

Dietetic Prescribing of Nutritional Products on Electronic Prescribing and Medicine Administration (EPMA) System Standard Operating Procedure

V1.0

Cornwall Partnership NHS Foundation Trust document reference code: OP/140/26

Purpose: To ensure that any oral nutrition products prescribed by dietitians are done so in accordance with this Standing Operating Procedure (SOP).

Target audience: Dietitians and Pharmacy.

Document sponsor and role: Stuart Gerty Lead Renal Dietitian and Emily Callan Professional Lead Dietitian.

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Freedom of information: Cannot be released under the Freedom of Information Act 2000. This document will only be published on the intranet (internal only).

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Royal Cornwall Hospitals NHS Trust approval process

General manager confirming approval processes: Richard Andrzejuk.

Governance lead confirming approval process: Becky Lester.

Supporting committee: Nutrition Steering Group and Therapies Senior Management Team (SMT) Meeting.

Supporting chairperson: NSG Ian Moyle; SMT Clare Rotman.

Executive director responsible for the policy: Director of Nursing, Midwifery and AHPs.

Approved at: Nutrition Steering Group RCHT, Cornwall and Isles of Scilly Prescribing Committee and Therapies SMT.

Date approved: 28 January 2026

Executive approval: Chief Nursing Officer.

Date approved by: 28 January 2026.

Approved at: Royal Cornwall Hospitals NHS Trust Policy Ratification Group.

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Cornwall Partnership NHS Foundation Trust approval process

Accountable Executive: Chief Medical Officer.

Supporting committee: Medicines Optimisation Safety Committee.

Supporting chairperson: Janine Glazier, Associate Medical Director.

Accountable Executive approved: Chief Medical Officer

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Expiry date: 1 September 2029 (3 years after ratification unless there are any changes in legislation or changes in NICE guidance or national standards).

Version control summary

Version	Date	Sponsor and / or reviewer	Summary of recent updates / changes (key points). Please specify Section Numbers.
1	June 2026	S. Gerty and E. Callan	New.

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Summary

The purpose of this procedure is to ensure that any oral nutritional supplements and enteral feed products prescribed by dietitians are done so in accordance with this guidance which is approved by the Cornwall and Isles of Scilly Prescribing Committee and ratified by the Royal Cornwall Hospital Trust. This revises the format of dietetic nutritional supplement prescribing from drug chart to electronic EPMA.

1. Rationale

The purpose of this procedure is to ensure that any oral nutritional supplements and enteral feed products prescribed by dietitians are done so in accordance with this guidance which is approved by the Cornwall and Isles of Scilly Prescribing Committee and ratified by the Royal Cornwall Hospital Trust. This revises the format of dietetic nutritional supplements prescribing from drug chart to electronic EPMA.

2. Scope

This procedure has been developed by the dietetic department in consultation with therapies and pharmacy governance leads, pharmaceutical directorate, electronic prescribing medical administration (EPMA) and the drugs and therapeutics committee.

3. Roles and responsibilities

3.1 Role of the Accountable Executive

All TAPs come under the ownership of an appropriate responsible Trust executive or other member of the Executive Management Team. The accountable executive shall:

- Be accountable for the appropriateness, validity and currency of the content.
- Appoint a Sponsor within their area for each TAP and provide support.
- Decide on an approval route for the TAP where appropriate.
- Exercise executive authority for approval for appropriate TAPs.
- Liaise on matters pertaining to the TAP with the corresponding committee or group, including informing of any direct approvals.
- Ensure the TAP remains compliant, reviewed and in-date.
- Authorise the retirement of the TAP if no longer deemed necessary.
- Consider any requirement for a new TAP.

3.2 Role of the supporting Committee

All TAPs are mapped to the most appropriate Committee, Subcommittee or Group, depending upon content. It may be necessary for more than one body to be involved, depending on the nature of the TAP. The appropriate corresponding Committee / Subcommittee / Group is required to:

- Consider requests for approval from the accountable executive.
- Note TAPs that have been directly approved by the accountable executive.
- Recommend TAPs for onward approval to Board where this is required.
- Scrutinise TAPs as required for assurance.
- Seek assurance regarding compliance of TAPs.

