The Village Residence

POLICY NO:

Date reviewed

August 2011 Reviewed February 2014 March 2019 May 2022 Sept 2023

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Guidelines for the Appropriate Use Of Oral Nutrition Supplements in Saint Mary's

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Developed by: Director of Nursing Office and Clinical Nurse Managers	Date Developed: Revised August 2011 Reviewed February 2014 March 2019 May 2022 Sept 2023
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Purpose

To ensure the correct & appropriate selection of Oral Nutrition Supplements for the individual older persons needs in long stay care

To maintain evidence based good practice in the use of Oral Nutrition Supplements

1.0 Applies to

This procedure applies to all Nursing staff, Health care Assistants and Dieticians working in this Centre

2.0 Definitions

Oral Nutritional Supplements (ONS): Commercially produced high energy and/or high protein products for the purpose of providing additional macro & micro nutrients. Available as milk based or juice based sip feeds; dessert style mousse; yoghurt style drink; milk shakes; fat based emulsion; carbohydrate based sources; protein based sources.

3.0 Responsibilities

- It is the responsibility of the nurse managers to ensure all staff are aware of the procedure and that it is implemented at ward level.
- It is the responsibility of all staff to be familiar with the procedure and adhere to it.
- It is the responsibility of the Dietitian for this centre to provide information & support to staff in its implementation.

4.0 Procedures

- 4.1. All Residents in the Centre should have nutrition screening carried out by the nursing staff using the MUST screening tool within 24 hours of admission and monthly thereafter, or more often if required.
- 4.2. Only residents who score moderate risk of under nutrition or those who score high risk of under nutrition should be considered for Oral Nutrition Supplements.
- 4.3. Residents at moderate risk of under nutrition should have the following care plan implemented prior to commencing Oral Nutrition Supplements.
- Supervise and encourage at mealtimes.
- Ascertain a resident likes and dislikes regarding food and DOCUMENT
- Offer between meal snacks e.g. Milk, Yoghurt, Cheese
- Ice cream, milk puddings, small sandwiches as appropriate

- Fortify meals with extra butter, cream and/or skimmed milk powder
- Record intake for 2-3 days and weigh weekly
- If improved no clinical concern
- If no improvement after one week refer to dietitian
 - 5.4 Nursing staff may introduce supplements in the moderately at risk group or high risk Resident group prior to assessment by dietitian. Must be reviewed by the Medical Officer and same must be prescribed.
 - 5.5A full Nutritional assessment will be carried out by the dietitian on all moderately at risk Residents who did not improve nutritionally after one week and all high risk patients
 - 5.6 Decisions on whether to continue to provide Oral Nutrition Supplements to an older person will be discussed by the Nurse & the Dietitian
 - 5.7The dietitian will document the dietary regimen in the patients care plan.
 - 5.8 Supplements should be given at times that will least interfere with patients appetite for meals e.g. two hours before a meal or in the evening
 - 5.9 Residents on Oral Nutrition Supplements should still be offered small frequent meals and snacks, fortified meals and nourishing fluids. Oral Nutrition Supplements ARE NOT ARE

REPLACEMENT FOR MEALS BUT SHOULD BE USED TO SUPPLEMENT A HIGH PROTEIN HIGH CALORIE DIET

5.10 All residents will be reviewed regularly for ongoing requirement of Oral Nutrition Supplements by the dietitian and nursing staff.

5.0 Dissemination and Implementation plan.

This guideline was developed as part of the Food and Nutrition benchmark for the Essence of care. It will follow the dissemination plan for that framework. It will be distributed in the first instance to designated link nurses in all care of the older person hospitals in the region.

6.0 Evaluation / Audit

The audit will be carried out as part of the audit for the Food and Nutrition benchmark.

7.0 References

Managing Nutrition for Older People in Long Stay Care'- A Practical Guide for Health Care Staff, Mary Mulvihill, Senior Dietitian, Midland Health Board & Siobhan Pyper, Senior Dietitian, Midland Health Board. 2001

6.2 Recommendations for a national food and nutrition policy for older people' Food safety Authority of Ireland. 2000

8.0 Appendices

Appendix 1 - List of Oral Nutrition Supplements Appendix 2 – Sign Off Sheet

Sourced from:

Page S (2001) <u>7 Steps to Better Written Policies and Procedures</u>. Ohio: Process Improvement Publishing.

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Appendix 1.

