



Hospital Supply of Nutrition Support Products and Consumables Procedure - Midwest

Effective: 13 May 2022

1. Guiding Principles

The WA Country Health Service (WACHS) Midwest Dietetics Service currently outsources the supply of nutrition support products (NSP) to clients via the Home Enteral Nutrition (HEN) Supplement Supply Scheme. Through suppliers in Perth, adults and children can order products at the current Specialised Nutrition Tender contract prices and have them delivered to their home. For full instructions and process for registration and ordering of NSPs, refer to the *Dietetic Service Guide 'Provision of Nutrition Support Products for Outpatients'*.¹

NSP are prescribed for clients deemed at high nutrition risk whose current dietary intake is inadequate to meet their nutrition requirements. Limitations to the current scheme include clients' inability to pay for their NSPs and/or consumables or for clients on long term enteral feeding. In circumstances where the clients are unable to purchase the recommended NSP, a significant health risk is posed to the client.

There is currently no State-wide WA Health HEN subsidy scheme that allows provision of subsidised HEN products from WA Health facilities and current advice for WACHS health services does not permit charging a co-payment for HEN products.

This document aims to provide the clinician with information of the criteria for provision of essential NSPs and consumables to community-based clients located in the Midwest region who have significant financial difficulties meeting the costs of these products. Assistance may be provided up to six (6) months, on a case by-case-basis in line with the WACHS [Outpatient Supply of Non-PBS Medications Policy](#).³

2. Procedure

2.1 Assessment

The dietitian is to assess the client and determine the need for NSP. This is documented using current processes for outpatient services (MR 5 or Community Health Information Service - CHIS), using validated assessment tools such as [MR60.1.6 WACHS Dietetics - Subjective Global Assessment](#), or approved paediatric growth charts (WHO charts).

If it is determined the client requires NSP, samples are provided to the client to determine tolerance and preference for products.

To be eligible for this program, the client requires assessment of both nutritional and financial risk; and deemed to meet high risk criteria in both areas.

2.1.1 High Nutrition risk clients

High nutrition risk clients likely to require NSP include:

Adults

- SGA score B or C (moderately or severely malnourished) +/- chronic health condition (i.e. cancer, pulmonary disease)
- Adults requiring enteral feeding (for medical reasons) in the community
- Long term reliance on enteral feeding as only source of nutrition.

Paediatrics

- Children who present with growth faltering, +/- chronic health condition
- Children requiring enteral feeding (for medical reasons) in the community
- Long term reliance on enteral feeding as only source of nutrition.

2.1.2 High financial risk clients

Clients are to be referred to the Social Work Department by the Dietitian to undertake a financial review to determine their capacity to pay for essential NSP. Prior to the referral, the client is to be fully informed that they will be requested to provide relevant financial information.

The Social Work review is to involve (but not limited to):

- concession card status
- current income and expense statements
- family and social situation
- access to other funds (i.e. Mission Australia for shopping to support ability to afford NSPs)
- financial counselling and ability to shift expenses.

Following this review, Social Work provides a summary based on their assessment of the client's financial situation which includes a recommendation as to whether the client should be included in this program.

In cases where clients are not willing to provide this information, a referral to the Social Work Department should not be completed and the client is not eligible for hospital supply of essential products. The Dietitian can offer to register the client with standard patient pays systems, whereby they are required to pay for NSPs and consumables. If this is not an option for the client and they are still not willing to disclose financial information, the Dietetics Service is to assess the imminent nutrition risks on a case-by-case basis only.

2.1.3 Other factors to consider:

Other factors to consider are outlined in the WACHS [Outpatient Supply of Non-PBS Medications Policy](#)³ and include consideration of the cost / supply of the NSP and the length of time the NSP will be required.

2.2 Current NSP supply schemes:

Where possible, the dietitian is to refer the client to existing patient pays systems. For full details of these, refer to the Dietetic Service Guideline 'Provision of Nutrition Support Products for Outpatients'.¹ This is the preferred method for obtaining NSPs, however if the dietitian determines the client is unable to pay for the required NSPs and/or consumables, they are to be referred to Social Work for assessment of alternate sources of funding and financial planning assistance.