3.3 Role of the Sponsor

Each TAP shall have an assigned sponsor nominated by the accountable executive. The sponsor shall:

- Be the primary point of contact for all matters relating to the TAP, including being the known contact for staff who have issues / queries / suggestions regarding the document.
- Maintain a log of such issues as above.
- Liaise with the Integrated Governance Directorate, the accountable executive, subject matter experts and the corresponding committees, as necessary for the requirements of this policy to be met.
- Ensure the content is regularly reviewed and reflects required standards and practices.
- Recommend retirement of the TAP to the accountable executive should it no longer be required.
- Ensure the TAP remains in date, or that extension or retirement is requested in a timely manner.
- Identify any additional consultees for the consultation process.
- For TAPs where clinical audit is indicated, ensure this is carried out / facilitated.

3.4 Ownership

This procedure has been developed by the dietetic department in consultation with therapies and pharmacy governance leads, pharmaceutical directorate, electronic prescribing medical administration (EPMA) and the drugs and therapeutics committee.

3.5. Role of the Professional Lead for Dietetics

The Professional Lead for Dietetics is responsible for:

- Signing off senior members of the dietetic department (e.g. team leads and advanced practitioners) to enable prescribing of nutritional products on EPMA.

- Ensuring that this local procedure is adhered to.
- Review compliance to this policy providing clinical supervision to senior dietitians on a regular basis.
- To update and communicate to dietitians on any changes to the nutritional formulary.

3.6 Role of the Team Lead Dietitians

The Team Lead Dietitians are responsible for:

- Are responsible for signing off eligible dietitians within their team for EPMA nutritional supplement prescribing.
- To review compliance to this policy with dietitians via regular clinical supervision.

3.7 Role of Individual Dietitians

All dietetic staff members are responsible for:

- Completing the training relevant to their role.
- Once electronic EPMA training has been completed the dietitian must provide evidence of this to their team lead or professional lead (e.g. via a screenshot of completion).
- EPMA trained dietitians should follow the local procedure for dietetic prescribing of nutritional supplements on EPMA.
- EPMA trained dietitians should report any issues with EPMA to their team lead or professional lead dietitian and are responsible of the maintenance of their skill.
- Prescribe with an awareness of the manufacturer's product recommendations.
- Familiarise themselves with RCHT Formulary and only prescribe formulary approved items from the first line stocked nutritional items in the first instance.
- Prescribe from the second line nutritional products only when the first line products will not meet the nutritional requirements of the patient.
- The dietitian should contact pharmacy when a second line nutritional product is required.
- The dietitian should contact pharmacy when a specialist nutritional product is required to enable timely ordering.

3.8 Role of Pharmacy

- The ward / directorate pharmacist will provide sign off to the dietitian following a period of shadowing and assessment of accurate prescribing by the dietitian on EPMA.
- To keep up to date with changes related to this SOP.
- To ensure timely ordering of second line nutritional products where applicable.
- To ensure timely ordering for additional specialist product requests, where applicable.

3.9 Groups and committees

Royal Cornwall NHS Hospitals Trust Nutrition Steering Group.

4. Standards and practice

4.1. All Dietitians wanting to gain nutritional products prescribing rights on EPMA must:

- Complete the electronic EPMA sign off module.
- Have a period of shadowing with a directorate pharmacist, who will witness accurate prescribing of nutritional products on EPMA in a minimum of 3 patients and sign off the competence form (Appendix 3).
- Have a minimum of 3 patients supervised by the team lead or professional lead Dietitian to ensure appropriate choice, volume and quantity of nutritional product has been selected as per formulary guidance. This should then be signed on the competency form (Appendix 1 and 2).
- In addition to the above, entry level dietitians will complete the relevant section of the 'entry level dietitian capability framework' (Appendix 4).

4.2. On completion of the above steps the competence form will be stored in the persons p-file and the person will complete a self-declaration on ESR to confirm they have obtained the competence.

4.3. As this is a new procedure Dietitians who historically have EPMA prescribing rights will only need to complete the self-declaration on ESR.

4.4. Dietitians who have EPMA prescribing rights but have not used the skill for over 12 months will have their prescribing of nutritional products supervised by the Lead Dietitian for a minimum of 3 patients.

