

1. Introduction and Who Guideline applies to

- 1.1 This document sets out the University Hospitals of Leicester (UHL) NHS Trusts Policy and Procedures for registered Dietitians to initiate and dose adjust nutrition and diet products.
- 1.2. Nutrition and Diet products are 'borderline substances' that are only considered to be medicinal products eligible for prescribing on the NHS if the patient meets at least one of the criteria stated by the Department of Health. The Advisory Committee on Borderline Substances (ACBS) considers which products and indications can be added to the list which may be prescribed. This full list of products is available within the Drug Tariff Part XV. The ACBS list is there to control what the NHS will support within a prescribing and pricing framework. It should be noted that many of these products are easily available for purchase by the public without a prescription. The ACBS has recommended products on the basis that they may be regarded as drugs for the management of specified conditions. Nutrition and Diet products are classified as Advisory Committee on Borderline Substance (ACBS) and are regarded as drugs in the British National formulary (BNF). ACBS Nutrition and Diet products do not need to be prescribed as such. ACBS Nutrition and Diet Products can be initiated and adjusted for Trust patients by Registered Dietitians using this Policy with inpatients having electronic orders via eMEDs and outpatients via TrustMED Dietetic order form/script.
- 1.3. Nutrition and Diet Products include:
 - Oral Nutritional Supplements (ONS)
 - Enteral Tube Feeds (ETF)
 - Feed Supplements
 - Feed Additives e.g. Breast Milk Fortifier
 - Specialist Nutrition Products e.g. Metabolic
 - Specialist Infant Formula e.g. Cow's Milk Protein Allergy
 - Novel substances e.g. Amino acid
- 1.4. The assessment of patient's nutritional status and the need for dietary intervention and any subsequent appropriate treatment via a clinical care plan for patients is managed within UHL by Dietitians. At present within legislation Dietitians are not allowed to be independent non medical prescribers. In 2016 Dietitians were added to the list of supplementary prescribers. Many Dietitians in the Trust have or are starting to undertake this qualification to prescribe licenced and unlicenced prescription only medicines as part of a Clinical Management Plan, in specialist areas such as parenteral nutrition, renal (phosphate binders), diabetes (insulin and oral hypoglycaemic agents). A Dietitians expert role with the initiation and adjustment of ACBS oral and enteral nutrition products sits outside of this non- medical prescriber role.

To ensure that patients receive the correct Nutrition and Diet products as part of their medical care in a timely manner from an expert healthcare professionals it has been agreed by the Medicines Optimisation Committee for Dietitians to initiate the correct order on patient's drug charts (both electronic and paper).
- 1.5. This document aims to provide a formal governance framework for registered Dietitians to initiate and dose adjust Nutrition and Diet products for neonatal, paediatrics and adult inpatients, outpatients and day case patients under the care of UHL NHS Trust. The principle of this framework has been written into the Chapter 2 of the Leicestershire Medicines Code agreed by the Trusts Medicines Optimisation Committee (MEDOC) using the statement:

Dietitians are authorised to initiate the use of nutrition and dietetic products such as oral nutritional supplements, enteral feeds, feed supplements, feed additives eg breast milk fortifier, specialist Nutrition Products eg metabolic and specialist milk formula although they are not authorised prescribers. Student Dietitians on clinical placement will be able to order but the order will be countersigned by their clinical supervising Dietitian. These should be written directly onto the drug chart. Other practitioners should always discuss nutrition and diet product options with a Dietitian. October 2018.