Refer to [Summary of Current Processes for Providing HEN to Clients](#)

2.3 Alternate sources of funding for NSP:

Costs associated with the provision of NSP are to be discussed with the client and family/carer during the initial assessment. If it is deemed unlikely that the client will be able to pay for the NSP, other sources of funding are to be considered prior to applying for the health service supply of NSPs. Other organisations that may be able to provide alternate funding may include:

- Local Aboriginal Controlled Community Health Organisation (ACCHO), e.g. Geraldton Regional Aboriginal Medical Service (GRAMS) through appropriate funding sources (ITC programs)
- WA Cancer Council (grants available for other personal expenses): <https://www.cancerwa.asn.au/professionals/referrals-for-patient-assistance/>
- Department of Child Protection and Family Services (CPFS)
- Centrelink via [Centrepay Deduction Form](#)
- If the client is eligible for NDIS or is currently on a NDIS plan, all nutrition support products can be included in this plan.

2.4 Applying for health service supply of NSP and feeding equipment

If the requirement of NSP is deemed essential and payment is beyond the reasonable financial resources of the client, approval can be granted by the health service to provide up to six (6) months' supply of requested NSPs +/- feeding equipment as per *Request for Supply of Non PBS Pharmaceutical or medical supplies form*.⁴

Please refer to [Appendix 1](#) for flow chart illustrating the approval processes for community clients located in the Midwest and Gascoyne districts

- I. The primary Dietitian is advised by the client they cannot afford to pay for essential NSP and/or consumables.
- II. Referral to the Social Work Department is completed.
- III. The primary Dietitian discusses the case with the senior Dietitian, and they decide if request meets criteria to progress.
- IV. The primary Dietitian completes Request for the Supply of Non – PBS Pharmaceutical or Medical Supplies Form⁴ and sends all information to the Regional Medical Director (RMD), including Social Work assessment and nutrition assessment.

- V. The RMD reviews all evidence of nutrition requirements and financial risk management steps undertaken.
- VI. The RMD approves request for hospital supply of essential NSP and/or consumables
- VII. The primary Dietitian sends signed Request for the Supply of Non – PBS Pharmaceutical or Medical Supplies Form⁴ to Pharmacy for dispensing under appropriate cost centre and contacts the client outlining the process for collecting NSPs through the health service (Table One)
- VIII. The client receives NSPs and/or consumables.
- IX. The pharmacy or stores to contact Dietitian (via email) once the client receives NSP / equipment.

Table 1: Regional sites provision of NSPs to Community clients

	Midwest	Gascoyne	Murchison	Geraldton
NSPs	GH Pharmacy	CH Stores	GH Pharmacy	GH Pharmacy
Consumables	GH Stores	CH Stores	GH Stores	GH Stores
Cost centre	Refer to local Health service site	Refer to local Health service site	Refer to local Health service site	Hospital Operations 0803555

Note: For community-based clients not residing in Geraldton or Carnarvon, the Dietitian is to discuss options for delivering NSPs to the patient. Options include outreach community services, family or carers travelling to regional health services, internal health service deliveries/ freight services.

Exmouth clients are to receive supplies from Carnarvon.

2.5 Monitoring

The primary Dietitian is to conduct monthly nutrition reviews of the client to monitor nutrition outcomes. For long term enterally fed clients, reviews are to be six monthly at the discretion of the Dietitian.

Dietetics Services is to maintain a central database of clients accessing this service.

At the end of the approved time, the Dietitian is to assess the need to continue, and investigate other alternatives for nutritional intervention. Social Work is to advise if based on initial financial counselling, the client has the capacity to afford the NSPs and/or consumables or would benefit from ongoing health service support. This information is to be fed back to the RMD as required.

3. Definitions

Nutrition Support products (NSP)	All specialised medical nutrition products including oral sip supplements and enteral feeds.
Consumables	Includes syringes, containers and giving sets (for enteral feeds only). NB: This does not include supply of feeding pumps as these can be loaned for free from the pump manufacturer companies or via the Dietetic Department.

