**Waltham Forest Nutrition and Dietetic Service**

**Paediatric Referral Criteria**

**Community Paediatric Dietetic Service**

Paediatric Dietitians

Department of Nutrition & Dietetics

Waltham Forest

North East London Foundation Trust

Chingford Health Centre,

109 York Road, E4 8LF

Dept Tel: 020 8430 8090

Safe Haven Fax: 020 8430 8091

[www.nelft.nhs.uk](http://www.nelft.nhs.uk/)

All referrals for children under 19 still in education requiring dietetic intervention should be made to the paediatric dietitian’s community service. Please complete all sections of the A4 referral form and send via post, fax or email to

**walthamforestdietitians@nelft.nhs.uk**

It’s important to complete referral forms with at least:

* **PATIENT AND CARER DETAILS INCLUDING**
* **PHONE NUMBER** To help ensure positive outcomes for your patient please provide the contact number of the parent/carer who is most knowledgeable about your patient, diet and mealtime habits.
* **HEIGHT & WEIGHT WITH DATES OF MEASUREMENTS**
* **REASON FOR A DIETETIC REFERRAL**

**Otherwise referral will be rejected.**

**Incomplete referrals will be returned to the referral source outlining where further information is required, and those patients will not be seen until the forms are returned and all sections completed.**

It is the responsibility of the Dietitian to determine whether dietetic treatment is required. The referral criteria outline clinical conditions that are most likely to be appropriate for referral. Any clinical conditions not listed should be discussed with the dietitian prior to referral in order to determine if they are appropriate. Junior staff and students cannot refer to the service as it is felt that a certain level of expertise is needed to be able to refer.

Referrals will be accepted from the following health care professionals:

* Allied Health Professionals
* Qualified Medical Practitioners including dentists
* Clinical Nurse Specialists
* Health Visitors
* Practice Nurses
* School Nurses

**These guidelines are for paediatric referrals only; separate guidelines exist for adult referrals.**

Referral Criteria For Waltham Forest Community Paediatric Dietitians

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| ***Please note all patients referred to the dietitian must have a recent***  ***height and weight measurement recorded on the*** ***referral form*** [***ND WF paed referral form FEB 2022.doc***](file:///C%3A%5CUsers%5CSaira.Mann%5CDownloads%5CND%20WF%20paed%20referral%20form%20FEB%202022.doc) |
| **Medical Condition** | Appropriate Patients |
| Nutrition support /Faltering Growth | * Children with acute/ chronic illness or other clinical conditions impacting on nutritional status and requires nutritional support ie
* Significantly Underweight
* Children < 2 years of age: downward drop of >2 centiles > 1 month.
* Children > 2 years of age: if height centile is over 2 centiles above weight centile
* A downward drop of weight < 0.4th centile especially if height dropping centiles
* A downward drop of 1 weight centile, if birthweight was below the 9th centile
* A downward drop of 2 or more weight centile spaces, if birthweight was between the 9th and 91st centiles
* A fall across 3 or more weight centile spaces, if birthweight was above the 91st centile
* When current weight is below the 2nd centile for age, whatever the birthweight.
* Patients referred for faltering growth must be based on recent measurements, without recent measurements referral won’t be treated as urgent and will be offered routine appointments.
* During COVID19 pandemic arrange measurements by contracting rapid response team. If no safeguarding concerns consider parents measuring at home-see document guidance on measuring children at home.

NICE <https://www.nice.org.uk/guidance/ng75> |
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| Fussy eaters0-5YR HENRY**https://www.henry.org.uk/** | * For fussy eaters with no other nutritional problems please provide first line advice. If there is no improvement following first line advice, or engagement with HENRY. Please refer to the dietitian.
* May be referred if they have had weight loss and/ or very limited intake with risk of nutrient deficiency (i.e. calcium, iron etc.)
* Children eating inappropriate textures for their age which show no improvement after first line advice from the health visitor. Please refer to the dietitian.
* If they refuse to eat foods requiring extended chewing or there is a delay/ difficulty in swallowing/ sucking/ chewing, Speech and Language Therapy should be involved. It is very likely that they suffer from a sensory-based feeding problem rather than fussy eating. A referral should be made to the Speech and Language Therapy Department [SALT referral form](file:///S%3A%5CPaediatrics%5CSALT%20Referral%20Form%2021%20Jan%202015%20FINAL%20%283%29.doc).
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| Aversive eater | * Children with ASD-Autism Spectrum Disorder will be seen for a one-off nutritional assessment from a dietician. They will be seen on-going if their growth is faltering or they require nutritional supplements.
* ARFID : Avoidant Restrictive Food Intake Disorder is a diagnosis in the DSM-5, **we are not commissioned to provide this service. This service is available elsewhere in NELFT NHS Foundation Trust**

Dietitian – ARFID pathway SET CAMHS Eating Disorder Team for Children and Young People125 New London RoadChelmsfordEssexCM2 0QTMobile: 07732 904440 Telephone: 0800 953 0222 Option 1, Option 8Internal extension: 55011 |
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| Weaning0-5YR HENRY**https://www.henry.org.uk/** | * First line advice provided or signpost to HENRY before referral to dietitian.
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| Constipation | * For children with simple constipation first line advice should be given before referring to the dietitian.
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| Allergies/ Intolerances | * Food Intolerance- e.g. Lactose Intolerance
* Children with non IgE mediated Cow's milk protein allergy displaying more than one non IgE mediated symptoms e.g. reflux constipation, diarrhoea and eczema.

