

# Reviewing Oral Nutritional Supplements (ONS) in Care Homes



For use by MOCH team, PCN pharmacist. Please CIRCLE answers.

RESIDENT ONS REVIEW FORM **Frimley**

*Exclude resident if they have a tube feed (PEG) as this is regularly reviewed by a Dietitian. The Abbott feeds (Ensure Plus, Ensure Plus Fibre, Ensure Compact, Ensure TwoCal, TwoCal Bolus) should only be used as tube feeds.*

Date	NHS number	Resident Name	
Product Name: <i>(complete a new form for each product)</i>			
Is ONS on the <a href="#">NHS Frimley Adult ONS formulary</a> <i>(Abbreviated version see 'ONS Review Form Information' sheet)</i>			
<b>YES</b> <i>First Line (green) Powder - continue</i>	<b>YES</b> <i>Second Line (green) Bottle – consider switch to first line powder</i>	<b>YES</b> <i>Amber products Consider switch to First Line option unless initiated by care home dietitian</i>	<b>NO</b> <i>Consider switch to First Line option</i>
Dosage – number of bottles or sachets per month			
<b>Less than 56</b> <i>Not therapeutic dose, consider STOP (especially if &lt;28) OR adjust to x 56 if tolerated and MUST score ≥2</i>		<b>56</b> <b>Therapeutic dose - continue</b>	<b>If more than 56</b> <i>Adjust to x 56 (unless recommended by Dietitian)</i>
Who requested initiation of the prescription?			
<b>GP</b>	<b>Dietitian</b>	<b>Hospital</b>	<b>Other state ...</b>
Medical status			
<b>Is resident very near EOL?</b>	<i>If not managing therapeutic dose, <b>STOP ongoing prescription.</b> Offer preferred food/fluids and maintain good oral hygiene.</i>		
<b>Does resident have Dysphagia?</b>	<b>Yes</b> – see specialist dysphagia product list and consult dietitian if any concerns.		
When was ONS last issued?			
More than 3 months ago	<b>STOP.</b> Request GP/pharmacist to put into Past <i>(not issued &gt;3/12)</i>		
Within last 0 – 3 months	Check MUST score and action as below:		
Calculate MUST score			
<b>MUST 0</b>	If <b>no</b> open referral with dietitian: <ul style="list-style-type: none"> <li>➤ STOP prescription.</li> <li>➤ Reduce dosage to OD until stock used up.</li> <li>➤ Encourage food-first approach, including fortified milkshakes/milky drinks.</li> <li>➤ Monthly weights.</li> </ul> <i>If open referral with dietitian – request review of ONS as MUST &lt;2</i>		
<b>MUST 1</b>			
<b>MUST 2</b>	<b>If Formulary-approved powder shake &amp; therapeutic dose</b>		<b>Continue</b>
	<b>If Bottle ONS – consider switch to first line powder alternative</b>		<b>Switch</b>
	<b>If Bottle ONS prescribed by dietitian for resident with dysphagia</b>		<b>Continue</b>
<b>If MUST 2 please check:</b>		<b>Action</b>	
Flavour preferences and check resident likes choices		Adjust flavours	
If NOT taking therapeutic dose (usually BD)		Consider STOP prescription	
<b>If NON-formulary product</b>		Use up stock & ask GP/pharmacist switch to formulary alternative	
If AMBER product, confirm if prescription initiated by dietitian		Check reference list	
Document review date recorded by staff to check: weight/ MUST /review if ONS still tolerated & appropriate		<b>Review date:</b>	
<b>Dessert style supplements</b>			
<b>Non-formulary:</b> <i>EnergieShake Dessert, Forticreme Complete, Fresubin Dessert Fruit, Fresubin 2kcal Crème, Fresubin Yocrema</i>		<b>STOP prescription.</b> Use up stock.	
If <b>MUST 0</b> or <b>MUST 1</b> - Offer Care Home desserts		<b>If MUST 2</b> - Switch to <b>Nutricrem</b>	

FILE in Resident's Records.

# Reviewing Oral Nutritional Supplements (ONS) in Care Homes



## ONS Reviews:

## ONS REVIEW FORM INFORMATION Frimley

- Inform care staff/GP/pharmacist of any recommended actions.
- File ONS Review Form in resident's record. Document review date (recommended every 3 months)
- If stopping ONS prescription: DO NOT DISPOSE until products reach expiry and/or wean off ONS by reducing to e.g. once daily, until all ONS are finished even after repeats are stopped.
- A **food-first** approach should be encouraged, including the use of fortified meals, drinks, and snacks.
  - See NHS Frimley leaflet [Boost Your Nutritional Intake](#)
- If MUST score 2 and needs full dietetic review, refer to Dietitian.
- For general prescribing enquiries, contact Prescribing Support Dietitian: [frimleyicb.prescribing@nhs.net](mailto:frimleyicb.prescribing@nhs.net)
- For the full adult ONS Formulary go to: [NHS Frimley Adult ONS formulary](#)

**Powder shakes are the first line ONS in care homes.**

**Bottles should only be prescribed in exceptional circumstances and on the advice of a care home dietitian.**

Oral Nutritional Supplements (ONS) for use in Care Homes	
Product Switches	Care Home FIRST LINE (green) ONS
<b>Standard shakes/bottles</b>	<b>First Line Standard powder – mix with 200ml whole milk</b>
<b>Non-formulary:</b> Ensure Shake, Ensure Plus Advance Ensure Plus milkshake*, Ensure TwoCal*, Ensure Plus Fibre*  <b>Formulary (Second Line):</b> Altraplen Energy, Aymes Complete, Fortisip Bottle	<b>Complan Shake</b> Banana, Chocolate, Original, Strawberry, Vanilla
	<b>Foodlink Complete</b> Banana, Chocolate, Natural, Strawberry, Vanilla
	<b>Aymes Shake</b> Banana, Chocolate, Ginger, Neutral, Strawberry, Vanilla
<b>Compact bottles</b>	<b>Compact Shake powder - mix with 100ml whole milk</b>
<b>Non-formulary:</b> Ensure Compact*  <b>Formulary (Second Line):</b> Altraplen Compact, Fortisip Compact	<b>Foodlink Complete Compact</b> Banana, Chocolate, Natural, Strawberry, Vanilla
	<b>Aymes Shake Compact</b> Banana, Chocolate, Ginger, Neutral, Strawberry, Vanilla
<b>Juce style bottles</b>	<b>Juce Style Shake powder - mix with 150ml water</b>
<b>Non-formulary:</b> Ensure Plus Juce, Fortijuce, Fresubin Jucy <b>Formulary (Second Line):</b> Actagain Juce, Altrajuce	<b>Aymes Actasolve Smoothie</b> Mango, Peach, Pineapple, Strawberry and Cranberry
<b>'Amber' products</b>	
<b>Procal Shot</b>	STOP prescription
<b>Altrashot 120ml bottle, give as 3 x 40ml shots</b>	Only continue if initiated by Care Home Dietitian
<b>Fortisip Compact Protein</b>	Only continue if initiated by Care Home Dietitian
<b>AYMES Actasolve Savoury</b>	If tolerated, switch to milkshake style as better nutrition

### Specialist DYSPHAGIA products (IDDSI Level): DO NOT switch as alternatives may not be appropriate

L1	SLO Milkshake + IDDSI 1 Slightly Thick		
L2	SLO Milkshake+ IDDSI 2 Mildly Thick	Fresubin Thickened Level 2	
L3	SLO Milkshake+ IDDSI 3 Moderately Thick	Fresubin Thickened Level 3	Nutlis Complete Drink Level 3
L4	Nutlis Fruit Level 4		