4. Roles and Responsibilities

Primary Dietitian

- Conducts nutrition assessment and recommends NSP as appropriate.
- Assesses the risk to the client associated with failure to obtain supply.
- Investigates alternatives for nutrition intervention.
- Consults with the senior Dietitian to establish if request for support is appropriate.
- Completes referral to a Social Worker for financial support.
- Conducts regular nutrition assessments of the client during the period of receiving NSPs.

Senior Dietitian

- Provides approval to primary Dietitian if the application is appropriate.
- Maintains central database for all clients accessing a hospital supply of NSPs.

Social Worker

- Conducts financial review to establish ability to purchase through alternate pathways.
- Liaises with the Dietitian regarding the outcome of the financial assessment.
- Investigates alternatives for supporting the provision of required NSP.

Pharmacy

- Dispenses NSPs to the client
- Advises the Dietitian when NSP has been provided to the client/carer.
- Monitors frequency of collection with the view to monitor compliance or overuse.
- Reports back to Dietetics Services and Operations Manager on usage.

Stores / Supply Department

- Provides NSPs or consumables to the client/carer.
- Advises the Dietitian when consumables or NSPs have been provided to the client/carer.
- Monitors frequency of collection with the view to monitor compliance or overuse.
- Reports back to Dietetics Services and Operations Manager on usage as required.

WACHS Midwest Regional Medical Director

- Reviews provision on NSP on a case-by-case basis with the senior dietitian.
- Approves emergency supply of NSP for high risk clients for up to six (6) months.

5. Compliance

Failure to comply with this procedure may constitute a breach of the WA Health Code of Conduct (Code). The Code is part of the [Integrity Policy Framework](#) issued pursuant to section 26 of the [Health Services Act 2016](#) (WA) and is binding on all WACHS staff which for this purpose includes trainees, students, volunteers, researchers, contractors for service (including all visiting health professionals and agency staff) and persons delivering training or education within WACHS.

WACHS staff are reminded that compliance with all policies is mandatory.

6. Records Management

All WACHS corporate records must be stored in the approved Electronic Documents and Records Management System.

[Records Management Policy](#)

All WACHS clinical records must be managed in accordance with [Health Record Management Policy](#).

7. Evaluation

Annual review of uptake of emergency supply of NSPs:

- Costings to WACHS Midwest.
- Number of clients registered.
- Length of time NSPs are provided for.
- Improvement of clinical nutrition outcomes, including weight status, catch up growth, meeting nutrient requirements, improved malnutrition risk factors, and compliance with taking prescribed NSPs.

8. Standards

[National Safety and Quality Health Service Standards](#) - 1.1, 5.27 and 5.28

9. Legislation

[Aged Care Act 1997](#) (Commonwealth)
[Health Services Act 2016](#) (WA)
[Carers Recognition Act 2004](#) (WA)
[Disability Services Act 1993](#) (WA)
[Health Practitioner Regulation National Law \(WA\) Act 2010](#)
[Medicines and Poisons Act 2014](#) (WA)
[Medicines and Poisons Regulations 2016](#) (WA)
[State Records Act 2000](#) (WA)

10. References

1. WACHS- Midwest, Nutrition and Dietetics 2020, Local Instructions for the provision of Nutrition Support Products for Outpatients.
2. WACHS Allied Health Clinical Prioritisation Framework, [Dietetics Guide](#); 2019.
3. WACHS [Outpatient Supply of Non-PBS Medications Policy](#).
4. WACHS [Request for Supply of Non PBS Pharmaceutical or Medical Supplies - Individual Patient Approval Form](#)

11. Related Forms

WACHS [MR60.1.6 WACHS Dietetics - Subjective Global Assessment](#)
WACHS [Request for Supply of Non PBS Pharmaceutical or Medical Supplies - Individual Patient Approval Form](#)

12. Related Policy Documents

WACHS [Outpatient Supply of Non-PBS Medications Policy](#).

13. Related WA Health System Policies

MP 0142/20 [Healthy Options WA Food and Nutrition Policy](#)

14. Policy Framework

[Clinical Governance, Safety and Quality](#)

15. Appendix

Appendix 1 - [Approval Processes for Community Clients Located in the Midwest and Gascoyne Districts](#)

**This document can be made available in alternative formats
on request for a person with a disability**

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Appendix 1: Approval processes for community clients located in the Midwest and Gascoyne districts