- 1.6. All Nutritional products on the formulary may be prescribed by prescribers (medical and non medical) as they would medicinal products.
- 1.7 This Guideline is applicable to all Registered Dietitians employed by UHL NHS Trust.
 - a) This Guideline is not applicable to Dietetic Assistant Practitioners and Dietetic Assistants / Dietetic Support workers.
 - b) This Guideline is not applicable to Undergraduate Dietetic Students on A and B clinical placements. Undergraduate Dietetic Students who are on their final C clinical placement who have entered consolidation weeks may apply the principles in this Policy. All of their practice in this area must be countersigned by a Registered Dietitian who is responsible for supervising their practice on every occasion.
 - c) This Guideline is not applicable to prescribers who out of dietetic working hours may want to prescribe Nutrition and Diet products. Prescribers should instead follow the relevant Policy or Guideline such as:
 - Nutritional Screening and First Line Oral Nutritional Care Policy for Adults Trust Ref: B26/2015.
 - Out of Hours Enteral Tube Feeding (Nasogastric) Guideline in Adult Inpatients. (Including Management of Re-feeding Syndrome). Trust Ref: B55/2006.
 - Out of hours Enteral tube feeding (Nasogastric) Starter Regimen for an Adult Inpatient with Renal Failure. (Including Management of Re-feeding Syndrome) Guidance for practice Trust Ref: C2/2015.
 - Guideline for Commencing Nasogastric Feeding in Adult patients in Critical Care. Trust Ref: B42/2016.
 - Nasogastric Feeding in Critical Care UHL Nutrition and Dietetics Guideline: C24/2020.
 - Guideline to identify and manage paediatric inpatients who are at risk of refeeding syndrome. Trust Ref: B19/2019.
 - Guidelines for Commencing Enteral Feeding post Gastrostomy insertion in Paediatric Patients. Trust Ref: C27/2010.
 - Clinical Guideline for the Nutrition & Dietetic Assessment and Management of Adult Inpatient's risk of Re-feeding syndrome. Trust Ref: C55/2015.
 - Paediatric inherited metabolic disease guidelines for Phenylketonuria Trust Ref: C25/2016 and HMG- Co A Lyase deficiency Trust Ref: C31/2016.
 - Management of Children on Ketogenic Diet for Epilepsy Trust Ref: C22/2016.
 - d) This document does not cover Dietitians acting as supplementary prescribers having undertaken non medical prescribing training as part of a Clinical Management Plan for defined medicines such as parenteral nutrition, phosphate binders, insulin and oral hypoglycaemic agents. At present within legislation Dietitians are not allowed to be independent non medical prescribers.

- e) This document does not cover ordering of food preparations which are still classified as ACBS products such as gluten free foods, low protein foods, essential fatty acids e.g. walnut oil, rapeseed oil. These should be ordered via Patient Catering Services as part of therapeutic diet provision for inpatients and day case patients on an individual named patient basis. Patient Catering Services may choose to source these products from supermarkets or through the Trusts Pharmacy Service and Pharmacy wholesalers.
- f) For the an up to date range of Nutrition and Diet products which can be initiated for adult patients by a Registered Dietitian see Service Standard Operating Procedure. Neonatal and paediatric products can be used by an adult Dietitian subject to clinical assessment. These products are agreed within a Leicestershire Enteral Feeding Contract Framework across Leicester, Leicestershire and Rutland.
- g) For the up to date range of Nutrition and Diet products which can be initiated for neonatal and paediatric patients by a Registered Dietitian see Service Standard Operating Procedure. Adult products can be used by a paediatric Dietitian subject to clinical assessment. These products are agreed within a Leicestershire Enteral Feeding Contract Framework across Leicester, Leicestershire and Rutland.

2. Guideline, Standards and Procedures

2.1. Roles – Who does what

- a) **The executive lead for this Policy is the Chief Nurse.**
- b) **Head of Service for Dietetic and Nutrition Service and Chief Pharmacist**
The Head of Service for Dietetic and Nutrition Service and the Trust's Chief Pharmacist are responsible and accountable for communicating and liaising with the Trusts Medicines Optimisation Committee.
- c) **Head of Service for Dietetic and Nutrition Service**
The Head of Service for the Dietetic and Nutrition Service is accountable for ensuring only Registered Dietitians apply this Policy in accordance with the Medicines Code.

The Head of Service for the Dietetic and Nutrition Service is accountable for ensuring that new products are approved within a governance framework with robust clinical evidence base and financial cost effectiveness. New and delisted products will be reported by the Head of Service for the Dietetic and Nutrition Service to the Trusts Nutrition and Hydration Assurance Committee and Trusts Medicine Optimisation Committee.