<https://www.allergyuk.org/assets/000/002/175/iMAP_1_Presentation_of_Suspected_Cow%E2%80%99s_Milk_Allergy_original.pdf?1539852483><https://www.allergyuk.org/assets/000/002/176/iMAP_2_Management_of_Mild_to_Moderate_Non-IgE_Cow%E2%80%99s_Milk_Allergy_original.pdf?1539852537>* **If a child is having immediate IgE symptoms** such as lip swelling, difficulty breathing, we can see for dietetic advice around diet aspect of allergy management but they would **need a referral to an allergy specialist service.**
* Children with **confirmed** 1-2 food allergies. There is a greater risk of nutritional deficiencies the greater the number of allergies present therefore better to be seen within allergy specialist service-**AVAILABLE from ROYAL London University Hospital or Homerton University Hospital or North Middlesex University Hospital**
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| Weight Management | **We do not routinely accept referrals for weight management, please onward refer to an available weight management program in Waltham Forest. Please see details below.** Available weight management programmes in Waltham Forest: * 0-5YR HENRY
* **https://www.henry.org.uk/**
* 5-15YR Beezee Bodies
* **Just fill in the form at beezeebodies.com/refer-a-client**
* 13-17YR Beezee Bodies
* **Just fill in the form at** [**https://beezeebodies.com/programs/byouth/**](https://beezeebodies.com/programs/byouth/)
* First Line advice should be provided if the child is overweight. Patients can be directed to resources on the virtual resource hub: <https://www.nelft.nhs.uk/services-childrens-dietetic-resources> and Change4Life: [Healthier Families - Home - NHS (www.nhs.uk)](https://www.nhs.uk/healthier-families/#:~:text=Welcome%20to%20Healthier%20Families,%20the%20new).

**Severe Obesity (>99.6th)We suggest that the following cases are referred to a Consultant Paediatrician. The GP needs to make the referral:** Referrals to London CEW clinics: [NHS England — London » Complications of Excess Weight Clinics](https://www.england.nhs.uk/london/london-clinical-networks/our-networks/london-babies-children-and-young-peoples-transformation-team/weight-management/complications-of-excess-weight-clinics/)**Key referral criteria:** 1. **Obesity**
2. **Significant obesity-related medical comorbidity that would benefit from weight loss (eg type 2 diabetes, sleep apnoea, NAFLD with fibrosis) that has not responded to treatment with specialist team**
3. **Family wants help to change**

**OR**1. **Severe Obesity – BMI is currently set at >3.33 Z Score (although this may increase in the future)**
2. **Family wants help to change**

**CEW services are based on home address and corresponding London borough**. Find borough here: <https://www.gov.uk/find-local-council>  |
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| Miscellaneous | Accepted referrals: * Children with abnormal macro- and micronutrient deficiencies
* Vegetarians/ vegans with associated vitamin and mineral deficiencies (evidence to be attached)
* Gastroenterology-Coeliac disease

Rejected referrals:* All Ex prem patients are managed by the Paediatric Dietetic team at Whipps Cross Hospital and therefore we are unable to accept these referrals.
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| Enteral Feeding | **Patients requiring artificial nutrition support nasogastric/ gastrostomy feeds are managed by the acute paediatric dietitians at Whipps Cross Hospital and therefore we are unable to accept these referrals or any referral where enteral feeding may be indicated.** |

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| **Eating Disorder Service. Orchards Health Centre, Gascoigne Road, Barking, Essex IG11 7RS Tel: 0300 555 1216**  |
| **Children with eating disorders should be seen by this specialist service.**We do not have the skills or expertise to safely see patients who present with symptoms that could indicate they have an eating disorder. Eating disorder is condition which is characterised by an abnormal attitude towards food that causes someone to change their eating habits and behaviour.We are not able to accept patients * -At risk of Refeeding Syndrome due to risk of clinical safety
* -ARFID/ Extreme fussy eating with a weight for height <80%

We would suggest in the first instance that the patient have a paediatrians review to rule out any organic cause. Refer to MARSIPAN guidelines, BP, ECG, tachy/bradycardia, oedema, confusion, bowels, medication, temperature, hydration, history of Refeeding Syndrome. |

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| **Our DNA Process** |
| **If a patient DNA’s any of our appointments we will discharge patient and update referrer GP and any other HCP involved including safeguarding team via letter or email where secure. This is to ensure efficient communication in the best interest of the patient.** **We also explain in the discharge letter that if the parent or carer wish to discuss the discharge. We can consider reversing a discharge provided it is within 4 months of the initial referral as after this it will be out of date and they will need a new referral.** |