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**Sheffield
Clinical Commissioning Group**

Dietary Information Handbook

For

Sheffield

Care Home Staff

(Second Edition)



**Produced by Sheffield Care Homes Dietitians of
Medicines Management Team in association with
Sheffield Teaching Hospitals Dietitians and the
Speech and Language Therapist Service**



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Introduction

This handbook contains information to assist care home staff promote good nutrition and hydration for residents with normal dietary requirements and for those with therapeutic dietary needs.

All residents should be nutritionally screened and have a personalised nutritional care plan agreed on admission, which should be reviewed monthly. This handbook will help provide information to formulate care plans and help prevent malnutrition.

It also aims to provide practical advice for catering staff to help provide suitable meals for therapeutic diets when no or limited information is available.

It is important to remember that residents who are on palliative care/near end of life care are able to continue eating and drinking safely and comfortably for as long as possible.

This information is for guidance only and should **not replace** individual dietary advice a resident may already have been provided with by a qualified dietitian.

If you have a resident who has already been provided with dietary information by a dietitian in Sheffield and you need further information or support but you cannot find their contact details, telephone the relevant clerical office listed below for assistance:

Community Dietetic Clerical Office	0114 3054250
Northern General Hospital Dietetic Clerical Office:	0114 2714162
Royal Hallamshire Hospital Dietetic Clerical Office:	0114 2712617
Weston Park Hospital Dietetic Clerical Office:	0114 2265411

Notes

- 1. If you have a resident who needs advice about a therapeutic diet please contact your care home GP who can organise a referral to the relevant health care professional/Dietetic Service for appointments in community clinics.**
- 2. Whilst care has been taken to ensure the accuracy of the information contained within this handbook, information/policies are constantly changing. If you have any concerns about the information within this handbook please contact Davlyn Jones on Tel: 0114 3051837/2714162 or Gillian Goddard Tel: 0114 3054250**

Care Quality Commission

Meeting Regulation 14: Nutritional and hydration needs

The intention of this regulation is to make sure that people who use services have adequate nutrition and hydration to sustain life and good health and reduce the risks of malnutrition and dehydration while they receive care and treatment

To meet this regulation, where it is part of their role, providers must make sure that people have enough to eat and drink to meet their nutrition and hydration needs and receive the support they need to do so.

People must have their nutritional needs assessed and food must be provided to meet those needs. This includes where people are prescribed nutritional supplements and/or parenteral nutrition. People's preferences, religious and cultural backgrounds must be taken into account when providing food and drink.

The Care Quality Commission (CQC) can prosecute for a breach of this regulation or a breach of part of the regulation if it results in avoidable harm to a person using the service or a person using the service is exposed to significant risk of harm.

The CQC monitor, inspect and regulate services to make sure they meet fundamental standards of quality and safety.

Care Homes must have a strategy to address:

- Provision of suitable and nutritious food and hydration, which is adequate to sustain life and good health
- Provision of parenteral nutrition and dietary supplements when prescribed by a health care professional
- Provision of food and hydration for service users preferences or their religious or cultural background
- Support for a service user to eat and drink when necessary

Care homes must follow people's consent wishes if they refuse nutrition and hydration, unless a best interest's decision has been made under the Mental Capacity Act 2005

Eating a balanced diet

Use the 'Eatwell Guide' below to help residents get the nutritional balance right. It shows each of the food groups and how much should come from each. This includes everything that is eaten during the day, including snacks.



Further information about eating a balanced diet

Beans, pulses, fish, eggs, meat and other proteins

- This group should contribute 12% of the total volume of food eaten
- Encourage at least 2 servings a day from this food group. A suggested serving is:
 - 70-90g (2 ½ oz-3oz) of cooked meat
 - 140g (5oz) of cooked fish
 - 3 tablespoons (125g) beans, lentils
 - 2 eggs
 - 2 level tablespoons nuts
- Encourage fish twice a week (1 oily and 1 white type). Oily fish provides a source of omega-3, a type of polyunsaturated fat that helps keep the heart healthy.
- These foods provide protein, iron, zinc and magnesium

Potatoes, bread, rice, pasta, and other starchy carbohydrates

- This group should contribute 38% of the total volume of food eaten
- Encourage this food group at each meal
- For most residents 6 servings are suggested at least each day. A suggested serving is:
 - 1 large slice bread
 - 3 tablespoons breakfast cereal
 - 1 wheat biscuit
 - 2 heaped tablespoons cooked rice
 - 3 heaped tablespoons cooked pasta
 - 2 egg sized potatoes
 - 3 crackers
 - 1 crumpet
 - 1 small chapatti
- This group of foods is the main energy source of the diet
- Wholegrain varieties of this food group provide fibre
- These foods provide sources of B vitamins, calcium and iron

Dairy and alternatives

- This group should contribute 8% of the total volume of food eaten
- Encourage 2-3 servings each day from this food group. A suggested serving is
 - ⅓ pint (200ml) milk
 - 1 small carton of yoghurt (125ml)
 - Match box sized piece of cheese (30g/1oz)
- These foods are important for bone health
- These foods provide protein, calcium, riboflavin, vitamin A and D

Fruit and vegetables

- This group should contribute 40% of the total volume of food eaten
- 5 portions per day are recommended. A portion is 80g which is:
 - 3 heaped tablespoons of cooked vegetables or canned fruit
 - 1 dessert bowl of salad
 - 1 large fruit e.g. apple, banana, pear
 - 2 small fruits e.g. plum, kiwi, satsuma
 - 150ml glass fruit juice
 - 1 tablespoon dried fruit
- These foods provide fibre, vitamin C, folate, antioxidants and potassium

Oils and spreads

- This group should contribute to 1% to the total volume of foods eaten
- Unsaturated fats are healthier fats e.g. rapeseed oil, vegetable oil, sunflower oil, olive oil and soft spreads made from unsaturated oils
- These foods provide some essential fatty acids, vitamins A and D

Foods to eat less often and in small amounts

(Foods high in fat, salt and sugars)

- Chocolate, sweets, cakes, pastries, biscuits, full sugar soft drinks, butter, ice-cream, cream, mayonnaise, crisps, jam, honey and puddings
- **Older adults are at greater risk of under nutrition. Limiting these energy giving foods or restricting them may be inappropriate as they can be used to fortify foods and prevent malnutrition.**

Hydration

- Aim to offer 6 – 8 glasses of non-alcoholic fluid every day. Water, milk, squash, tea and coffee all count. Fruit juice and smoothies can also count as fluid but in the general population it is advised to limit consumption to no more than a combined total of 150mls per day.

Food labelling

- Many pre packed foods have a label on the front of the pack which shows the nutrition information per serving. They also refer to reference intake which tells you how much of each nutrient should be included in the daily diet. The percentage refers to the contribution that the product makes to the reference intake for each nutrient.
- Food labels can help you choose between foods and pick those that are lower in calories, fat saturated fat, sugar and salt
- “Where colour coded labels are used you can tell at a glance if they are **high**, **medium** or **low** in fat, saturated fat, sugar and salt. For a healthier choice, try to pick products with more **greens** and **ambers** and fewer **reds**” (1)

Remember it is **eating for health** and for those at risk of undernutrition healthy eating will not be appropriate

Further information/assistance

BDA: The Association of UK Dietitians

www.bda.uk.com/foodfacts/home

www.bda.uk.com/publications/NutritionHydrationDigest.pdf

The Department of Health: (1)

<https://www.gov.uk/government/publications/the-eatwell-guide>

NHS Choices

<http://www.nhs.uk/Livewell/goodfood/Pages/the-eatwell-guide.aspx>

Nutritional Concerns in older adults

Nutrient	Concern
Calcium	<ul style="list-style-type: none"> • Vitamin D is needed to absorb calcium effectively • Sufficient vitamin D and calcium and activity are important to prevent bone fractures
Energy	<ul style="list-style-type: none"> • Too few energy type foods mean residents lose weight and struggle to carry out daily tasks. If too many of these foods are eaten a resident may become overweight and increase their risk of diabetes.
Fibre	<ul style="list-style-type: none"> • Poor intakes of fibre makes the older adult prone to constipation • Often have inadequate intakes of fruit, cereals and vegetables
Fluid	<ul style="list-style-type: none"> • More water is lost via the skin and kidney with the ageing process • Risk of dehydration with problems of increased confusion, drowsiness and constipation
Folate	<ul style="list-style-type: none"> • Needed to make red blood cells and prevent anaemia • Often have overcooked food and poor dietary intakes of this nutrient
Iron	<ul style="list-style-type: none"> • Prone to illnesses which effect iron absorption, so are prone to anaemia • Tannins (e.g. tea) & bran inhibit iron absorption whilst lactic & citric acids (e.g. fruit juices) enhance iron absorption
Protein	<ul style="list-style-type: none"> • Protein is important for growth and repair of body tissues • Too little protein means muscles become wasted
Vitamin C	<ul style="list-style-type: none"> • This is needed for tissue and wound healing • Often have poor intakes of fruit and vegetables
Vitamin D	<ul style="list-style-type: none"> • Most vitamin D is produced naturally by ultraviolet (UV) irradiation in the skin • Are susceptible to deficiency due to reduced efficiency in the skin • Have less exposure to the sun, as they may be less able to go outside • Intakes of oily fish and fortified fats which are alternative sources are often not eaten. • Vitamin D supplement should be taken daily – this should provide 10 micrograms (µg).
Zinc	<ul style="list-style-type: none"> • Necessary for tissue repair and wound healing • Zinc deficiency can effect taste • Needed for the immune system

Further information/assistance

National Association of Care Catering (NACC). Recommended standards for older people in residential, day-care and community meals. 2010

<http://www.thenacc.co.uk/assets/downloads/105/NACC%20Nutrition%20Standards%202010.pdf>

Healthy eating/Heart health/Preventing obesity/Reducing cancer risks

Healthy eating can help to reduce the risk of developing coronary heart disease. If a resident already has heart disease it can help to protect the heart from further problems.