4.5. Completion of the above training will enable the dietitian to prescribe for a named patient, making note of the following:

- Details of nutritional product required.
- Indication of the dose and frequency.
- Indication of when is to start if this is different to the initial prescribing date.
- Indicate (where applicable) if the nutritional product is to be prescribed for the patients on discharge.
- If supplementation is required on discharge, all efforts should be made, where possible, to switch the patient to a cost-effective alternative as per the Integrated Care Board (ICB) ONS formulary.
- For tube feeds, an 'enteral feed regimen' (CHA 2692 V2), detailing the regime, will be completed and the feed will be prescribed on EPMA noting:
 - Type of feed.

- Volume of bag.
 - “Tube feed - see enteral feed regimen”.
 - The enteral feed regime is to be added to the nursing notes (end of bed notes).
- 4.6. The authorised dietitian **must** document what has been prescribed along with appropriate nutritional assessment and plan, in the patient’s case notes.
- 4.7. Where appropriate first line formulary nutritional products will be used.
- 4.8. Prescribing from the second line nutritional products should only be considered when the first line products will not meet the nutritional requirements of the patient.
- 4.9. When a second line nutritional product is required, the dietitian should contact pharmacy to alert them. Note only a small stock (3 days’ supply) of second line products will be available. If it is clinically likely that a patient’s stay will be over 3 days, then a small stock will be ordered by pharmacy which can take 24 to 48 hours to be delivered.
- 4.10. If first line and second line formulary products are not tolerated or where a very specific product is required for patient care, (e.g. peptisorb, nutrison MCT), other manufacturers specialised feeds / nutritional supplements can be requested but these products must be prescribed on a named patient basis only by the medical team and the ward pharmacist should be contacted to allow a supply to be ratified.
- 4.11. In the event of a dietetic feed contract change first line and second line nutritional supplements will need to be revised and EPMA informed. If this occurs it will be the responsibility of the procurement pharmacist to inform the dietetic professional lead of the contract changes.

5. Definitions and glossary

EPMA: Electronic prescribing medical administration.

ESR: Electronic staff record.

ONS: Oral nutritional supplements.

Appendix 1: Adult Nutritional Products Formulary

PRESCRIBABLE PRODUCTS – August 2022 (Abbott)

Please note:

First line: Stocked items - please order from the locations as below via POP.

Second line: Limited stock items – usually available within 24 to 72 hours depending on the time of day ordered, **please liaise with Pharmacy before committing stocks.**

- Products available in bulk fluids (at RCH) ordered by the ward using POP.
- Products available from pharmacy can be ordered by the ward using the ward's POP / named patient process
- Products that are second line **may be** available in limited stock levels, if no stock then 24-72 hours for additional stock to be ordered.
- All items will be supplied in the outers as listed, trays or boxes.

Sip feeds Name	Flavours	Pack size	First or Second line	Location
Ensure plus 1.5kcal	(No mixed tray – need to mix on the wards only please) Coffee, banana, strawberry, vanilla, fruits of the forest, chocolate - only flavours available in milkshake version.	Tray of 24 bottles (vanilla tray of 30)	1st	Bulk fluids Disp 2 trays of each
Ensure plus fibre 1.6kcal	Vanilla	Tray of 30 bottles	2nd	Bulk fluids Disp 1 tray
Ensure Compact 2.4kcal	Vanilla, Banana, Strawberry	Tray of 24 bottles	2nd	Bulk Fluids
Ensure Two Cal 2kcal	Vanilla, strawberry	Tray of 30 bottles	1st	Bulk fluids Disp 3 trays of each
Ensure plus juice 1.5kcal	Apple, orange, lemon and lime – only flavours available	Tray of 30 bottles	1st	Bulk fluids Disp 2 trays of each

Sip feeds Name	Flavours	Pack size	First or Second line	Location
Fresubin Thickened Level 2, Level 3 Drink	Wild strawberry, Vanilla	200ml Tray of 24	1st	Bulk fluids
Pro-cal shot Calogen 500ml	Strawberry / Neutral	6x120ml bottles	1st	Bulk fluids Disp 3 trays of each
Ensure Plus crème 1.4kcal	Banana, Chocolate, vanilla	Tray of 24 bottles	1st	Bulk fluids
Fresubin Crème 2kcal	Chocolate, vanilla	Tray of 24 bottles	1st	Bulk fluids
Fresubin Yocrème Pot	Lemon, Apricot-Peach, Raspberry	4x125g	1st	Bulk fluids