The Head of Service for the Dietetic and Nutrition Service is responsible and accountable on behalf of the UHL NHS Trust for ensuring a whole health community – Leicester, Leicestershire and Rutland (LLR) approach is taken in relation to initiation of Nutrition and Dietetic products in liaison with the Leicester, Leicestershire and Rutland Area Prescribing Committee (LLRAPC).
- d) **Line managers in the Nutrition and Dietetic Service**
Dietitians who are line managers of Registered Dietitians in the service are responsible for ensuring only Registered Dietitians apply this Policy.
- e) **Registered Dietitians**
Individual Registered Dietitians are responsible and accountable for adherence to professional standards as set out by the Health Care Professionals Council (HCPC).

2.2. Guideline implementation and associated documents

2.2.1 New and replacement nutrition and diet products.

- a) All new or replacement Nutrition and Diet products should be discussed in the first instance at appropriate Dietetic and Nutrition clinical team meetings. No new Nutrition and Diet product can be used within UHL NHS Trust unless it has been approved through the UHL Trust Dietetic and Nutrition Senior Management Team meeting.

The procurement of new Nutrition and Diet products must follow the process set out in the Leicestershire Medicines Code: Procurement Chapter 3 Trust Ref E2/2016 and Pharmacy Standing Operating Procedure for setting up new products on electronic systems Trust Ref: SOP 501 2018.

Requests or orders for new/replacement Nutrition and Diet products not on the Dietetic Formulary or which have not been agreed through the process outlined in the Leicestershire Medicines Code Procurement Chapter 3 Trust Ref E2/2016 and the Pharmacy Standing Operating Procedure for setting up new products on electronic systems Trust Ref: SOP 501 2018 will be refused by Pharmacy departments.

These products do not need to be presented to the Therapeutic Advisory Committee (TAS).

- b) Consultation should take place with appropriate clinicians e.g. Consultants and Pharmacists.
- c) Applications for new or replacement Nutrition and Diet products should be supported by completion of the UHL New Nutrition and Diet Product Application Form by the Lead Clinical Dietitian, in liaison with key clinicians. See Appendix 1. The form should clearly identify:
- Evidence base for product (including trial publications)
 - Patient involvement e.g. taste trials
 - Projected usage
 - Contract prices agreed in writing based on projected usage
 - Impact on prescribing in the community e.g. FP10 price
- d) This form must be approved by the Dietetic and Nutrition Service Senior Management meeting and signed off by the Head of Service, Dietetic and Nutrition Service. If a cost pressure is identified to the Trust then approval must also be sought from the appropriate Clinical Management Group(s) Head of Operations and Head of Finance.
- e) The approved form must then be sent by the Head of Service, Dietetic and Nutrition Service to the CMG Lead Pharmacist who must then complete a New Product Set-Up Request Form.
- f) Once completed the CMG Lead Pharmacist must send the UHL New Nutrition / Diet Product Application Form and the New Product Set-Up Request Form to the pharmacyelectronicsystems@uhl-tr.nhs.uk mailbox.
- g) Dietetic staff must not accept free samples of Nutrition and Diet products for direct use with patients. Dietitians can accept samples to taste trial as a Health Care Professional, products should be kept in line with Food Safety requirements. Dietitians can order product samples from nutrition companies on behalf of outpatients in line with the Dietetic and Nutrition Service SOP “xxx name” which considers GDPR and data protection requirements.

- h) If samples are being supplied by the company for use in patient trials these must be ordered by the Dietitian after discussion with the relevant CMG Lead Pharmacist to arrange delivery to the relevant site Pharmacy department for storage and use.
- i) Use of free Nutrition and Diet products for clinical trial purposes must be tracked through the Pharmacy department only upon receipt of the appropriate authorisation. All clinical trials of Nutrition and Diet products including those products already commercially available fall under the Clinical Trial regulations and require approval as described in the Leicestershire medicines code chapter 11. E10/2016 and registered with the Trusts R and D.
- j) Dietitians if offered gifts or financial payments for courses etc from pharmaceutical companies must follow the Trusts Managing Conflicts of Interest in the NHS Policy Trust Ref : A1/2017.
- k) See Appendix 2 for further guidance on procurement.