Healthy eating has many other benefits too. It can help to maintain a healthy weight and reduce the risk of diabetes, high blood pressure, strokes, high cholesterol and some forms of cancer.

For residents who have poor appetites or who have been identified as being at risk of malnutrition some of this information may not be suitable.

What is healthy eating?

1. Cutting down on fat, especially saturated fat and trans fats
2. Eating less salt
3. Eating less sugar
4. Avoiding excess alcohol
5. Eating fibre containing foods

Information about fat

Fats provide the body with energy and some important vitamins for example vitamin A and D. They also contain essential fats which the body is unable to make itself. However, eating too much fat can make us unhealthy. Some fats are better for our health than others.

Saturated Fats

Cutting down on saturated fat can lower your blood cholesterol and reduce your risk of heart disease. Most people in the UK eat too much saturated fat. The average man should have no more than 30g saturated fat a day. The average woman should have no more than 20g saturated fat a day.

One of the easiest ways to cut down on saturated fat is to compare the labels on similar products and choose the one lower in saturated fat. Some foods that are high in saturated fat are fatty cuts of meat, sausages, butter, lard, suet, ghee, palm oil, dripping, cream, cheese, chocolate, pastries, cakes and biscuits. It is not necessary to stop eating these foods altogether, but eating too much of these can make it easy to have more than the recommended maximum amount of saturated fat.

Trans Fats

Trans fats occur naturally in small amounts in dairy foods and meats, but most trans fats we eat are produced when vegetable oils are hydrogenated (a chemical process) used in the food industry. These fats have a **similar effect on our bodies to saturated fats**. They are widely used as an ingredient in bakery products such as biscuits, pies, cakes and fried foods. They may appear on food labels as 'partially hydrogenated vegetable oil'.

Unsaturated Fats

Unsaturated fats are healthier fats that are usually from plant sources and in liquid form as oil, for example vegetable oil, rapeseed oil and olive oil.

Swapping to unsaturated fats will help to reduce cholesterol in the blood therefore it is important to get most of our fat from unsaturated oils. Choosing lower fat spreads, as opposed to butter, is a good way to reduce your saturated fat intake.

Remember that all types of fat are high in energy and should be limited in the diet.

Monounsaturated fats are found in: olive, walnut and rapeseed oils and spreads made from these oils as well as avocado pears, almonds, hazel nuts and peanuts.

Polyunsaturated fats are found in vegetable oils, nuts, seeds and oily fish. Omega -3 fats found in oily fish are a particular type of polyunsaturated fat that can help protect heart health. Residents should have at least one portion of oily fish a week.

Eating less fat

Food packaging displays the amount of fat in 100g of a food. The label can be used to help identify whether a food contains 'a lot' (high) or 'a little' (low) total fat and saturated fat in 100g.

Nutrient	Low (a healthier choice)	Medium (only have in moderation)	High (have only occasionally)
Total fat	3g or less per 100g	3.1g – 17.4g / 100g	More than 17.5g per 100g
Saturated fat	1.5g or less per 100g	1.6 - 4.9g per 100g	More than 5g per100g

Information about salt

See section on salt and health on page 56

Eating less sugar

Sugar can add a lot of calories to a diet. Residents who are overweight should try to reduce their intake of sugar or try artificial sweeteners instead.

Residents who are overweight and eat a lot of sugary foods are more likely to have a high triglyceride level. Triglycerides are another type of fatty substance in the blood. High triglyceride levels are not beneficial to the heart.

Nutrient	Low (a healthier choice)	Medium (only have in moderation)	High (have only occasionally)
Total Sugar	5g or less per 100g	5.1g – 22.4g per 100g	More than 22.5g per 100g

Avoiding excess alcohol

As a general rule there is no need to give up alcohol unless a resident has been advised to medically for health reasons. Excess alcohol can lead to weight gain and other harmful effects such as liver disease, heart disease, epilepsy. Other illnesses (cancer including mouth, throat and breast) increase with any amount of alcohol consumed on a regular basis.

The Department for Health (DOH) recommends that individuals should not regularly drink more than 14 units per week. However it is best to spread this evenly over three days or more. It is recommended to have several alcohol free days each week.

A review found that the benefits of alcohol for heart health only apply for women aged over 55years old and the greatest benefits come from limiting to 5 units per week.

Single drinking episodes (alcohol drank in one session)

Older people may be more prone to the effects of alcohol and for this reason may be at risk of accident and injury.

“This advice for any single occasion of drinking is based on the evidence reviewed by the expert group that clearly identified substantially increased risk of short term harms (accidents, injuries and even deaths) faced by people from any single drinking occasion”. (2)

“These risks can arise for people drinking within the weekly guidelines for regular drinking, if they drink too much or too quickly on a single occasion; and for people who drink at higher levels, whether regularly or infrequently”. (2)

One unit of alcohol is:

- 300ml (½ pint) beer, cider or lager (3-5% alcohol by volume)
- 100ml (4fl oz.) white or red wine (10% alcohol by volume)
- 25ml (1fl oz.) measure of spirits (40% alcohol by volume)
- 50ml (2fl oz.) sherry (20% alcohol by volume)

Eating fibre containing foods

There are two main types of fibre – soluble and insoluble

Insoluble fibre (sometimes called roughage) is not digested and helps prevent constipation. It is found in foods such as wholemeal bread and high fibre breakfast cereals.

Soluble fibre is partly digested in the gut. It can help lower cholesterol levels. It is found in many fruits, vegetables, oats and pulses.

When increasing fibre in the diet do this gradually and ensure the resident is taking the recommended amount of fluid.

How to adjust choices from The Eatwell Guide to prevent obesity and protect heart health of residents

The Eatwell Guide shows a resident how much food should come from each group. Below explains how residents can adjust the choices within these groups to ensure they eat healthily.

Beans, pulses, fish, eggs, meat and other proteins

- Choose lean cuts of meat
- Cut visible fat off meat
- Remove skin from chicken/turkey
- Limit sausages, pies and burgers
- Eat more fish, especially oily fish
- Grill or bake instead of frying
- Try cooking fish in different ways for example microwaved or poached with lemon juice
- Eat more pulses and lentils
- Eat unsalted nuts and seeds

Potatoes, bread, rice, pasta and other starchy foods

- Encourage these foods at each meal as they help fill a resident up
- Choose high fibre breads and breakfast cereals for example wholemeal bread
- Don't add too much fat to these foods Try:
 - ✓ Boiled or jacket potatoes instead of chips
 - ✓ Choose tomato based sauces with pasta rather than a rich cream sauce or a cheese sauce
 - ✓ Boil or steam rice rather than fry it
 - ✓ Use Butter/full fat spread sparingly on bread, in mashed potato

Dairy and alternatives

- Choose lower fat products from this group
- Use skimmed or semi skimmed milk
- Choose natural, low fat or diet yoghurts
- Choose lower fat cheeses

- Try low fat cottage cheese and soft cheeses
- Replace mayonnaise and cream with low-fat yoghurt or fromage frais

Fruit and vegetables

- Offer a wide variety of fruit and vegetables
- Avocado pears are high in monounsaturated fats and calories. Limit to once a week at the most
- Remember frozen and tinned fruit and vegetables are just as good as fresh. When choosing tinned make sure fruit is in natural juice and vegetables are in water without sugar or salt added
- Add chopped fruit to cereal or yoghurts
- Add vegetables to stews and casseroles
- Dried fruits are quite concentrated in natural sugar so only offer one portion of these a day
- Fruit juice and smoothies are quite concentrated in calories. Limit unsweetened fruit juice or pure fruit smoothie to one small glass a day
- Avoid vegetables that have been stir fried in oil or served with a knob of butter or margarine
- Choose a low calorie or fat free salad dressing instead of an oil rich one

Foods and drinks high in fat, salt and sugar

- Offer less cake, biscuits, sweets and puddings
- Avoid drinks with added sugar
- Choose polyunsaturated spreads for example sunflower or monounsaturated spreads for example olive spread instead of butter
- Use rapeseed, olive or corn oil sparingly in cooking
- Use cornflour to thicken cooking sauces or gravies for meat or fish so you won't need fat
- Offer less bottled sauces, processed and cured foods salted snacks and crisps

Exercise

To stay healthy or to improve health, older adults, need to do two types of physical activity each week: aerobic and strength exercises Residents should aim to be physically active for 150 minutes a week. Muscle strengthening activity such as yoga, dancing and tai chi should also be included twice a week (check with resident's GP to confirm resident is safe to carry out activity) Encourage residents to join in activities run by the activity coordinator.

<http://www.nhs.uk/Livewell/fitness/Pages/physical-activity-guidelines-for-older-adults.aspx>

Further information/assistance

British Heart Foundation - www.bhf.org.uk

NHS - www.nhs.uk

Department of Health – (2) Alcohol guideline review -Summary of the proposed new guidelines

www.gov.uk/government/uploads/system/uploads/attachment_data/file/489795/summary.pdf

Vegetarian Diets

Residents may choose to follow a vegetarian diet for a variety of reasons: concern about the environment, animal welfare, health concerns and religious beliefs.

Principles of a vegetarian diet

- Avoidance of meat, poultry, game, fish, shellfish and any slaughtered by-products or their derivatives such as gelatine, lard or rennet.