Enteral feeds (500ml x 8, 1000ml x 8, 1500ml x 6)

Name	Kcal/ml	Bag volumes	1 st or 2 nd line	Location
Osmolite Plus	1.2kcal	500ml, 1000ml, 1500ml	1 st	Bulk fluids
Jevity Plus 1.2kcal	1.2kcal	500ml, 1000ml, 1500ml	1 st	Bulk fluids
Osmolite HP	1kcal/ml	500ml	2 nd	Bulk fluids
Osmolite 1.5kcal	1.5kcal/ml	500ml, 1000ml, 1500ml	1 st	Bulk fluids
Osmolite 1.0kcal	1.0kcal/ml	500ml, 1000ml	1 st	Bulk fluids
Jevity 1.5kcal	1.5kcal/ml	500ml, 1000ml, 1500ml	1 st	Bulk Fluids
Jevity Plus HP	1.5kcal/ml	500ml	1 st	Bulk Fluids
Perative	1.3kcal	500ml, 1000ml	1 st	Bulk fluids
Jevity Promote	1kcal/ml	1000ml	1 st	Bulk Fluids
Jevity Plus	1.2kcal/ml	500ml, 1000ml, 1500ml	1 st	Bulk Fluids
Jevity Plus	1.2kcal/ml	500ml, 1000ml, 1500ml	1 st	Bulk Fluids
Jevity 1.5	1.5kcal/ml	1500ml	1 st	Bulk fluids
Nutrison Soya	1.0kcal/ml	500ml, 1000ml	2 nd	Bulk Fluids
Nutrison Low Sodium	1.0kcal/ml	1000ml	2 nd	Bulk Fluids
Nepro HP	1.8kcal/ml	500ml	1 st	Bulk fluids
Elemental 028 Extra Powder	1.8kcal/ml	100g sachet	1 st	Pharmacy
Modulen IBD	1kcal/ml	400g tin	1 st	Pharmacy
Vital	1.5kcal/ml	1000ml	1 st	Bulk Fluids
Fresubin HP	2kcal/ml	500ml	1 st	Bulk Fluids
Twocal	2kcal/ml	1000ml	1 st	Bulk Fluids
Jevity 1.1kcal	1.1kcal/ml	500ml, 1000ml, 1500ml	1 st	Bulk Fluids

Appendix 2: Paediatric Nutritional Products Formulary

Baby Formula and Paediatric Feeds

The following formulae and feeds are kept on the shelf in pharmacy or on the ward. For all other feeds patients are using please be aware that it can take **up to 5 working days** to obtain, and therefore pharmacy need plenty of notice to order these in. In many circumstances alternative feeds may be suitable – please discuss with a dietician. Stock of certain feeds will be kept in the TTO cupboard on CLIC. If you use any of this supply, please ensure you order a replacement ASAP as these lines are **not** kept routinely in pharmacy.

Feed / Formulae	Size	Form	Flavour	Where stocked
Oral / Sip feeds				
Paediasure Plus	200mL	Liquid	Strawberry, Vanilla	Main pharmacy
Paediasure plus Fibre	200mL	Liquid	Vanilla	Main pharmacy
Ensure Plus juice	220mL	Liquid	Apple, Orange, Lemon and Lime	Bulk fluids
Ensure plus	200mL	Liquid	Coffee, Banana, Strawberry, Vanilla, Fruits of the forest, Chocolate	Bulk fluids
Neocate Junior	400g	Powder	Neutral	Main pharmacy
Enteral / Tube feeds				
Paediasure	500mL	Liquid	N / A	Main pharmacy TTO cupboard CLIC
Paediasure fibre	500mL	Liquid	N / A	Main pharmacy
Modulen IBD	400g	Powder	N / A	TTO cupboard CLIC
Paediasure peptide	200mL/500mL	Liquid	Vanilla / Neutral	Main pharmacy TTO cupboard CLIC
Peptamen Junior Advance	500mL	Liquid	N/A	Main pharmacy
Vital 1.5	1000mL	Liquid	N/A	Bulk fluids
Infant Formulae				
Similac High Energy	200mL	Liquid	N/A	Bulk fluids
Infatrini Peptisorb	200mL	Liquid	N/A	Main pharmacy
Alimentum HMO	400g	Powder	N/A	Main pharmacy
Elecare HMO	400g	Powder	N/A	TTO cupboard CLIC
Energy Supplements				
Procal 5kcal Shot	120mL	Liquid	Neutral, Strawberry	Bulk fluids
Others				
Thick and Easy	225g	Powder	N/A	Main pharmacy
Carobel	135g	Powder	N/A	Main pharmacy
Breast milk fortifier	50 sachets	Powder	N/A	Main pharmacy
Nutriprem 2	900g	Powder	N/A	Main pharmacy