2.3. Ordering of prescribable nutrition and diet products for inpatients

- All Nutrition and Diet products should be initiated by the ward Dietitian on the e-meds system.
- Instructions for initiation and dose adjustment on e-meds wards are outlined in the Service Standard Operating Procedure "Dietitian SOP for initiation and dose adjustment of nutrition and diet products on Nerve Centre".
- Instructions for use of Nutrition and Diet products on Nerve Centre are outlined in the Service Standard Operating Procedure "Dietitian SOP for initiation and dose adjustment of nutrition and diet products on Nerve Centre".

The Dietitian ordering the Nutrition and Diet product will be taking responsibility for the clinical assessment and care plan of the patient and the subsequent clinical monitoring required working within own scope of practice and competency. They will undertake a dietetic assessment and calculate the patients nutritional requirements, assess their present nutritional intake and nutritional short fall from this to select the products and quantities needed as part of the nutritional care plan put in place for the patient. They will take responsibility to check the allergy status of the patient, cultural/religious status of the patient and dysphagic swallow assessment result and select products to be used accordingly.

- a) Nutrition and diet products for adult or paediatric inpatients are either kept as stock or can be obtained as part of the Leicestershire Enteral Feeding Contract via wholesaler, Nutricia Company or other company deliveries. For an up to date list of contract and non contract products see Service Standard Operating Procedure.
- b) Nutrition and Diet products which are required for an individual inpatient and not kept as stock can be ordered by Pharmacy overnight via a wholesaler, Nutricia Company or other company. The ward Dietitian should complete the UHL New Nutrition and Diet Product Application Form Appendix 1 and send to Head of Service or Speciality Dietetic Lead or Dietetic Advanced Clinical Practitioner and CMG Lead Pharmacist for same day authorisation. If the patient is using a nutrition and diet product in the community on FP10 prescription which is not stocked by the hospital and an alternative hospital nutrition and diet product should be used if equivalent. If the patient has stock

of the product required they should be requested to bring this into hospital until the product is ordered and delivered.

- c) Nutrition and Diet Products that are required urgently on the same day and not kept as stock can be ordered by Pharmacy overnight via a wholesaler, Nutricia Company or other company. The ward Dietitian should complete the UHL New Nutrition and Diet Product Application Form Appendix 1 and send to Head of Service or Speciality Dietetic Lead or Dietetic Advanced Clinical Practitioner and CMG Lead Pharmacist for urgent authorisation. The Leicestershire Enteral Feeding Contract has a set number of free deliveries from Nutricia after which the Trust will incur costs. If the patient is using a nutrition and diet product in the community on FP10 prescription which is not stocked by the hospital and an alternative hospital nutrition and diet product should be used if equivalent. If the patient has stock of the product required they should be requested to bring this into hospital until the product is ordered and delivered.
- d) As part of proactive discharge planning the ward Dietitian should indicate which nutrition and diet products are required on discharge. If the inpatient already has adequate supplies at home or the products are no longer clinically indicated e-meds should have 'Not for TTO's' written next to each product.
- e) When "new" inpatients do require Nutrition and Diet products on discharge supplies should be taken from the discharging ward. The Dietitian should state for TTOs. Pharmacy Standard Operating Procedures state:
 - Oral Nutritional Supplements should be provided for 3 days (with dietetic discretion to request up to 7 days if discharged before, during or after a bank holiday). 7 days should be supplied when oral nutritional supplements are the sole source of nutrition and are used on bolus system administered down an enteral feeding tube.
 - Enteral tube feeds and specialist products eg specialist infant formula or metabolic products should be provided for 7 days (with dietetic discretion to request up to 10 days if discharged before, during or after a bank holiday).
- f) After discharge on-going prescriptions for the patient should be via the GP on FP10 for 28 day cycles. The Dietitian should make a clinical case of need for the Nutrition and Diet products on an ICE letter at the point of discharge or DictateIT letter for outpatient clinic correspondence. The Dietitian should ensure the letter includes:
 - Clear goal/targets for the patient
 - Rationale for the need for ONSs and the type requested, particularly if non standard/non formulary type
 - Clinical monitoring requirements eg weigh weekly and who is going to do this and follow up arrangements for the patients
 - Daily dose of the products and 28 day volume and expected duration for use of product(s)
 - The Dietitian should consider the Guidance set out by the Leicester, Leicestershire and Rutland Area Prescribing Committee (LLRAPC) on the prescribing of oral nutritional supplements in primary health care setting on FP10 prescription to ensure appropriate and cost effective prescribing practices are applied.
- g) Report letters must be sent every time the patient is discharged from the ward to ensure the dietetic care plan is updated e.g. new products, change in dosage, products discontinued to the GP the prescriber and copied to the Consultant and patient/parent.