Types of vegetarian diets

- Lacto-ovo: eat dairy foods and eggs but not meat, poultry or seafood
- Ovo-vegetarian: include eggs but avoid all other animal foods including dairy
- Lacto-vegetarian: eat dairy foods but exclude eggs, meat, poultry and seafood
- Vegans: don't eat any animal products at all including honey
- Slight variations to these diets include pescetarians who include fish and/or shellfish, while semi-vegetarians (or flexitarians) occasionally eat meat or poultry

Considerations for the 'Eatwell Guide' for a vegetarian

No matter what type of vegetarian diet the resident eats, the Eatwell Guide still applies.

Sources of protein instead of meat and fish

Although meat, fish and eggs may not be eaten other rich sources of protein include:

- Beans, lentils, chickpeas
- Soya and soya products (tofu, soya nuts and soya mince)
- seeds
- Nuts and nut butters (e.g. peanut butter)
- Wheat protein (found in cereals, pasta and bread)
- Mycoprotein such as Quorn (provided egg is taken)

Sources of dairy and alternatives

Although milk and dairy may not be eaten other alternatives include:

- Fortified soya milk, yoghurt and cheese }
- Fortified rice drinks, fortified oat drinks, fortified nut 'milks' i.e. fortified with calcium

Sources of Iron

Although red meat is the richest and most easily absorbed source of iron a number of plant foods can contribute to iron in the diet:

- Fortified breakfast cereals
- Dried fruit
- Beans and lentils
- Leafy green vegetables
- Sesame seeds
- Nuts
- Wholemeal bread

Sources of calcium

Although dairy sources are a rich source of calcium the following will provide calcium:

- Calcium fortified foods e.g. soya milks, yoghurts
- Calcium fortified rice and oat drinks and nut 'milks'
- Green leafy vegetables especially kale and pak choi but not spinach
- Brown and white bread
- Sesame seeds and tahini
- nuts
- Dried fruit e.g. apricots and figs

Sources of vitamin D

Our bodies can make vitamin D from sunlight during the spring and summer. At other times of the year it is important to try and eat foods that contain vitamin D or are fortified with vitamin D. Vitamin D supplement should also be taken daily – this should provide 10 micrograms (μg).

- Fortified margarine
- Fortified alternative milks and yoghurts e.g. soya, rice, oats, almond
- Fortified breakfast cereals
- Eggs and dried skimmed milk (if eaten)

Sources of Vitamin B12

Although meat and milk are the main source of this vitamin other sources of vitamin B12 are found in:

- Some soya products
- Yeast extract
- Fortified plant milks

If relying on fortified foods check the labels carefully to make sure your residents are getting enough B12. For example, if a fortified plant milk contains 1 microgram of B12 per serving then consuming three servings a day will provide adequate vitamin B12. Others may find the use of B12 supplements more convenient and economical.

Further information/assistance

The British Dietetic Association: www.bda.uk.com/foodfacts/home

The Vegan Society: www.vegansociety.com

The Vegetarian Society: www.vegsoc.org

Ethnic Diets

It is important to ask residents about individual food choices rather than make assumptions based on their cultural background or religion.

Some religious groups have dietary restrictions, which are summarised below:

Religion	Country of origin	Dietary customs
Muslim	Pakistan Bangladesh Yemen Somalia Iran Many other countries	<ul style="list-style-type: none"> • Will only eat halal meat • Will eat fish • No pork • No shellfish e.g. prawns, crab
Hindu	India	<ul style="list-style-type: none"> • Often vegetarian/vegan • Some will eat fish/lamb • No beef • Often no pork
Sikh	India	<ul style="list-style-type: none"> • Sometimes vegetarian • Many eat chicken, lamb and fish • Unlikely to eat beef or pork
Rastafarian	Africa Caribbean Islands	<ul style="list-style-type: none"> • Often vegetarian/vegan • Some will eat fish • No shellfish or pork
Jewish	Europe Middle East	<ul style="list-style-type: none"> • Will only eat kosher meat • Will eat fish • No shellfish or pork • Meat and milk/milk products not to be served in same meal or used together in recipes for example in a dish such as lasagne
Seventh day Adventist	Europe Africa Caribbean Americas	<ul style="list-style-type: none"> • Often Vegetarian • May follow Kosher dietary rules

Key

Halal - Meat killed and prepared according to Islamic law

Kosher - Meat killed and prepared according to Jewish law

Dietary Advice for People with Diabetes

Diabetes is a condition in which the amount of glucose (sugar) in the blood is too high because the body cannot use it properly. Glucose in the blood comes from the digestion of carbohydrate containing foods. There are 3 groups of carbohydrates: starchy, naturally sweet and sugary carbohydrates.

Starchy carbohydrates	Naturally sweet carbohydrates	Sugary carbohydrates
<ul style="list-style-type: none"> • Bread • Crackers • Pitta bread • Crumpets • Chapatti/nann bread • Thickened sauces • Thickened soups • Flour • Breadcrumbs • Pastry • Potatoes • Rice • Pasta and noodles • Breakfast cereals • Oats/Oatcakes • Starchy vegetables such as plantain, yam and sweet potato • Yorkshire pudding 	<ul style="list-style-type: none"> • Fruit-fresh, tinned and dried • Fruit juice • Milk • yoghurt 	<ul style="list-style-type: none"> • Cakes • Biscuits • Ice-cream • Desserts and puddings • Sugar and honey • Sugary drinks • Jam and marmalades • Sweets and chocolates

All carbohydrate foods are broken down in the digestive system to glucose. How much the glucose levels in the blood rises depends on how much carbohydrate is eaten, diabetes treatment and activity levels.

Insulin is a hormone, produced by the pancreas, which helps glucose leave the bloodstream and enter cells where it is used as energy. When this process takes place the blood glucose can return to its usual level.

There are two types of diabetes:

Type 1 diabetes: The pancreas is unable to produce any insulin. It is treated with regular insulin injections and diet.

Type 2 diabetes: The pancreas can still produce insulin, but not enough or the insulin does not work properly. It can be treated by diet alone, diet and tablets or diet and insulin.

Principles of a diabetic diet

The main aim of treatment for residents with diabetes is to achieve steady blood glucose levels between 7 – 11 mmol/l. This is achieved through the use of medications which can be tablets, Incretin mimetics / GLP – 1 analogues injectables (for example Byetta, Bydureon,Victoza, Lixumia and Trulicity) and/or insulin and adopting a healthy diet and lifestyle.

What a healthy diet and lifestyle means

- Use the Eatwell Guide to ensure a balanced diet
- Eat a breakfast, midday meal and evening meal 4 – 6 hours apart. Food is better balanced with diabetes treatment when carbohydrate is spread out evenly over the day.
- Eat meals that contain similar amounts of carbohydrate each day, to help maintain steady blood glucose levels. As a rough guide one third of the plate should be carbohydrate foods
- Eat at least 5 portions of fruit and vegetables every day. Aim for more vegetables than fruit.
- Avoid too much fat, sugar and salt
- Maintain a healthy weight.
- If drinking alcohol, do so in moderation. Some medications may require abstinence from alcohol - check with the Pharmacist/Doctor.
- Take regular exercise

Can residents with diabetes have sugar?

Residents who have diabetes do not need to cut out all traces of sugar or foods containing sugar. Sugar can be used in moderation in cooking and baking as part of a healthy diet.

Avoid very high sugar foods such as confectionery and sugary drinks (including tea/coffee with added spoons of sugar). Use sugar free, no added sugar or diet fizzy drinks and squashes instead of full sugar drinks and limit fruit juices to 1 small glass a day. Artificial sweeteners may be used in drinks.

Can residents with diabetes use diabetic foods and drinks?

Diabetic foods and drinks are not recommended. They offer no benefit to residents with diabetes. They may still affect blood glucose levels and can contain the same amounts of fat and calories as ordinary foods. Some diabetic foods have a laxative effect.

Should the diet be different for residents who are well nourished compared to malnourished residents?

The diet of residents with diabetes may vary with their nutritional status. If a resident is malnourished, underweight or has a poor appetite healthy eating advice will not be appropriate. Residents with diabetes will fit into one of the following groups:

1. Well-nourished or overweight with a good appetite. Encourage to:
 - Adopt a healthy diet and lifestyle (see section earlier)
 - Eat a carbohydrate containing snacks only if their diabetes treatment requires it
2. Malnourished or at risk of malnutrition with a poor appetite or have higher nutritional needs. Ensure that:
 - Healthy eating principles are **not applied** to these residents at the expense of them eating food
 - Encourage small meals/snacks every couple of hours which include carbohydrate each time
 - To increase energy intake and stimulate the appetite offer a range of carbohydrate snacks which can include high fat/sugar foods such as full fat yoghurts, mousses, pudding and custard, scones, cheese and biscuits, milk puddings, cake and milky drinks. Extra diabetic medication is prescribed if their blood glucose levels rise.

Snack ideas

(* = High fat snack)

Bread and cereal products

- Half a bagel or muffin
- One small bread roll
- One crumpet or pikelet or potato cake
- One mini pitta bread or half a standard pitta bread
- One medium slice of bread
- 4cm piece of French bread or ciabatta
- Three crisp breads, rice cakes or low fat crackers
- Two oatcake crackers
- 20g breakfast cereal with milk (small bowl)
- small healthy cereal bar
- one slice (30g) malt loaf
- one slice raisin bread or half a fruit teacake
- half a scone

- one wheat biscuit or shredded wheat with milk
- 3 handfuls (30g) of unsweetened popcorn
- 3 handfuls (25g) pretzels
- packet of crisps (25g) *

Soups

- cup - a - soup
- half a tin of soup

Desserts

- 100g custard
- potted dessert such as mousse
- half an individual pot (100g) of rice pudding or ¼ of a large tin
- one pot of soya dessert
- 125g fruit yoghurt or low fat fromage frais
- 200g fat free fruit yoghurt

Fruit

- 1 large apple, orange, peach
- 1 small banana
- 2 small fruits for example kiwi, satsuma, plums
- 2 slices of melon, pineapple
- bowl of strawberries, raspberries
- 1 large handful of grapes
- 2 tablespoons (25g) raisins, sultanas
- 2-3 figs, dates, apricots
- 150ml fruit juice (have only once per day)

Drinks

- 150ml hot chocolate, Horlicks
- 150ml low fat milk shake
- 300ml semi skimmed or skimmed milk
- 150ml smoothie

Other

- small chocolate biscuit bar for example Penguin, Kit Kat*
- 1 chocolate biscuit*
- 3 small biscuits such as morning coffee, ginger nuts*
- 1 large biscuit such as Hobnobs, digestives*

What you can try if a resident is overweight / trying to lose weight but still wants to eat snacks?

