

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	<p>Patients with confirmed Coeliac Disease, Crohn's Disease, Ulcerative Colitis or Irritable Bowel Syndrome (according to Rome IV criteria)</p> <p>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</p>
Oncology	<p>Head and Neck Cancer, Upper GI Cancer</p> <p>All other Cancer sites treatment <5 years ago under the care of a BTHFT CNS team or for best supportive care in the community under a Bradford GP with nutritional problems relating to cancer diagnosis.</p>
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 with BMI ≥ 30 or >27 if BAME who do not fulfil the criteria or are unsuitable for alternative tier 2 or 3 services.
Cardiovascular Disease	<p>Primary and secondary prevention of Heart Disease.</p> <p>Within 1 year of diagnosis of Myocardial Infarction, Stroke or Heart Failure</p>
Dysphagia Malnutrition	MUST 2+ with dysphagia assessed by speech and language therapy as requiring modified consistency diet/fluids AND nutrition support
Exclusion Criteria	
The following conditions without dietetic services are not accepted	
Community Malnutrition (MUST 1+)	<p>Including: Dementia, Frailty, End of Life, Pressure Ulcers, Respiratory conditions, Mental health conditions contributing to high risk malnutrition e.g. depression, anxiety, ARFID, Underweight no known cause</p> <p>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</p>
COPD and other respiratory conditions	Pulmonary rehabilitation services provided by Baywater Healthcare Clinicians helpline 01270 218050

Eating Disorders	<p>Anorexia Nervosa, Bulimia Nervosa - Please refer to CONNECT or CAMHS eating disorder services</p> <p>The Leeds and York Partnership NHS Foundation Trust - Eating Disorders Service (Adult) website for further information</p> <p>Bradford District and Craven Talking Therapies Service – Healthy Minds available for other disordered eating</p>
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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 Hospital 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 in managing malnutrition to care homes. Referrals for individual patients cannot be made to the service from community/primary care so please encourage care homes to register for the STEW (support-train-eat-well) programme by contacting anhsft.bdcnst@nhs.net. Once STEW trained care homes can request additional dietetic support for individual residents directly.