Other products that are available but must be ordered on a patient-by-patient basis (i.e. are not kept routinely in pharmacy and need to be ordered in) include:

- Paediasure Plus tube feed.
- Paediasure Plus Fibre tube feed.
- Paediasure plus juice.
- Polycal Liquid.
- Emsogen.
- Elemental 028 Extra.
- Paediasure compact.
- Vitajoule.

Out Of Hours Swaps

Neocate LCP	USE	Elecare HMO
Neocate Syneo		Elecare HMO
SMA alfamino		Elecare HMO
Nutramigen		Alimentum HMO (prev called Similac Alimentum)
Paediasure tube feeds (various)		Use equivalent sip feed until bags can be ordered
Nutrini peptisorb energy		Peptamen Junior Advance
Peptamen Junior or Nutrini Peptisorb		Paediasure Peptide
SMA High energy or Infatrini		Similac high energy

Appendix 3: Certificate of Competence in EPMA - Prescribing of Nutritional Supplements

The noted Dietitian below is eligible to prescribe / order nutritional supplements on a named patient basis on ePMA:

To enable a dietitian to be eligible to prescribe nutritional supplements on ePMA in RCHT they must have completed the above process and have agreed to comply with the above policy.

	Patient 1 EPMA sign off (signature)	Patient 2 EPMA sign off (signature)	Patient 3 EPMA sign off (signature)	Date
Dietitian (Print)				
Team / Professional Lead (Print)				
Directorate Pharmacist (Print)				

The completed certificate of competence is to be placed in the person's **p-file**. The person is then able to self-declare the achieved competence on ESR.

Appendix 4: Entry Level Dietitian Capability Framework

Professional Practice	Prescribing* • Able to demonstrate appropriate recommendation and prescribing of nutritional products in 15 patients across a range of conditions • To recommend the use of ONS and enteral feeding products according to the prescribing formulary <i>*Completion provides evidence needed for the dietitian being able to prescribe on EPMA as per 'Local Procedure for Dietetic Prescribing of Nutritional Supplements on EPMA SOP'</i>	Case studies			
		Supervision			

(Note: forms part of a larger capability framework).

Governance requirements

Associated Trust policies and documents

Cornwall Partnership NHS Foundation Trust

- None.

Royal Cornwall Hospitals NHS Trust

- Nutrition and Hydration for Adults Policy 2025
- Nutrition and Hydration for Children Policy 2026

NICE guidance

- CG32: Nutrition support for adults: oral nutrition support, enteral tube feeding and parenteral nutrition. Published 22 February 2006. Last updated 4 August 2017.
<https://www.nice.org.uk/guidance/cg32>

Other related legislation and guidance

- None.

Training requirements

Dietitians may be considered to prescribe on EPMA if they fit the following criteria:

- HCPC registered dietitian.
- Specialist and highly specialist / advanced practitioner dietitians.
- Entry level dietitians on completion of capability framework.

Continuing professional development as per HCPC standards.

Dietitians who already have nutritional product prescribing rights on EPMA must ensure the certificate of competency is stored in their p-file and complete the self-declaration on ESR.

Training and Compliance

Once the dietitian has completed the electronic EPMA module, pharmacy sign off and Professional Lead or Team Lead Dietitian sign off they must self-certify the competence on ESR. This is a one-off process.

Trust Approved Publication (TAP) application / implementation

Once approved by all stakeholders (NSG, Therapies, Pharmacy) the document will be uploaded to the document library on the RCHT and CFT Intranet.