If a resident is overweight or trying to reduce weight avoid the higher fat snacks which are indicated with a * and:

- Slightly reduce portion sizes at a main meal to compensate for a snack
- Have low fat choices such as diet yoghurts and low fat milk
- Use reduced fat spread sparingly
- Use food labels to discourage snacks containing more than 3 grams of fat per 100g product

Example of distribution of carbohydrate according to treatment type

Treatment	Breakfast	Mid am	Midday	Mid pm	Teatime	Supper
Tablets: Metformin, Glitazones, Gliptins, Pioglitazone and injectables: GLP-1	√		√		√	
Tablets: Sulphonylureas e.g. Gliclazide	√	Carbohydrate snack	√		√	Carbohydrate snack
Night time insulin e.g. Insulatard, Humulin I, Levemir, Lantus Toujeo Determir	√		√		√	
Bd soluble mixed insulin e.g. Humulin M3	√	Carbohydrate snack	√		√	Carbohydrate snack
Bd analog mixed insulin e.g. Humalog mix or Novomix	√		√		√	

- √ **Carbohydrate should be included with this meal**
- Please note: This can be individualised further. When residents have a small appetite, a small snack between meals may be suitable regardless of the diabetes treatment.

Hypoglycaemia

Any resident taking the following diabetes treatments – sulphonylurea tablets (most common one is gliclazide) or any insulin, is at risk of having a low blood sugar level (below 4mmol/l). This can also be termed a 'hypo'.

1. One of the following can be used to help treat a 'hypo' and restore the blood glucose back to a safe level quickly:
 - 100ml original Lucozade
 - 200ml full sugar fizzy drink
 - 25ml full sugar squash or cordial
 - 5 glucose tablets
 - 5 jelly babies
 - 2 tubes of Gluco Gel (only use if indicated)
2. Blood glucose levels should be rechecked after 15 minutes and if the level remains below 4mmol/l retreat with a hypo treatment as stage 1 above
3. To ensure the blood glucose level does not drop again after the hypo has been treated the resident should either eat a meal containing carbohydrate (if due) or have a small carbohydrate containing snack from the list on page 22 -23

Hypoglycaemia should be avoided in the elderly, frail and vulnerable adults. If a resident experiences several hypoglycaemic episodes please contact their diabetes team for an urgent medication review.

Further information/assistance

Sheffield Diabetes Dietitians at either:

Northern General Hospital (0114 2714162)
Royal Hallamshire Hospital (0114 2712617)

Diabetes UK

Address - 10 Parkway, London, NW1 7AA
Helpline - 020 7424 1000
Website - www.diabetes.org.uk

Modified Texture Diets

Who needs texture modified diet?

People who have difficulty chewing and softening food so that it is safe to swallow will need a modified textured diet, to prevent risk of choking or food entering the airway (increasing risk of pneumonia).

It is important to ensure that the person is able to eat a wide a range of textures of food as is safe for them as an individual, and that meals remain appetising and identifiable as 'real food'.

The National Dysphagia Diet Food Texture Descriptors developed by the National Patient Safety Agency give specific descriptions for each texture, with audit check lists available, which kitchen staff can use to compare their dishes against.

It is expected that all care home catering facilities will be able to provide texture E (Fork mashable dysphagia diet) and C (Thick puree dysphagia diet)

These can be adapted, by mashing, or thinning down respectively, to achieve texture D (Pre mashed) and B (Thin puree) consistencies.

Only residents who have been assessed and prescribed on an individual basis by a speech and language therapist (SLT), or who are at risk of choking with a normal diet and waiting to be assessed, should need a modified textured diet

Terminology of modified textured diets

All health professionals and food providers should use the following national descriptors (letters and terminology) to ensure consistency:

- Soft options

Dysphagia diets (modified texture diets):

- E – Fork mashable
- D – Pre mashed
- C – Thick puree
- B – Thin puree

Further assistance

Elizabeth Barnett, Speech and Language Therapist (Care Homes Liaison) has produced a resource pack called 'Modified Textured Diets'. This provides further information to help care homes design menus for residents who need a modified textured diet. For an e-copy contact:

Community Speech and Language Therapy - Older Adult Team
Vickers Front Hall, Northern General Hospital, Herries Road,
Sheffield, S5 7AU Tel: 0114 3052565

Or e-mail elizabeth.barnett@nhs.net

Soft options

Who needs a soft option?

Residents who are temporarily unwell or have physical problems and tire easily and need more easily managed foods. Or residents who have difficulty coping with some foods due to poor or lack of dentition may need softer food and should be offered softer options from the normal menu.

Extra moisture can be added and food cut up if necessary into small pieces to make food easier to chew.

Examples of softer options

Sandwiches with soft fillings and crust cut off, cheese, egg mayonnaise, tuna, salmon, tender pieces of meat or poultry in stews/casseroles, fish pie, Yorkshire pudding, dumplings, thick cut chips, soft well cooked vegetables, well cooked pasta with tomato or cheese sauce, ripe skinned fresh or tinned or cooked fruit e.g. pears, peaches, mandarin segments, yoghurt.

Ensure the diet remains well balanced including foods from all food groups shown in the 'Eatwell Guide'.

Note: residents who would benefit from a soft option diet due to illness or lack of dentition do not need to be referred for SLT assessment

The following foods are difficult to chew and swallow and should be avoided temporarily with these residents, until their issues are resolved:

Food type	Food examples
Tough/chewy	Grilled meat, pineapple, boiled or chewy sweets
Mixed textures	Soup with bits or cereal that does not blend with milk
Vegetables with skins/stringy	Peas, runner beans, broad beans, sweet corn, celery, tomatoes, lettuce
Fruits with skins	Grapes, gooseberries, apple
Crumbly foods	Pastry, crusty rolls, crisps, biscuits
Bitty foods	Nuts, rice, minced meat with gristle

E – Fork Mashable

What does 'Texture E – Fork Mashable' diet mean?

- No bread unless advised by the SLT, or moistened e.g. by dunking in soup
- Food is soft, tender and moist
- It must be able to be mashed with a fork easily at point of consumption
- Food may require some chewing
- Meat needs to be soft and tender (no bigger than 1.5cm) or finely minced in a thick sauce
- Any fluid, gravy, sauce or custard in or on the food should be thick. A light disposable plastic teaspoon would stand upright if the head were fully but just covered
- No hard pieces of crust or skin should be formed during cooking or heating or standing
- No tough, chewy, fibrous, stringy, dry, crispy, crunchy or crumbly bits or pips or seeds or skins (see soft section for examples on page 27)
- No mixed consistencies or juicy food where juice separates off in the mouth for example water melon
- No sticky foods for example cheese chunks or marshmallows
- No floppy foods for example lettuce, cucumber

Examples of foods suitable for a 'Texture E - Fork Mashable' diet

Foods listed below can be used to form a main meal or snacks in between meals

Beans, pulses, fish, eggs, meat and other proteins

(* = Remove skin & bones)

- Small pieces of soft, well cooked, tender meat and poultry in a thick, smooth sauce or gravy such as a stew or casserole
- Finely minced meat (containing no gristle) or poultry in a thick smooth sauce or gravy such as bolognaise, moussaka or cottage pie
- Tinned sausages or corned beef in a thick smooth sauce or gravy
- Corned beef hash
- Tinned meat or poultry such as stewed steak, minced beef, chicken in white or curry sauce
- Steamed or poached flaked fish* served in a thick smooth sauce
- Tinned fish* mixed with mayonnaise or thick sauce
- Fish* pie with potato topping
- Poached or scrambled eggs
- Omelette (plain or cheese)
- Chopped boiled egg in mayonnaise or salad cream
- Egg custard (no pastry)
- Well cooked or tinned beans, chick peas, lentils, mushy peas and other pulses sieved and served in a thick smooth sauce
- Houmous

- Lentil curry
- Tofu (soya bean curd), 'Quorn' or textured vegetable protein in dishes such as vegetable casserole, curry or chilli
- Mashed Dahl
- Smooth peanut butter blended into sauces or smoothies
- Smooth pate
- Fish mousse

Dairy and alternatives

- Fresh, dried, packet or tinned milk such as evaporated, condensed, lactose free, soya, rice, oat or nut milk can be used in drinks and when preparing meals and puddings
- Grated hard cheese, cheese spread, cottage cheese, cream cheese and other soft cheeses (no rinds)
- Cheese soufflé
- Cheese triangles
- Savoury or sweet white sauces
- Yoghurt or fromage frais – avoid those with muesli, nuts, grains or seeds, crumble, cereal or candy toppings
- Egg custard (no pastry), crème caramel and mousse
- Ice cream or frozen yoghurt (only if advised by the Speech and Language Therapist as they can melt in the mouth and change texture classification)
- Blancmange, instant whip and milk jelly
- Use evaporated and condensed milks as a topping for desserts, puddings and fruit
- Thick milk puddings such as custard, rice, semolina, tapioca, sago (tinned, home made or cartons)

Bread and Cereals

- Thick, smooth porridge or instant oat cereals
- Wheat biscuit cereal soaked in hot or cold milk until smooth and thick. All milk should be fully absorbed
- Avoid cereals with added nuts and dried fruit
- Bread is not suitable for a fork mashable diet unless used when preparing other dishes such as when blended into thick, smooth soup. No crusts, grains or seeds.