See Appendix 3 for Report letter template for ICE or DictateIT to be used to send reports to GPs to request ongoing prescriptions on FP10 post inpatient discharge or ongoing outpatient supplies.

2.4. Ordering of prescribable nutrition and diet products for outpatients and day case patients.

- a) All Nutrition and Diet products should be initiated by the Dietitian on a University Hospitals of Leicester NHS Trust order form for Nutrition and Diet Products see Appendix 1. This should be given to the patient the first time the product is required if a clinical priority on that day. The patient should be instructed to take the form to the sites TrustMed Pharmacy Dispensary.
- b) Ongoing orders for Nutrition and Diet products should be provided by the GP on FP10 for 28 day cycles. The Dietitian should make a clinical case of need for Nutrition and Diet product on an ICE letter or DictateIT letter see Appendix 3.

Report letters should be sent every time the patient is reviewed directly eg in outpatients or telephone consultation to update the dietetic care plan eg new product, change in dosage, products discontinued to the GP the prescriber and copied to the Consultant and patient/parent or if the patient is being discharged.

The Dietitian should ensure the ICE report letter includes:

- Clear goal/targets for the patient
- Rationale for the need for ONSs and the type requested, particularly if non standard type
- Clinical monitoring requirements eg weigh weekly and who is going to do this and follow up arrangements for the patients
- Daily dose of the products and 28 day volume.
- The Dietitian should consider the Guidance set out by the Leicester, Leicestershire and Rutland Area Prescribing Committee (LLRAPC) on the prescribing of oral nutritional supplements in primary health care setting on FP10 prescription to ensure appropriate and cost effective prescribing practices are applied.

3. Education and Training

- 3.1. Undergraduate Dietitians on clinical placement in the Trust will receive supervised training on the ordering and adjustment of nutrition and dietetic products. This meets the requirement of the undergraduate Curriculum as set out by the British Dietetic Association (2022).
- 3.2. Registered Dietitians will be expected to have training on this Guideline as part of their induction programme and then keep up to date on the evidence base for use of Nutrition and Dietetic products evidenced by Clinical Supervision and Continuing Professional Development (CPD) records as per Health Care Professionals Council (HCPC) CPD standards for registration.
- 3.3. Registered Dietitians will provide training and education on the range, use and administration of Nutrition and Diet products to users in particular ward nursing staff – registered and non-registered at ward level face to face as part of induction training and refresher training.

3.4. Registered Dietitians will provide training and education on an annual basis to ward / unit nutrition link nurses.

3.5. Dietetic Assistant Practitioners will receive training and education along with competency based assessment to be able to clinically monitor patients taking nutrition and diet products.

4. **Monitoring Compliance**

Monitoring will take place annually via the Dietetic and Nutrition Service in the following areas:

- Initiation and adjustment of dosage of Nutrition and Diet products by Dietitians.
- New or replacement products are identified via correct procedures in UHL and across the whole health community.
- Education and Training delivered to health care professionals e.g. ward nurses
- Audit of use of appropriate nutrition and diet products by Dietitians and other health care professional e.g. medical teams.

