



NUTRITION, FOOD SERVICE & DINING IN LTC

The best practices within this document are recommendations to support regulatory compliance to Ontario LTC legislation, promote optimal nutrition and hydration care and support person centered care. It is important to note, however, that residents' rights and preferences are paramount and should be respected regardless of legislation or best practice. The best practice document is based on resources and expertise from industry professionals and where applicable, are evidence-based. This is a living document that will transition with the evolution of the industry over time.

SUBJECT: SKIN & WOUND MANAGEMENT	Revised: 2025-05-15
ONTARIO REGULATION 246/22 made under the FIXING LONG-TERM CARE ACT, 2021	
Nutritional Care and Hydration Programs	
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1. Purpose & Scope
• Older adults may be prone to skin breakdown due to decreased mobility, poor blood flow, loss of skin elasticity, and loss of muscle mass, resulting in increased exposure to pressure and ulceration. Poor food and fluid intake and increased metabolic needs can lead to malnutrition, which presents a risk for skin breakdown. • Residents at primary risk include those who are incontinent or have dysphagia, or who are bed-bound or in wheelchairs and can't reposition themselves. Residents with peripheral vascular disease, stroke and diabetes may be slower to heal. • Residents who require skin and wound care management include those that may be at risk of skin breakdown, may have already developed skin breakdown, or may have delayed wound healing.



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2. Key Concepts

- Nutrition considerations for skin health at initial screening and ongoing nutrition assessments include potential for weight loss, potential for dehydration, need for assistance with meals and snacks, and overall reduced food and fluid intake.
- The registered dietitian (RD) participates as a member of the Interdisciplinary Skin and Wound Care Team, and contributes to the overall program for skin health and the development and implementation of best practice protocols. This includes referral to the RD for all levels of pressure injuries, foot ulcers, surgical wounds, burns or skin tears for assessment and care planning, as well as establishment of hydration and nutrition interventions.
- As of April 11, 2023, MLTC, Dietary referrals for skin tears, bruises, rashes are no longer needed unless there is a worsening skin condition.

3. Practice Recommendations

a. Assessment & Monitoring

- There is a process to screen each resident at admission, at each quarterly assessment and when there is a change of nutritional status. The screening includes risk of developing or worsening skin breakdown.
- Referrals are sent to the RD for nutrition assessment and care planning if there are signs of pressure injuries, foot ulcers, surgical wounds, burns or skin tears.
- RD collaborates with the interdisciplinary care team to identify residents at risk of developing or worsening skin breakdown.
- Residents with malnutrition, cancer, renal failure, pneumonia, cardiovascular disease, diabetes, a suppressed immune system, an autoimmune disease, poor blood flow and hypoxia are at higher risk for skin breakdown or worsening skin breakdown.
- RD assesses each resident's adequacy of total nutrient intake, with awareness of nutrients affecting skin health, such as Calories, protein, fluids, and micronutrients.
- Goals can include:
 - 30 to 35 Calories per kilogram body weight
 - 1 to 1.5 grams protein per kilogram body weight
 - 25 to 30 ml fluids per kilogram body weight



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- Provide additional fluids for elevated ambient temperature, fever, vomiting, diarrhea, profuse sweating, and significant fluid loss from wounds
- The resident's progress is monitored, through evaluation of skin integrity/wound healing, as well as food and fluid intake, and treatments and interventions are adjusted, as indicated.

b. Interventions

- Interventions are established to address the resident's increased needs for energy, protein, fluid and vitamins/minerals, as individually required to promote wound healing.
- An individualized nutrition and hydration care plan is developed for residents at risk of developing or having worsening skin breakdown.
- Fortified or nutrient dense foods and/or oral nutritional supplements may be provided between meals if nutritional requirements are not being achieved through meals and regular snacks. An example of a fortified food is the use of skim milk powder blended into milk, to provide extra Calories, protein and micronutrients.
- For those who require assistance with eating, food, fluid and/or supplement is provided at a time when assistance is available.
- A vitamin/mineral supplement may be provided when dietary intake is poor or when deficiencies are confirmed or suspected.
- Interventions are documented in the progress notes and nutrition care plan.

4. Home Specific Policies, Roles & Responsibilities

- Use these Best Practices to guide your home specific policies, roles and responsibilities. Home specific policies take precedence over this document.
- Policies, procedures and protocols are developed for the RD as a member of the skin and wound care team, for assessment, care planning and establishment of hydration and nutrition interventions. This includes the following key points:
 - Establish resident's skin status upon admission and a minimum of quarterly, in order to identify anyone at risk of skin breakdown.
 - Ensure there is a system in place to immediately notify the RD and nutrition manager (NM) if a resident is at risk of skin breakdown.



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- Assess residents with pressure injuries, foot ulcers, surgical wounds, burns or skin tears
 - Work with the interdisciplinary health care team to establish root cause.
 - Implement individualized interventions.
 - Continue to monitor until wound is cleared or completely healed.
 - Determine level of nutrition risk and need for further follow-up.
 - Document in progress notes.
 - Update nutrition and hydration care plan.
 - Communicate any changes to NM for implementation.
- Policy includes notation that referral to RD may not be required for simple skin tears, stage 1 wounds, rashes, mosquito bites, bruises, and other blemishes on skin surfaces, in order to avoid over-referrals and inefficient use of the RD's time.

5. Resources/Tools

BC Dietitians Wound Sub-Committee, British Columbia. 2024.

<https://www.clwk.ca/get-resource/nutrition-for-wound-prevention-management-guideline-for-dietitians/>

Braden Scale

https://www.in.gov/health/files/Braden_Scale.pdf

RNAO November 2024. Best Practice Guideline – Pressure injury management: Risk assessment, prevention and treatment 4th edition.

[file:///Users/admin/Downloads/Pressure%20Injury%20Mgmt_Final_Web%20\(1\).pdf](file:///Users/admin/Downloads/Pressure%20Injury%20Mgmt_Final_Web%20(1).pdf)

Wounds Canada. 2025. Skin Health and Wound Management: Best Practice Recommendations 2025.

<https://www.woundscanada.ca/health-care-professional/publications/bpr-new>

6. Evidence & References

Dodd, K. 2021. The Geriatric Dietitian: Nutrition and Healing Wounds.

<https://the geriatic dietitian.com/healing-wounds/>

NPIAP, EPUAP, Pan Pacific Pressure Injury Alliance. 2025. Prevention and Treatment of Pressure Ulcers/Injuries: Quick Reference Guide Prevention Recommendations., The International Guidelines, 4th edition.

<https://internationalguideline.com/the-international-guideline>

DC PEN, 2018. Wound Care and Pressure Injuries: Summary of Recommendations and Evidence

<https://www.pennutrition.com/KnowledgePathway.aspx?kpid=7871&trcatid=42&trid=7859>



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Munoz N, Posthauer M, Emanuele M, et al. The Role of Nutrition for Pressure Injury Prevention and Healing: The 2019 International Clinical Practice Guideline Recommendations.

https://journals.lww.com/aswcjournal/fulltext/2020/03000/the_role_of_nutrition_for_pressure_injury.3.aspx

Seth, I. Lim, B. et al. 2024. Impact of nutrition on skin wound healing and aesthetic outcomes: a comprehensive narrative review, JPRAS Open 39 (2024), 291-302

<https://pmc.ncbi.nlm.nih.gov/articles/PMC10874171/>