Pasta and Rice

- Well cooked pasta or rice in dishes such as spaghetti bolognese, pasta in sauce, curry
- Tinned pasta such as spaghetti, ravioli or macaroni cheese
- Lasagne (no hard crusts)

Potatoes, Yams, Plantains and other energy foods

- Creamed, instant or well boiled with skins removed

- Inside of jacket potatoes with margarine or butter and soft filling such as grated cheese, cottage cheese, tuna and mayonnaise, baked beans (with skins removed) or minced meat with gravy
- Soft chips (no hard pieces)
- Cheese and potato bake (no pastry or hard crusts)
- Dumplings soaked in thick gravy
- Soft potato salad (no dried fruit, nuts, beans or peas)
- Polenta in a thick, smooth sauce or gravy

Fruit and Vegetables

(Ensure all stones, skins and pips are removed, sieve if required. Remove any excess juice before serving)

- Choose soft, ripened varieties of fresh fruit such as peaches, pears, nectarines, plums, melon or bananas
- Stewed fruit such as apples, pears, rhubarb or plums
- Soft tinned fruit such as apricots, peaches or mandarin segments
- Fruit juice or smoothies (thicken if required to the texture advised by the Speech and Language Therapist)
- Well cooked carrots, parsnips, swede, courgettes, peppers, tops of cauliflower, or broccoli florets
- Tinned tomatoes, mushy peas, carrots or other tinned vegetables
- Cauliflower cheese
- Vegetable curry
- Vegetable juices such as tomato and carrot.
- Vegetable soups
- Ripe mashed avocado
- Smooth guacamole

Puddings

- Soft sponge with thick custard or cream
- Sponge pudding served with thick custard or cream.
- Thick smooth yoghurt or fromage frais
- Trifle
- Thick custard
- Smooth cheesecake (no biscuit base)
- Ice cream, frozen yoghurt, mousse or sorbet (only if advised by Speech and Language Therapist)
- Mashed banana with thick custard or cream
- Mashed tinned fruit with thick custard or cream
- Stewed fruit with thick custard or cream
- Jelly (only if advised by the Speech and Language Therapist)
- Thick milk pudding such as rice pudding or semolina
- Thick Instant Whip
- Pannacotta
- Mousse

D – Pre Mashed

What does 'Texture D – Pre Mashed' diet mean?

- Food should be soft, tender and moist
- Food needs very little chewing
- It should be mashed with a fork before serving
- Meat needs to be soft and tender (no bigger than 2mms) or finely minced with no skin, bone or gristle
- It usually requires a thick smooth sauce, gravy or custard to mix in to make a soft, moist consistency. It holds its shape on a plate or when scooped, cannot be poured and does not 'spread out' if spilled.
- No hard pieces or crust or skin should be formed during cooking/heating/standing
- No hard, tough, chewy, fibrous, stringy, dry, crispy, crunchy or crumbly bits ,seeds, pith, pips, husks or outer shells (as on peas)
- No mixed consistencies, thin loose fluid or juicy food where the juice separates off in the mouth to a mixed texture
- No sticky foods for example cheese chunks or marshmallows
- No floppy foods for example lettuce, cucumber

Examples of foods suitable for a 'Texture D - Pre mashed' diet

Foods listed below can be used to form a main meal or snacks in between meals

Beans, pulses, fish, eggs, meat and other proteins

(* = Remove skin & bones)

- Blended small pieces of soft, well cooked, tender meat and poultry in a thick, smooth sauce or gravy such as a stew or casserole
- Finely minced meat or poultry in a thick smooth sauce or gravy such as bolognaise, moussaka or cottage pie
- Tinned sausages or corned beef in a thick smooth sauce or gravy
- Corned beef hash
- Blended tinned meat or poultry such as stewed steak, minced beef, chicken in white or curry sauce
- Steamed or poached flaked fish* served in a thick smooth sauce
- Tinned fish* mixed with mayonnaise or thick sauce
- Fish* pie with potato topping
- Poached or scrambled eggs
- Chopped boiled egg in mayonnaise or salad cream
- Egg custard (no pastry)
- Well cooked or tinned beans, chick peas, lentils, mushy peas and other pulses sieved and served in a thick smooth sauce
- Houmous

- Tofu (soya bean curd), 'Quorn' or textured vegetable protein in dishes such as vegetable casserole, curry or chilli
- Mashed Dahl
- Lentil curry
- Smooth peanut butter blended into sauces or smoothies
- Smooth pate
- Fish mousse

Dairy and alternatives

- Fresh, dried, packet or tinned milk such as evaporated, condensed, lactose free, soya, rice, oat or nut milk can be used in drinks and when preparing meals and puddings
- Grated hard cheese, cheese spread, cottage cheese, cream cheese and other soft cheeses (no rinds)
- Cheese soufflé
- Savoury or sweet white sauces
- Yoghurt or fromage frais – avoid those with muesli, nuts, grains or seeds, crumble, cereal or candy toppings
- Egg custard (no pastry), crème caramel and mousse
- Ice cream or frozen yoghurt (only if advised by the Speech and Language Therapist as they can melt in the mouth and change texture classification)
- Blancmange, Instant Whip and milk jelly
- Use evaporated and condensed milks as a topping for desserts, puddings and fruit
- Thick milk puddings such as custard, rice, semolina, tapioca, sago (tinned, home made or cartons)

Bread and Cereals

- Thick, smooth porridge or instant oat cereals
- Wheat biscuit cereal soaked in hot or cold milk until smooth and thick. All milk should be fully absorbed
- Avoid cereals with added nuts and dried fruit
- Bread is **not** suitable for a pre-mashed diet unless used when preparing other dishes such as when blended into thick, smooth soup. No crusts, grains or seeds.

Pasta and Rice

- Well cooked pasta or rice in dishes such as spaghetti bolognese, pasta in sauce, curry
- Tinned pasta such as spaghetti, ravioli or macaroni cheese

Potatoes, Yams, Plantains or other energy foods

(* = Remove skins)

- Creamed, instant or well boiled*

- Jacket potatoes (no skin) * with margarine or butter and soft filling such as grated cheese, cottage cheese, tuna and mayonnaise, baked beans* or minced meat with gravy.
- Soft chips (no hard pieces)
- Cheese and potato bake (no pastry or hard crusts)
- Dumplings soaked in thick gravy
- Polenta in a thick, smooth sauce or gravy

Fruit and Vegetables

(* = Ensure all stones, skins and pips are removed, sieve if required. Remove any excess juice before serving. NB juice can be thickened using a thickening agent)

- Choose soft, ripened varieties of fresh fruit such as peaches, pears, nectarines, plums, melon or bananas*
- Stewed fruit such as apples, pears, rhubarb or plums*
- Soft tinned fruit such as apricots, peaches or mandarin segments
- Fruit juice or smoothies
- Well cooked carrots, parsnips, swede, courgettes, peppers, cauliflower or broccoli florets*
- Cauliflower in a cheese sauce
- Vegetable curry
- Tinned chopped tomatoes, mushy peas, carrots or other tinned vegetables*
- Vegetable juices such as tomato and carrot
- Vegetable soups
- Ripe mashed avocado
- Smooth guacamole

Puddings

- Soft, moist sponge cake served with thick custard or cream
- Sponge pudding served with thick custard or cream
- Stewed fruit served with thick custard or cream.
- Thick smooth yoghurt or fromage frais
- Trifle
- Mashed banana with thick custard or cream
- Mashed tinned fruit with thick custard or cream
- Thick custard
- Smooth cheesecake (no biscuit base)
- Ice cream, frozen yoghurt, mousse or sorbet (only if advised by Speech and Language Therapist as they can melt in the mouth and change texture classification)
- Jelly (only if advised by the Speech and Language Therapist)
- Mousse
- Thick milk pudding such as rice pudding or semolina
- Thick instant whip
- Pannacotta

C – Thick Puree

What does 'Texture C – Thick Puree' diet mean?

- No ice cream, or jelly unless advised by the SLT ' (jelly may be too firm, and ice cream will melt in the mouth)
- Food has been pureed or has a puree texture
- It does not require chewing and should be smooth throughout
- It should be a thick puree which can be eaten with a fork and holds its shape on a plate or when scooped; it cannot be poured
- The prongs of a fork make a clear pattern on the surface
- Food may require a thickening agent to help achieve the correct consistency
- There should be no loose fluid on the plate
- It may need to be sieved
- It can be piped, layered or moulded

Tips for preparing a smooth thick puree

- Pureed meals can look more appetising if presented in individual portions / small pots / ramekins / clear glass dishes (so you can see layers of a trifle).
- The easiest way to make a smooth thick puree is to use a liquidiser, food processor or blender. It is also possible for well-cooked fruit and vegetables to be pureed by mashing and passing through a sieve.
- If there are skins or husks making the puree lumpy, sieve the food before processing further
- Remove skin, gristle, fat or bones from raw meat, fish or poultry. Cut into small pieces or use minced meats. Cook well. Add sufficient stock, gravy, sauce or soup to cover blades. Blend at maximum speed until thick and smooth.
- Sponge cakes and soft sandwiches can be made into a puree consistency by covering with a soaking solution of thickened fluid stock, juice or milk and waiting for it to soften to a puree consistency. This information can be found on education literature provided by the companies who make the thickening agent for example Nutricia who make Nutilis and Fresenius Kabi who make 'Thick and easy'.
- Do not puree all foods together. Cook and liquidise each food item separately
- Puree to a thick smooth consistency and serve meat or fish and vegetables separately on the plate

- Always cover food which has been pureed in the refrigerator to prevent it drying out and forming a skin
- It may be necessary to use a thickening agent to ensure the smooth puree is a thick enough consistency. Your Dietitian or Speech and Language Therapist can advise you on this.
- If mixing a thickening agent into food, allow the mixture to stand before serving (see packaging for instructions)
- Most meals can be pureed to a thick smooth consistency successfully provided extra fluid is added during preparation. Try to use nourishing fluids for this such as milk, cream, sauces, creamy soups rather than water, as it adds no nutritional value. Extra butter or margarine can be added when pureeing vegetables.
- Any sauce or gravy served with the puree food should also be thick and smooth
- Adding extra fluid can dilute the taste of some dishes. Try using more herbs, spices, salting and peppering to improve the flavour.
- Choose a variety of coloured foods to make a meal look more appetising
- Ensure hot meals are served piping hot

Examples of foods suitable for a 'Texture C – Thick Puree' diet

The foods listed below can be used to form a main meal or snacks in between meals.

