmacy to ensure this supply goes with the patient.

Protocol

Protocol for the Prescribing of Oral Nutritional Supplements (ONS) and Enteral Nutrition (EN) for Adult Inpatients and Discharge at Medway NHS Foundation Trust (MFT)

Implications of not following protocol

1. Inappropriate prescribing of ONS within the acute and community setting affecting patient outcome and experience
2. Unnecessary prescribing with associated cost implications
3. Unsafe discharge requiring readmission

Useful Contacts:

Acute Dietetic Team, Therapies Department, Medway Maritime Hospital, Gillingham, Kent. ME7 5NY

Pharmacy department, Medway Maritime Hospital, Gillingham, Kent. ME7 5NY

Monitoring the Process:

Prescribing of (ONS) and EN at (MFT) will be monitored and reviewed by Dietetic and Pharmacy teams

National Definitions:

EN: Enteral Nutrition

ONS: Oral Nutritional Supplements

MUST: Malnutrition Universal Screening Tool

Reference Material & Associated Documents:

Medway Community Healthcare & Medway/Swale Clinical Commissioning Groups

NICE Clinical Guideline 32 (2006) – Nutrition Support in adults: Oral nutrition support, enteral tube feeding and parenteral nutrition.

www.abbottnutrition.co.uk

www.bapen.org.uk/pdfs/must/must_full.pdf

www.bda.uk.com

Approval Signatures:

| | | | |
|-----------------------|--------------------------------|---------------|------------|
| Revision No: | 1 | ID No: | PROTLMM002 |
| Distribution: | Intranet / Q-Pulse | | |
| Date Approved: | | | |
| Approved By: | Medicines Management Committee | | |

Protocol

Protocol for the Prescribing of Oral Nutritional Supplements (ONS) and Enteral Nutrition (EN) for Adult Inpatients and Discharge at Medway NHS Foundation Trust (MFT)

| | |
|------------------------|---|
| Review date: | September 2022 |
| Author: | Helen Hume, Amelia Lythgoe - Clinical Lead Dietitians |
| Document Owner: | Acute Dietitians |