What will be measured to monitor compliance	How will compliance be monitored	Monitoring Lead	Frequency	Reporting arrangements
Ordering & Adjustment of Nutrition & Dietetic Prescription products -Product, Volume/ Dose ACBS criteria, legibility	Clinical Audit proforma	Head of service – Dietetic and Nutrition service	Annual	UHL Trust Dietetic and Nutrition Senior Management Team meeting
All new or replacement Nutrition and Dietetic Prescription Products are applied for in the Trust	Minutes of meetings	Head of service – Dietetic and Nutrition service	Annual	UHL Trust Dietetic and Nutrition Senior Management Team meeting
Using the agreed procedure with Pharmacy and the Clinical Management Groups (CMGs)	New/Replacement product Application form	Head of service – Dietetic and Nutrition service	Ongoing as applicable	UHL Trust Dietetic and Nutrition Senior Management Team meeting
Education and Training requirements of registered Dietitians are fulfilled	Nutrition and Dietetic Service Clinical supervision records	Clinical Dietetic Manager	Annual	UHL Trust Dietetic and Nutrition Senior Management Team meeting

5. **Supporting References (maximum of 3)**

Leicester, Leicestershire and Rutland Area Prescribing Committee (LLRAPC) 2023.

Adult Nutritional Screening and First Line Nutritional Care Policy Trust Ref B26/2015.

Adult Nutrition and Dietetic Service Referral Policy Trust ref B30/2018.

Key Words

Nutrition, Diet, Order, Adjust

Oral Nutritional Supplements (ONSs).

Advisory Committee on Borderline Substances (ACBS) – body which has classified nutrition and diet products on the basis that they may be regarded as drugs for the management of specified conditions.

Enteral Tube Feeds (ETFs)

Health Care Professionals Council (HCPC) – professional body for registered Dietitians

Therapeutic Advisory Committee (TAS)

Medicines Optimisation Committee (MEDOC)

To take out (TTO)

Integrated Care (ICE)

Electronic Prescribing & Medicines Administration (e-meds)

CONTACT AND REVIEW DETAILS	
Guideline Lead (Name and Title) Cathy Steele, Head of Service : Dietetic and Nutrition Service	Executive Lead Julie Hogg, Chief Nurse
Details of Changes made during review: Reviewed August 2020 : references to ePMA changed to e-meds, manual drug charts removed, clarification on role of undergraduate dietetic students on clinical placement, 10 days TTOs defined, hyperlink to LMSG website added Reviewed August 2023: product appendices removed, Nerve Centre and eMeds instructions removed, new and delisted product approval and reporting mechanisms updated, TTO section updated, ordering samples for outpatients added. Reclassified as a local guideline.	

NEW NUTRITION / DIET PRODUCT APPLICATION FORM (To be completed by the Lead Dietitian for submission to the UHL Trust Dietetic & Nutrition Senior Management Team meeting)

Nutrition/Diet Product Name:

Manufacturer:

Type of Product: Neonatal/Paediatric/Adult (please specify)

Product Use: Inpatients/Outpatients/Daycase patients (please specify)

Product Application: Individual patient, specific group of patients identify speciality/specialities and Clinical Management Group /Trust wide all patients (please specify)

Category of Product:

Oral nutritional supplement: Type

Enteral Tube Feed: Type

Modular Product: Type

Specialised Infant Formula: Type

Other type of product: Type

Status of Product:

ACBS approved/ Awaiting ACBS approval (please specify)

Nb take further advise if product not ACBS approved eg Prescription Only Medicine (POM)

Format of Product:

Clinical Indication(s) for product:

Will use of product: Be in addition to other products/replace an existing product/be a clinical trial product (please specify)

Consider a whole health community and system wide approach eg patients to be discharged to Community Hospital? Do we need to consult with the Leicestershire Nutrition and Dietetic Service Professional Network for consistency of patient care and impact on the Leicester, Leicestershire and Rutland Area Prescribing Committee (LLRAPC) Primary Care Nutrition formulary? Yes/No

Evidence base related to product proposed:

NB. Please attach /embed relevant publications related to clinical trials etc.

Cost

Cost per unit/case

Has a contract price linked to the Leicestershire Enteral Feeding Contract been set?

Yes/No

Cost neutral to Trust ?

Cost pressure to Trust – Trust wide or CMG Specific please state?