Any liquid may need to be thickened to the consistency recommended by the Speech and Language Therapist.

Beans, pulses, fish, eggs, meat and other proteins: only serve with a thick, smooth sauce or gravy

- Pureed minced meats or poultry such as chicken or turkey
- Pureed tender pieces of meat, poultry or skinless sausages
- Pureed tinned meats such as corned beef, minced beef, chopped ham and pork, chicken or sausages
- Pureed boneless, skinless fish
- Pureed tinned fish with thick sauce or mayonnaise
- Egg custard with no pastry
- Sieved, pureed beans, lentils, chickpeas or other pulses, such as dahl or smooth houmous
- Blend beans, lentils, chickpeas into soups

- Pureed meat substitutes such as tofu (soya bean curd), Quorn or textured vegetable protein
- Soft, smooth pate
- Fish mousse
- Smooth peanut butter blended into sauces or smoothies
- Pureed 'ready meals'

Dairy and alternatives

- Fresh, dried, packet or tinned milk such as evaporated, condensed, lactose free, soya, rice, oat or nut milk can be used when preparing meals and puddings
- Grated, soft or cream cheese within dishes
- Smooth thick yoghurt, fromage frais, crème fraiche or soya desserts. Avoid those with muesli, nuts, grains, seeds, pieces of fruit or candy
- Ice cream or frozen yoghurt (only if advised by the Speech and Language Therapist)
- Thick, smooth savoury or sweet white sauces

Breads and Cereals

- Thick, smooth instant oat cereal or sieved porridge
- Wheat biscuit cereal soaked in hot or cold milk until smooth and thick. All milk should be fully absorbed. Pass through a sieve to ensure fully smooth
- Bread is **not** suitable for a thick puree diet unless used when preparing other dishes such as blended into thick, smooth soup. No crusts, grains or seeds

Pasta and Rice (Blended to a thick, smooth consistency)

- Pureed pasta dishes
- Well cooked pasta or rice blended into soups
- Smooth ground rice pudding

Potatoes, Yams or Plantains

- Serve as smooth, creamed or instant. Add margarine or butter and milk or cream to blend to a thick, smooth consistency
- Try blending cooked potatoes into soups

Fruit and Vegetables (Blended to a thick, smooth consistency)

(* = Remove stones, skins and pips and excess liquid before serving)

- Pureed soft fresh fruit*
- Pureed tinned or stewed fruit*
- Fruit smoothies sieved to ensure smooth
- Pureed soft cooked fresh or tinned vegetables*

- Vegetables blended into soups

Puddings

- Crème caramel
- Smooth mousse, yoghurt or fromage frais
- Thick, smooth Instant Whip or blancmange
- Smooth cheesecake (no biscuit base)
- Thick, smooth ground rice pudding or semolina
- Thick, smooth custard
- Pureed fruit served with thick, smooth custard
- Smooth pannacotta
- Sponge pureed with custard
- Mousses
- Sorbet, ice cream, frozen yoghurt and jelly (only if advised by the Speech and Language Therapist as they can melt in the mouth and change texture classification)

B – Thin Puree

What does 'Texture B – Thin Puree' diet mean?

- Food has been pureed or has a puree texture
- It should be a thin puree which can be poured
- It may need to be sieved to ensure smooth throughout
- It does not require chewing
- It should be eaten with a spoon. It cannot be eaten with a fork as it slowly drops through the prongs
- Does not hold its shape on a plate or when scooped
- The prongs of a fork do not make a clear pattern on the surface
- It cannot be piped, layered or moulded

Tips for preparing a smooth thin puree

- Most family meals can be pureed to a thin smooth consistency successfully provided extra fluid is added during preparation. Try to use nourishing fluids for this such as milk, cream, sauces, creamy soups rather than water, as it adds no nutritional value. Extra butter or margarine can be added when pureeing vegetables.
- The easiest way to make a smooth thin puree is to use a liquidiser, food processor or blender. It is also possible for well-cooked fruit and vegetables to be pureed by mashing and passing through a sieve.
- Remove skin, gristle, fat or bones from raw meat, fish or poultry. Cut into small pieces or use minced meats. Cook well. Add sufficient stock, gravy, sauce or soup to cover blades. Blend at maximum speed until it reaches the consistency of a pourable smooth soup.
- Always cover food in the refrigerator to prevent it drying out and forming a skin
- Any sauce or gravy served with the food should be as thick or thin as the puree itself
- Ensure hot meals are served piping hot
- Serve different foods in separate bowls or use a plate with several individual wells
- Choose a variety of coloured foods to make a meal look more appetising
- Adding extra fluid can dilute the taste of some dishes. Try using more herbs, spices, salting and peppering to improve the flavour.

- Suggestions for the gravy or sauce base for main courses are; stock cubes, meat and vegetable extracts, packet sauce mixes, gravy mixes or soups (packet, tinned or condensed). Try adding cream or full fat milk to improve the energy content of meals. See food fortification (adding extra nourishment) section on page 43.

Examples of foods suitable for a 'Texture B – Thin Puree' diet

The foods listed below can be used to form a main meal or snacks in between meals.

Beans, pulses, fish, eggs, meat and other proteins: blended into a pourable, smooth soup, sauce or gravy

- Pureed minced meats or poultry such as chicken or turkey
- Pureed tender pieces of meat, poultry or skinless sausages
- Pureed tinned meats such as corned beef, minced beef, chopped ham and pork, chicken or sausages.
- Pureed boneless, skinless fish
- Pureed tinned fish with thick sauce or mayonnaise
- Sieved, pureed beans, lentils, chickpeas or other pulses
- Pureed meat substitutes such as tofu (soya bean curd), Quorn or textured vegetable protein
- Pureed 'ready meals'
- Smooth peanut butter blended into sauces or smoothies

Dairy and alternatives

- Fresh, dried, packet or tinned milk such as evaporated, condensed, lactose free, soya, rice, oat or nut milk can be used when preparing meals and puddings
- Grated, soft or cream cheese within dishes
- Smooth pourable yoghurt, fromage frais, crème fraiche or soya dessert, with extra milk added to achieve correct consistency. Avoid those with muesli, nuts, grains, seeds, pieces of fruit or candy
- Smooth, pourable savoury or sweet white sauces
- Ice cream or frozen yoghurt only if advised by the Speech and Language Therapist

Breads and Cereals

- Pourable, smooth instant oat cereal or sieved porridge
- Wheat biscuit cereal soaked in hot or cold milk until smooth and pourable. Pass through a sieve to ensure fully smooth.
- Bread can be included in the diet if blended into a thick, smooth soup. No crusts, grains or seeds.

Pasta and Rice (blended into a smooth, pouring consistency)

- Pureed pasta dishes
- Well cooked pasta or rice blended into soups
- Blended ground rice pudding

Potatoes, Yams or Plantains

- Serve as smooth, creamed or instant. Add margarine or butter and milk or cream to blend to pourable consistency when preparing. Do not over mix as they become 'gloopy' and difficult to swallow
- Try blending cooked potatoes into soups

Fruit and Vegetables

(Blended into a smooth, pouring consistency with extra juice / syrup and stones, skins and pips removed)

- Pureed soft fresh fruit with extra juice/syrup
- Pureed tinned or stewed fruit with extra juice/syrup
- Pureed soft cooked fresh or tinned vegetables, try blending into soups
- Fruit smoothies sieved to ensure smooth

Puddings

- Crème caramel blended into custard or cream
- Smooth mousse, yoghurt or fromage frais blended with extra milk or cream
- Pourable Instant Whip
- Smooth, pourable ground rice pudding or semolina
- Smooth custard
- Sponge pureed with custard to a pouring consistency
- Sorbet, ice cream, frozen yoghurts and mousses blended into smoothies or other desserts to a smooth pouring consistency

Drinking consistencies

Drinks may need to be thickened with a prescribed thickening agent to enable a resident to swallow safely.

Lack of compliance with having thickened drinks is common. It is important to make them as appealing as possible.

Residents who require thickened drinks due to their swallowing problems often find them unpalatable and drink significantly less, therefore fluid rich foods e.g. gravy, custard, jelly, smooth soups, ice lollies, ice cream, porridge, milk puddings, pureed smooth fruit when added to their diet can increase its fluid content but you must still ensure they are still served at the correct consistency (**as recommended by the Speech and Language Therapist**).

It is important that the correct consistency is provided as there is a balance between a drink being thick enough to swallow safely and being unpalatable. If advised to thicken drinks - **EVERY DRINK** needs to be thickened, including water and drinks taken with medication. If drinks are not thickened adequately, this may lead to the resident developing pneumonia. There are several different products in use. Thick and Easy, Thick and Easy Clear, Nutilis powder, Nutilis Clear, Resource Clear. Some are starch based, some gum based which mix slightly differently.

