

Bradford Nutrition and Dietetic Services: Adult Referral Criteria for community and primary care referrers

Acceptance Criteria	
Anyone with one or more of the following conditions can be referred to the specialist dietetic service	
Gastroenterology	Patients with confirmed Coeliac Disease, Crohn's Disease, Ulcerative
	Colitis or Irritable Bowel Syndrome (according to Rome IV criteria)
	Other gastroenterology conditions referred by or under the care of
	BTHFT Consultant e.g. Cyclical Vomiting Syndrome, High stoma output,
	Pancreatic Insufficiency, Bile Salt Malabsorption, Gastroparesis
Oncology	Head and Neck Cancer, Upper GI Cancer, All other Cancer sites treatment
	<5 years ago
Neurological Conditions	Nutritional concerns relating to conditions including Motor Neurone
	Disease, Multiple Sclerosis, Parkinson's Disease, Huntington's Disease,
	Acquired Brain Injury
Renal Disease	Anyone requiring specific renal dietetic intervention with Chronic Kidney
	Disease stages 4-5 and who is under the care of the renal team at BTHFT.
Liver Disease	Non-Alcoholic Fatty Liver Disease, Alcoholic Liver Disease, Hepatitis,
	Cirrhosis under the care of BTHFT Consultant
Diabetes	Follow Diabetes Pathway via GP ASSIST or refer to Diabetes Service
	Specification
Weight Management	Adult patients who are obese (BMI \geq 30 or \geq 27 if BAME) who do not fulfil
0 11 1 51	the criteria or are unsuitable for alternative tier 2 or 3 services.
Cardiovascular Disease	Primary and secondary prevention of Heart Disease.
	Post Myocardial Infarction, Stroke and Heart Failure within 1 year of diagnosis.
Dysphagia Malnutrition	MUST 2+ with dysphagia assessed by speech and language therapy as
Dyspilagia Maillathtion	requiring modified consistency diet/fluids
Exclusion Criteria	requiring modified consistency dict/ fidius
The following conditions without dietetic services are not accepted	
	Including: Dementia, Frailty, End of Life, COPD and other respiratory
Community Malnutrition (MUST 1+)	conditions, Pressure Ulcers, Mental health conditions contributing to
(101031 1+)	high risk malnutrition e.g. depression, anxiety, ARFID, Underweight no
	known cause
	Please follow Malnutrition Management Pathway Template –
	available on SystmOne via ASSIST > Gastro I Hepatology > Malnutrition
	Management (BFD) or Malnutrition Management (AWC) and/or refer
	to community mental health teams where appropriate
Eating Disorders	Anorexia Nervosa, Bulimia Nervosa - Please refer to CONNECT or
	CAMHS eating disorder services
	The CONNECT referral form & further information
	IAPT Services available for other disordered eating

In addition, your adult patients who are under the care of the following teams can access BTHFT Dietitians who work as part of these services:

- Learning Disabilities Team within BDCFT
- Mental Health In-patient service within BDCFT
- BTHFT Nutrition Team
- BTHFT Bariatric Service
- BTHFT Home Enteral Feeding Dietetic Service
- Proactive Care Team (PACT) operating within primary care networks 4, 5 and 6
- Diabetes Specialist Dietetic Service across primary and secondary care refer to GP ASSIST Diabetes Pathway
- Bradford District and Craven Nutrition Support Team (BDC NST). A dietitian led service offering training and support to manage malnutrition to care homes. Care homes trained by BDC NST can request additional dietetic support for individual residents directly.