## 'MUST' Step 5: Management Guidelines for Care Home Residents

<u>'MUST' Score = 0</u> Low Risk

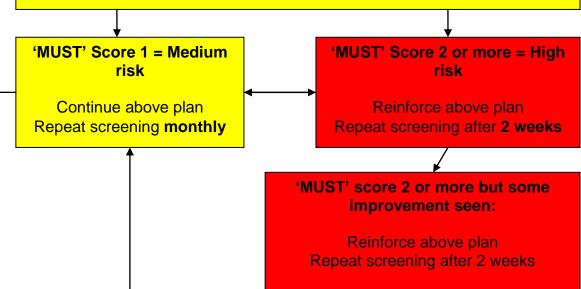
No action needed

Repeat MUST screen monthly
Or
Upon clinical concern

'MUST' Score 1 or more = Resident identified as At Risk of Malnutrition

## **ACTIONS**

- Consider cause of malnutrition and document plan to address this (if appropriate – consider clinical prognosis). For example; medication, depression, poor swallow, breathing problems, nausea, vomiting, constipation, diarrhoea, dementia\*.
- Complete a Nutritional Care Plan (to include the actions below) and record 'MUST' score. Refer to NHS Gloucestershire Food First leaflets for advice.
  - Set aims or goals of nutritional support and document these
  - Start an accurate and thorough food record chart
  - Discuss with catering staff and start adding 'food boosters' to all meals
  - Offer 2 nourishing snacks daily in-between meals
  - Offer 2 3 homemade or shop-bought nourishing drinks daily in-between meals
  - Review food chart after 1 week to check that the above has been offered daily and address any issues as shown on the food chart.
     For example, are all staff following the advice, does the resident seem to eat better at certain times etc.
- Repeat 'MUST' score in one month
- \* 'Food First' may not always improve nutritional status in dementia but this does not necessarily mean that sip feeds are appropriate. If a resident is unable to drink home-made nourishing drinks it is unlikely that they will take a sip feed. Continue to reinforce the above plan and consider dementia focussed strategies such as finger foods and addressing the eating environment.





Reinforce above plan, notify GP and refer resident directly to Care Home Support Team.

No improvement or deterioration:

Consider likelihood of any improvement in nutritional status and document in Care Plan