

**Screen for malnutrition** using the Malnutrition Universal Screening Tool (MUST): [www.bapen.org.uk/must-and-self-screening/must-calculator/](http://www.bapen.org.uk/must-and-self-screening/must-calculator/)

**Complete screening on admission**, and repeat it according to the individual's MUST score.

**Ask new residents** or their next of kin (NOK), where appropriate, about any recent **weight loss, reduced appetite, or changes in eating habits**.

**Check whether the person can safely meet their nutritional needs orally**. Consider swallowing safety, ability to prepare food, symptoms that limit intake, and access to food. **Refer to Speech and Language Therapy (SLT) or the GP** if oral intake appears unsafe.

**Record favourite foods** and offer support with food choices, eating, and drinking as needed. Consider how the **eating environment** may help or hinder intake.

**Document any need for special diets** and follow local policy to ensure these are provided safely and consistently.

## MUST SCORE 0 = LOW RISK

- Routine clinical care
- Repeat screening monthly
- Encourage to maintain a balanced diet

## Pressure Ulcers

Referrals for residents with a MUST score of 2 or above with a category 2 pressure ulcer or above can be referred to dietetics.

For any resident with a pressure ulcer use our [diet and pressure injuries](#) leaflet for advice on how diet can optimise healing.

**Visit our website** for videos on calculating MUST, our referral form, referral criteria and helpful information leaflets.

<https://www.wsh.nhs.uk/services/nutrition-and-dietetics/information-for-health-care-professionals-and-care-homes>

## MUST SCORE 1 = MEDIUM RISK

### Observe/Treat

Observe whether weight is stable. Initiate treatment if weight is reducing or if rapid clinical deterioration is anticipated.

Assess the cause of malnutrition and take appropriate actions, e.g. swallowing difficulties, oral health issues, impact of medication, or mental health conditions.

Treat any identified causes of malnutrition.

Set a goal with your resident, such as weight gain or weight maintenance.

Repeat screening weekly, and if the MUST score changes, follow the appropriate plan.

**Plan** (Aim to include an additional 500 kcal/day. Use the nourishing drinks, high-calorie snacks, and food-fortification leaflets on our website [Information for health care professionals and care homes](#))

- Commence a food record chart for 4 weeks (example food diary on our website). Record as much detail as possible, including food fortification, quantities, reasons for declined items, snacks, nourishing drinks, etc.
- Encourage eating and drinking.
- Offer high-calorie snacks between meals ( $\geq 100$  kcal each).
- Offer at least two homemade nourishing drinks daily.
- Commence a fortified diet.
- Refer to the GP if there is any clinical concern.

## MUST SCORE 2 = HIGH RISK

### Treat

Treat - unless expected to be detrimental or provide no benefit, e.g. in cases of imminent death.

Assess the cause of malnutrition and take appropriate actions, e.g. swallowing difficulties, oral health issues, impact of medication, or mental health conditions. Treat any identified causes of malnutrition.

Set a goal with your resident, such as weight gain or weight maintenance.

Repeat screening weekly and if MUST score changes follow appropriate plan.

**Plan** (Aim to include an additional 500 kcal/day. Use the nourishing drinks, high-calorie snacks, and food-fortification leaflets on our website [Information for health care professionals and care homes](#))

- Commence a food record chart for 4 weeks (example food diary on our website). Record as much detail as possible, including food fortification, quantities, reasons for declined items, snacks, nourishing drinks, etc.
- Encourage eating and drinking.
- Offer high-calorie snacks between meals ( $\geq 100$  kcal each).
- Offer at least two homemade nourishing drinks daily.
- Commence a fortified diet.
- Refer to the GP if there is any clinical concern.

**If they continue to lose weight after implementing the above for 4 weeks refer to the dietitian**