Cost pressure £ per annum please state

Signed:

Dietitian(s) signature:Date

Head of Service/Speciality Dietetic Lead/Dietetic Advanced Clinical Practitioner's
signature: Date

Decision by Senior Management Team meeting:

Approved/Approved with criterion/Not recommended and reason(s) (please specific)

Date

Whilst it is recognised that clinical staff will need on occasion to meet with external suppliers, the Trust has a Company Representative policy that is available on request that should be followed by the clinical area and the supplier.

Some points of consideration are that a supplier must not enter into any area without an appointment, pharmacy reps must complete a "Request and Appointment" form and all queries for medical equipment must be directed to mes@uhl-tr.nhs.uk. If a rep is invited into theatres, they must present ID to the Theatre Coordinator and sign in. They must follow the protocol detailed in the policy. Suppliers must be registered on SEC3URE (ReptraX) credential checking system and have a scheduled appointment before being admitted.

If you are experiencing an issue with a product or you are looking to review a product or trial an alternative, engage in a financial discussion, require a quotation, or being asked to sign up to an agreement / commitment arrangement then please ensure that you engage with the Procurement Department first, before you do any of these things as they will be able to help.

There are some general points that we would want to encourage about suppliers / company representatives and they are:-

- In line with the Trust's Company Representative policy, reps need to contact Procurement, in advance of any proposed meeting concerning products or services not currently purchased by the Trust.
- Please ensure that Reps are not allowed to wander around clinical areas.
- That they are not given access into any of the Trust's stock rooms unaccompanied.
- No commercial information should be shared with a supplier / rep – always refer them to Procurement.
- Don't allow trial equipment or products to be brought in without the involvement of Procurement.
- Don't sign any contract or agreement that a rep brings – always refer them to Procurement.
- Do challenge any rep that you see in an area, ask for ID and the purpose of their presence.
- Don't accept gifts or hospitality without declaring them on the Hospitality Register and follow the Prevention of Bribery Policy and Code of Business Conduct.

'Cold calling' is strictly prohibited. UHL employees must not admit Company Representatives that do not have a pre-arranged appointment. Please note action will be taken against suppliers who are repeat offenders which may result in suspension of all business related to that supplier.

Should a rep appear in your area unannounced with the intention of promoting products or gleaning information of existing products or services then please inform Procurement, (procurement@uhl-tr.nhs.uk) as soon as possible providing the name of the supplier and Company Representative.

Products should only be provided to the Trust that are covered by a national or local contract or a CMG clinically approved product.

Speciality / Members of Department

Leicester Royal Infirmary: (Adult) Nutrition and Dietetic Service Leicester Royal Infirmary, The Poppies, Infirmary Square, Leicester, LE1 5WW Telephone: 0116 258 5400 Fax: 0116 258 5841 Website: www.lnds.nhs.uk

Diagnoses

Reason for Admission - XXX

Main Diagnosis at Discharge - XXX

Other Diagnoses - XXX

Inpatient Management/Events/Complications/Operations/Risk Factors - XXX

Key Investigations - XXX

Co-morbidities (e.g previous medical conditions) - XXX

Planned Outpatient Investigations/Other Management - XXX

(NB;taken from medical discharge letter)

Anthropometrics

Body Weight (kg): XX

Body Mass Index (kg/m²): XX

Length/Height (cm/M Centiles for body weight and length/height): XX

Progress report from registered Dietitian

XXXXXXXXXX

ACTION REQUESTED of GP (Including referral to specialist)

Oral Supplement to be prescribed

I would like to suggest that the patient should continue the following ACBS nutrition prescription Fortisip Range:

FORTISIP COMPACT 125ml Mocha PIP Code 344-1912: bd and ACBS Criterion: x

Follow up

Xxxx

Yours Sincerely

Name

Designation

cc list - Mr xxx, Patient

Guideline Title: Nutrition and Diet Product Initiation and Adjustment of Dose by Registered Dietitians UHL Policy Page 14 of 14
 Reclassification as a category C guideline approved by Policy and Guideline Committee on 29.9.23 Trust Ref: C61/2023 Date of Next Review: Sept 2026
NB: Paper copies of this document may not be most recent version. The definitive version is held on InSite in the [Policies and Guidelines Library](#)