Ensure you read the specific instructions for any given brand of product regarding amounts of thickener and fluid needed to make up stage 1/ 2/ 3 thickness drinks. These are printed on the tin.

All health professionals and food providers should use the following national descriptors to ensure consistency:

- Stage 1
- Stage 2
- Stage 3

National Descriptor	Description	Examples
Stage 1	This consistency can be drunk through a straw or from a cup (if advised or preferred). It leaves a thin coat on the back of a spoon	<ul style="list-style-type: none">• Single cream• Tomato juice• Yoghurt drinks
Stage 2	This consistency is too thick to drink through a straw, but can be drunk from a cup. It leaves a thick coat on the back of a spoon	<ul style="list-style-type: none">• Pouring custard• Golden syrup• Runny smooth yoghurt
Stage 3	This consistency cannot be drunk through a straw, or from a cup. It needs to be taken with a spoon	<ul style="list-style-type: none">• Thick custard• Blancmange• Whipped cream

How to thicken drinks

It is essential that you follow the recommended manufactures instruction as not all thickeners are made up in the same way

- Sprinkle the required amount of thickener into drinks and mix well with a fork or whisk. Some thickeners may advise to add the fluid to the thickener rather than adding the thickener to the made cup of drink.
- Using a shaker may improve ease of mixing; these are often provided by the manufacturers who produce the supplements/thickeners.
- Be exact when measuring out both thickener and fluid.
- Leave to stand until desired thickness is achieved (see manufacturer's instructions)
- Prior to pouring stir again to check consistency is correct.

Tips for thickening drinks

- Add the recommended amount of thickener and wait for effect – do not keep adding thickener and over thicken
- Cool hot drinks slightly before adding thickener
- Stir the drink and sprinkle in the thickener gradually, mixing well with a fork or whisk
- You may find it easier to use a mini balloon whisk or blender when adding thickeners to some drinks especially drinks with a high fat content for example full fat milk. Some manufacturers of prescribed thickening agents provide 'shakers' for thickening cold drinks
- Use thickener to thicken all liquids including soup and alcohol

Further information/assistance

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Tel: 0114 3052565 or e-mail elizabeth.barnett@nhs.net

Information about national descriptors for texture modified diets produced in March 2012, 'Dysphagia Diet Food Texture Descriptors'

Website

<http://www.therapyfor.co.uk/pdfs/NationalDescriptorsTextureModificationAdults2012.pdf>

NDR-UK for information on thickening fluids

Website

<http://www.ndr-uk.org/vmchk/Consistency-Modification-Alteration/Fluid-Thickening-Guide.html>

Nutricia for information about Nutilis

Website www.nutilis.com

Fresenius Kabi for information about Thick & Easy

Website www.dysphagia.org.uk/thick-and-easy

Food Fortification **(Adding extra nourishment to food and drinks)**

If a resident can only eat small amounts at a time or has lost weight or has been identified as being at risk of malnutrition or has increased nutritional requirements due to their medical condition, then it is important that foods and drinks that you serve are fortified.

Measurements used

tsp. = teaspoon tbsp. = tablespoon oz. = ounce floz. = fluid ounce
mls = millilitres g = grams
(All conversions from metric to imperial are approximate)

The suggested measured added ingredients are per 1 portion of food

Enriched Milk (fortified milk)

1. Measure 20g (4 tbsp) of milk powder into a jug
2. Measure 568mls (1 pint) of full fat milk.
3. Mix a small amount of the milk into the milk powder to make a paste
4. Gradually add the rest of the milk until you have a smooth texture. This can be used in place of ordinary milk over the day.

Fortifying common foods

- Full fat milk as above
- Portion of mashed potato – add: 15g (1 tbsp.) butter and 10-20mls (1-2 tbsp. = ½ -1floz.) fortified milk
- Portion of cheesy mashed potato – add: 15g (1 tbsp.) butter, 20mls (1floz = 2 tbsp.) fortified milk and 25g (1oz) cheese.
- Portion of scrambled egg - add: 5g (1 tsp.) butter, 50mls fortified milk, 25g (1 oz.) cheese
- Portion of Custard- add: 5g (1 tbsp) milk powder, 15g (1 tbsp double cream
- Portion porridge – add: 15g-30g (1-2 tbsp.) double cream and 10g (2 tsp.) sugar
- Portion of soup – add: (15g)1 tbsp. double cream and 10g (2 tsp.) milk powder
- Portion milk shake - 200mls (approximately 1/3 pint) fortified milk, 15g (2 tsp.) milk shake powder and 30g (2 tbsp.) double cream.

Breakfast Cereals

Try adding one or more of the options below when preparing breakfast cereals. It will add approximately 100kcal per portion of cereal. If you manage to add two it could increase up to 200 extra kcal!

- Full fat milk or milk substitute - 150mls (6 fluid oz.)
- Milk powder - 20g (4 heaped tbsp.)
- Full fat smooth yoghurt, fromage frais or soya alternative cream or cream substitute – 125g (5oz - small pot)
- Evaporated milk - 70mls (2floz)
- Condensed milk – 30mls (1 ½ tbsp.)
- Smooth pureed fruit in syrup - 35g (1tbsp)
- Golden syrup – 35g (1 ½ tbsp.)
- Honey - 35g (1 ½ tbsp.)
- Sugar - 25g (5 tsp.)
- Chocolate nut spread - 20g (1tbsp)

Potatoes, yams, plantains, and other starchy foods

Below are suggested approximate weights of foods to fortify each portion. Dependant on the texture required, the food you are adding it to, may tolerate a little more adding to it.

- Butter, margarine, oil or ghee – 10g (2 tsp.)
- Cream or cream substitute - 30g (2 tbsp.)
- Full fat milk fortified with milk powder 10 - 20mls (1-2tbsp)
- Full fat natural yoghurt, crème fraiche or fromage frais - 30g (2 tbsp.)
- Grated cheese (25g), soft or cream cheese – 10g (2 tsp.)
- Cheese spread – 10g (2 tsp.)

Vegetables

Try adding one or more of these options during preparation and/or when serving. Below are suggested approximate weights of foods to fortify each portion. Dependant on the texture required, the food you are adding it to, may tolerate a little more adding to it.

- Butter, margarine, oil or ghee - 10g (2 level tsp)
- Double cream or cream substitute - 15g (1 tbsp)
- Use full fat milk or milk substitute (made into a sauce to serve with the vegetable, with added grated cheese)
- Full fat natural yoghurt, crème fraiche or fromage frais - 15g (1tbsp)
- Grated cheese, soft or cream cheese, or cheese spread - 25g (1oz)

Soups and sauces

Try adding one or more of the following (per portion) when preparing and/or when serving soups or sauces. Below are suggested approximate weights of foods to fortify each portion. Dependant on the texture required the food you are adding it to, may tolerate a little more adding to it.

- Butter, margarine, oil or ghee -10g (2 level tsp)
- Milk powder – 5g (1 heaped tbsp)
- Double Cream or cream substitute - 15g (1tbsp)
- Full fat milk or milk substitute (could make up with this rather than adding water)
- Full fat natural yoghurt, crème fraiche or fromage frais - 30g (2tbsp)
- Grated cheese - 25g (2tbsp. packed down on spoon/1oz)
- Soft or cream cheese - 30g (1heaped tbsp.)
- Cooked meat, fish or poultry - 25g (1oz)
- Well cooked pasta, potatoes or rice -30g (1tbsp)
- Cooked beans, lentils or pulses - 30g (2 level tbsp.)
- Bread (no crusts, grains or seeds). Make sure that this is fully blended into the soup - 20g (1/2 slice)

Puddings

Try adding one or more of these options (per portion) when serving; do not use low fat products. Below are suggested approximate weights of foods to fortify each portion – dependant on the texture required; the food you are adding it to, may tolerate a little more adding to it.

- Full fat smooth yoghurt, fromage frais or soya alternative - 125mls (1 small pot - 5oz)
- Cream or cream substitute - 30g (2tbsp)
- Evaporated milk – 30mls (1 ½ tbsp.)
- Condensed milk - 30mls (1 ½ tbsp.)
- Smooth pureed fruit in syrup – 35g (1 tbsp.)
- Fruit, maple or golden syrup 20-40g (1-2 tbsp)
- Honey - 35g (1 ½ tbsp.)
- Smooth dessert sauces 15-30g (1-2tbsp)
- Seedless jam - 20g (1tbsp)
- Chocolate spread - 20g (1 tbsp.)

Some of the ingredients above could be incorporated/exchange into recipes.

Some food and fluids may need to be thickened to a consistency recommended by the Speech and Language Therapist

The table on page 46 demonstrates examples and effects of how to add extra nourishment to food items. Each suggestion is based on one serving.