Oral Nutritional Supplements (ONS): Commercially produced high energy and/or high protein products for the purpose of providing additional macro & micro nutrients. Available as milk based or juice based sip feeds; dessert style mousse; yoghurt style drink; milk shakes; fat based emulsion; carbohydrate based sources; protein based sources.

List of Oral Nutritional Supplements (Availability is determined by Nutrition Contract)

Fibre containing milk based drinks

- ◆ Fortisip Multifibre (Nutricia) 200ml pack. Flavours: Orange, strawberry, banana, vanilla, chocolate.
- ◆ Enrich Plus Fibre containing(Abbott) 200ml pack. Flavours: Vanilla, chocolate, raspberry, banana.
- ◆ Fresubin energy fibre (Fresenius Kabi) 200ml pack. Flavours: Banana, cappuccino, chocolate, strawberry, lemon, vanilla.

Milk Based Supplements:

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- ◆ Fortisip (Nutricia) 200ml pack. Flavours: Neutral, vanilla, chocolate, toffee, banana, orange, strawberry, tropical fruits.
- ◆ Ensure Plus (Abbott) 200ml pack. Flavours: Coffee, blackcurrant, chocolate, vanilla, caramel, banana, orange, strawberry, raspberry, fruits of the forest, peach, neutral.
- ◆ Ensure (Abbott) 250 ml can. Flavours: Vanilla, chocolate, strawberry, mushroom, chicken.
- ◆ Fresubin (Fresenius Kabi) 200ml pack. Flavours: Vanilla, Nut, Peach, Chocolate, Mocha, Blackcurrant.
- ◆ Fresubin energy (Fresenius Kabi) 200ml pack. Flavours: Banana, orange, pineapple, strawberry, vanilla, chocolate-mint, toffee-caramel, blackcurrane, vegetable cream, neutral.
- Calshake (Fresenius Kabi) Powder added to food or made up with whole milk to 240mls. Flavours: Strawberry, chocolate, vanilla.
- Scandishake (SHS). Powder added to foods or made up with whole milk to 280mls. Flavours: Unflavoured, vanilla, chocolate, strawberry.

Juice based supplements

- ◆ Fortijuce (Nutricia) 200mls pack. Flavours: Lemon & Lime, peach & orange, forest fruits, apple & pear, pineapple, apricot, blackcurrant.
- ◆ Enlive (Abbott) 240ml pack. Flavours: Orange, apple, lemon & lime, pineapple.

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Yoghurt style supplements

- ◆ Fortifresh (Nutricia) 200ml carton. Flavours: Blackcurrant, raspberry, peach & orange.
- ◆ Ensure plus yoghurt style (Abbott) 220ml pack. Flavours: Strawberry, pineapple twist.

Dessert/pudding style supplements

◆ Forticreme (Nutricia) 125g pack. Flavours: Vanilla, chocolate, coffee, forest fruit

Disease specific supplements

Diabetics

- ◆ Diasip (Nutricia) 200ml pack. Flavours: Vanilla, strawberry
- ◆ Glucerna (Abbott) 250ml can. Flavours: Vanilla.
- ◆ Diaben (Fresenius Kabi) 200ml pack. Flavours: Caramel, cappuccino, forest berries.

Wound Care

◆ Cubitan (Nutricia) 200ml pack. Flavours: Vanilla, strawberry, chocolate.

Cancer Cachexia

- ◆ Forticare (Nutricia) 125ml pack. Flavours: Orange & lemon, peach & ginger, cappuccino.
- ♦ Prosure (Abbott) 240ml pack. Flavours: Vanilla, banana.

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Respiratory Conditions

Respifor (Nutricia)

Renal

- Renilon (Nutricia)
- Nepro

Energy and Protein Powder-carbohydrate and protein powder that can be added to food and fluids

◆ Procal-(vitaflo)

Energy Powders: Carbohydrate based powders that can be added to food & fluid.

- ♦ Super soluble maxijule (SHS)
- ♦ Polycose (Abbott)

Protein Powders: Protein based powders that can be added to food & fluid.

◆ Super soluble maxipro (SHS).

Energy liquid supplements

- ◆ Calogen (SHS). Fat emulsion added to food, fluid or taken on it's own. Flavours: Neutral, strawberry, butterscotch.
- ◆ Polycal (Nutricia). Carbohydrate based liquid added to fluids. Flavours: Apple, blackcurrant, lemon, orange, neutral.

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