All dietetic team leads will be made aware of the document and disseminate through their teams.

Monitoring arrangements

Information category	Detail of process and methodology for monitoring compliance
Element to be monitored	Prescribing practices by dietitians.
Lead	It is the responsibility of the dietetic professional lead and team lead dietitians to ensure that this policy is adhered to.
Tool	Regular supervision uploaded to HARP. Audit of dietetic prescribing by review of patient medical notes, EPMA and enteral feeding regimens via the record keeping audit.
Frequency	Annually.
Reporting arrangements	Reports to Nutrition Steering Group and Therapies Governance.
Acting on recommendations and lead(s)	Non-compliance will be reported to the professional dietetic lead, required actions will be identified and completed in a specified timeframe.
Change in practice and lessons to be shared	Required changes to practice will be identified and actioned within one month. Lessons will be shared with all the relevant stakeholders.

Will the monitoring arrangements result in a clinical audit: Yes

Environmental sustainability

The Trust is committed and obligated to reduce its environmental impacts. Healthier outcomes can be achieved for people, the planet, and pounds by conducting our activities in a more environmentally sustainable manner.

More information and guidance is available by contacting cft.sustainability@nhs.net

Updating and review

This section covers information regarding the review process. All policy documents should be reviewed no less than every 3 years. Where appropriate, the sponsor may set a shorter review date.

Revisions can be made ahead of the review date when the procedural document requires updating. Where the revisions are significant and the overall policy is changed, the sponsor should ensure the revised document is taken through the standard consultation, approval and dissemination processes.

Where the revisions are minor for amended job titles or changes in the organisational structure, approval can be sought from the executive director responsible for signatory approval and can be re-published accordingly without having gone through the full consultation and ratification process.

Any revision activity is to be recorded in the version control table as part of the document control process.

Data Protection Act 2018 (UK General Data Protection Regulation legislation)

The Trusts have a duty under the Data Protection Act 2018 and UK General Data Protection Regulations 2016/679 to ensure that there is a valid legal basis to process personal and sensitive data. The legal basis for processing must be identified and documented before the processing begins. In many cases we may need consent; this must be explicit, informed, and documented. We cannot rely on opt out; it must be opted in.

Data Protection Act 2018 and UK General Data Protection Regulations 2016/679 is applicable to all staff; this includes those working as contractors and providers of services.

For more information about your obligations under the Data Protection Act 2018 and UK General Data Protection Regulations 2016/679, contact the Information Governance Team.

- Cornwall Partnership NHS Foundation Trust: Email cpn-tr.infogov@nhs.net
- Royal Cornwall Hospitals NHS Trust: Email rch-tr.infogov@nhs.net

Equality and diversity

This document complies with the Cornwall Partnership NHS Foundation Trust and Royal Cornwall Hospitals NHS Trust equality and diversity statements. The statements can be

found in the [Royal Cornwall Hospitals NHS Trust equality diversity and inclusion policy](#) and [Cornwall Partnership NHS Foundation Trust equality, diversity and inclusion statement](#).

Equality impact assessment form

Title of policy or document for assessment: Dietetic Prescribing of Nutrition Products on EPMA SOP

Who is affected by the document?

☒ Staff ☒ Patients ☐ Visitors ☐ Carers ☐ Other

The document aims to improve access, experience and outcomes for all groups protected by the Equality Act 2010.

Concerns

Are there concerns that the procedural document could have a differential impact on the following areas?

Concern area	Response	If yes, what existing evidence (either presumed or otherwise) do you have for this?
Age	☐ Yes ☒ No	
Disability	☐ Yes ☒ No	
Sex	☐ Yes ☒ No	
Gender reassignment	☐ Yes ☒ No	
Pregnancy and maternity	☐ Yes ☒ No	
Race	☐ Yes ☒ No	
Religion and belief	☐ Yes ☒ No	
Sexual orientation	☐ Yes ☒ No	
Marriage and civil partnership	☐ Yes ☒ No	
Groups at risk of stigma or social exclusion such as offenders or homeless people	☐ Yes ☒ No	
Human rights	☐ Yes ☒ No	
Are there any other associated objectives of the document	☐ Yes ☒ No	

Name: Emily Callan.

Date: 24 March 2026.