Take a basic food item	Add these calorie providers	What is the difference?
150 g porridge made with full fat milk (Provides 174 calories)	25 g double cream 2 chopped dates	Adds an extra 200 calories Boosted porridge now provides 374 calories
1 thick slice of bread - toasted, spread with butter (Provides 217 calories)	20 g chocolate nut spread and fold the bread, then soak in 1 beaten egg and fry in 15 g butter. Serve with 1 sliced banana	Adds an extra 370 calories Eggy chocolate and banana bread now provides 587 calories
Scrambled egg – 2 eggs with 50 ml full fat milk (Provides 180 calories)	15 g butter 30 g hard cheese - grated	Adds an extra 200 calories Cheese scrambled egg now provides 380 calories
1 glass of full fat milk (200 ml) (Provides 130 calories)	1 scoop of ice cream 25 g double cream 2 teaspoons honey Ground cinnamon to taste	Adds an extra 300 calories Cinnamon milk shake now provides 430 calories
1 small crème caramel (75 g) (Provides 80 calories)	75 ml full fat milk 35 ml evaporated milk 1 banana 1 heaped teaspoon honey Liquidise all together Serve sprinkled with 5 g grated chocolate	Adds an extra 275 calories Bonoffee shake now provides 355 calories
150 ml tomato soup - dried mix made with water and ready to serve (Provides 45 calories)	Instead of using water make with 150 mL full fat milk 30 ml double cream 30 g grated cheese	Adds an extra 300 calories Cream of tomato soup now provides 345 calories
50 g White sauce - made with full fat milk (Provides 75 calories)	10 g skimmed milk powder 5 g butter 10 g cheese	Adds 100 calories Enriched savoury white sauce now provides 175
60 g Boiled potato (Provides 44 calories)	15 g butter (and mash)	Adds 100 calories Mashed potato now provides 144 calories.
50 g boiled carrots (Provides 12 calories)	5 g butter 1 heaped teaspoon honey	Adds 83 calories Honey glazed carrots now provides 95 calories.
150 g rice pudding (Provides 135 calories)	15 g creamed coconut 10 g grated chocolate	Adds 150 calories 'Bounty' style rice pudding now provides 285 calories.
150 ml custard made with skimmed milk topping 20 g Swiss roll (Provides 186 calories)	Make custard with 150 ml full fat milk instead of the skimmed milk 10 g skimmed milk powder Pour over Swiss roll and top with 25 ml double cream - whipped	Adds 182 calories Posh style Swiss roll and custard now provides 368 calories.

Nourishing Drinks

Many residents may fill up on drinks such as tea, coffee, squash, fizzy drinks, water and savoury stock type drinks such as Oxo, Bovril, Jardox, Marmite and Vegemite, which offer little nutritional value.

The following suggestions will provide protein, energy and other essential nutrients. These types of home - made nourishing drinks should be included within the nutrition care plan before oral nutritional supplements (ONS) are requested. Many home - made shakes have a higher nutritional content than prescribed ONS.

Malt honey milkshake – provides 10 g protein and 300 calories

- 200ml or ⅓ pint full fat milk
- 1 tablespoon honey
- 1 scoop ice cream
- 2 teaspoons malted milk powder (Horlicks or Ovaltine) or 1 tablespoon Milo

Blend together until smooth

Banana Smoothie – provides 10 g protein and 315 calories

- 200ml or ⅓ pint full fat milk
- 1 small ripe banana
- 1 scoop ice cream
- 1 teaspoon sugar or honey

Mash banana, add all other ingredients and blend

Super Shake – provides 12 g protein and 330 calories

- 200ml or ⅓ pint full fat milk
- 4 teaspoons milk powder
- 3 tablespoons double cream
- 1 scoop ice cream
- 1 tablespoon milk shake flavouring such as Nesquik or Crusha or drinking chocolate

Blend together until smooth, adding more flavouring to taste

Yoghurt and Berry Smoothie – provides 15.5 g protein and 380 calories

- 150ml or ¼ pint full fat milk
- handful of frozen or fresh berries such as raspberries, strawberries, blue berries or blackberries
- 1 small banana
- small pot of Greek yoghurt

Mash the banana, add the other ingredients and blend until smooth

Fruit Juice Blast - provides 2 g protein and 205 calories

- 100ml fresh fruit juice
- 100ml lemonade
- 1 scoop ice cream
- 1 teaspoon sugar or honey

Blend together until smooth

Fortified Soups – Provides 13g Protein and 280kcal

- 1 packet of powdered soup (not low calorie/healthy version)
- 1 ½ tablespoons skimmed milk powder
- 200mls milk

Heat the full fat milk until simmering. Add in the skimmed milk powder and packet soup, mix well.

Fortified Fruit Juice – Per portion provides approximately 200kcal 8-9g protein.

(These drinks may be suitable for residents who don't drink milk)

The quantities used below make up two portions.

- 180mls of fruit juice (cranberry, orange, apple)
- 40ml undiluted high juice squash or cordial (not sugar free/diet/no added sugar) (blackcurrant, orange, elderflower cordial)
- 10g (2 x 5g sachets) egg white powder

Directions: Important follow directions exactly and in the order shown:

1. Put egg white powder in to a glass
2. Using a spoon (not a fork or a whisk) gradually mix in the cordial or squash.
3. Gradually mix in the fruit juice

Further information/assistance

Sheffield CCG intranet / medicine management web page for local malnutrition care pathway and resources

Website: <http://www.intranet.sheffieldccg.nhs.uk/Downloads/Medicines%20Management/medicines-prescribing/prescribing-guidelines.htm>

(The Malnutrition care pathway is under the prescribing guidelines)

The British Dietetic Association

Website <https://www.bda.uk.com/foodfacts/home>

Finger Foods

What are finger foods and which residents may find them useful?

Some residents have difficulty with co-ordination so may find eating with cutlery difficult. Some residents (particularly those with dementia) may have difficulty concentrating on tasks like feeding themselves with cutlery. Finger foods are a good solution. These are everyday foods that are prepared in a way that makes them easy to pick up and eat with hands.

Finger foods help maintain independence and self-esteem at mealtimes, as the resident does not have to rely on assistance from other people to eat. This is important as it helps to preserve dignity and confidence. Often it encourages residents to eat more with fewer spills. They can be eaten at a table or away from the table. Finger foods can be particularly useful for residents who are unable to remain seated during the meal service. Finger foods can help to preserve eating skills. They are also useful as additional snacks for residents who can only eat small amounts at mealtimes and are at high risk of under nutrition.

Things to think about when preparing finger foods

1. Size and shape

- Try experimenting to see which shapes and size of food are easier for a resident to pick up. Different sized hands may need different sized finger foods.

2. Frequency

- To ensure an adequate nutritional intake, a resident will need different finger foods from each of the various food groups from the 'Eatwell Guide' (see page 6). Residents with a good appetite may have no problem eating sufficient food at regular meal times. Some residents may prefer to eat little and often i.e. five or six small meals spread out over the day rather than the traditional three.

3. Temperature

- Ensure the finger food is cool enough to hold and eat but equally tasty as it cools down.

4. Moisture level

- Remember dry overcooked foods can be difficult to eat even when served as a finger food.

5. Presentation/food safety

- Remember to remove stones from fruit as they can be a choking hazard e.g. stones from cherries.
- Fruit dipped in water with lemon juice will stop it from turning brown and becoming unappetizing.
- Raw foods such as carrots may be too hard for some residents with dentures so may need lightly steaming or roasting.
- Ensure finger foods are not left with the resident longer than is safe for consumption.

Ideas for finger foods for each of the food groups in the 'Eatwell Guide'

- **Beans, pulses, fish, eggs, meat and other proteins**

Bread crumbed chicken or fish goujons

Hard-boiled egg quarters

Mini beef/lamb/turkey/chicken/pork/vegetarian burgers

Chicken breast or other suitable pieces of meat cut into pieces

Wraps with meat, vegetarian or fish fillings

Meat/fish/vegetarian frittatas

Meat/fish spring rolls

Fish fingers

Fishcakes

Meat/vegetarian sausages

Meat balls

Slices/fingers of meat loaf

Scotch eggs

(These are the unprocessed varieties as processed/ready-made varieties can be high in fat, salt and sugar)

- **Potatoes, bread, rice, pasta, and other starchy carbohydrates**

Buttered bread/toast or fingers with marmite, soft cheese, peanut butter or preserves

Small cut sandwiches or small rolls with soft fillings to prevent falling apart such as egg or tuna mayonnaise, soft cheese, pate, meat or fish paste, peanut butter

Rice cakes with butter/margarine

Breadsticks with or without dips

Cereal bars

Small pitta bread with fillings (see sandwich choices above)

Crumpet fingers with butter/margarine

Crackers with butter/ margarine/soft cheese/preserves/peanut butter

Small Chapatti

Thick cut chips/wedges made of potato/sweet potato/parsnip

Baby potatoes with or without skins

Bagel with butter/margarine and topping of Marmite, soft cheese, peanut butter or preserves

Malt loaf with butter/margarine

Fruit loaf with butter/margarine

Teacakes with butter/margarine

Hot cross buns with butter/margarine

Potato waffles

Small roast potatoes

- **Dairy and alternatives**

Fromage frais tubes
Slices of pizza
Cheese strings
Slices of quiche or any savoury flan
Cheese cubes
Slices of cheese on toast

- **Fruit and vegetables**

(Fruit can be peeled if preferred. Some residents may find it easier to grip the fruit if it is retained especially 'slippery fruits' such as peach/nectarine)

(Vegetables can be steamed, boiled or served raw depending on what the resident prefers)

Cooked mange tout
Vegetable sticks e.g. carrot, celery, cucumber, pepper, swede, parsnip, and courgette
Cherry tomatoes
Melon wedges
Pineapple chunks
Cooked mushrooms
Cooked green beans
Cooked broccoli florets
Cooked cauliflower florets
Cooked sprouts
Banana (whole or pieces)
Seedless Grapes
Strawberries/raspberries/gooseberries/blackberries
Apricot halves (stone removed)
Pieces/slices of fruit e.g. apple, pear, kiwi
Segments of oranges
Ready to eat dried fruit e.g. dates, figs, apricots, sultanas
Vegetable frittatas
Salad leaves
Vegetable spring rolls
Pickled vegetable pieces e.g. onions, beetroot, and gherkins

- **Foods high in fat, salt and sugars**

Below are processed/ready-made varieties and can be high in fat, salt and sugar)

Chipolata sausages

Mini beef/lamb/turkey/chicken/pork/vegetarian burgers

Meat/vegetarian sausages

Mini porkpies

Sausage rolls

Scotch eggs

Seafood sticks

Scones-savoury or sweet with butter/margarine, cheese or jam

Buns

Chocolate eclairs

Doughnuts – plain or filled with jam

Sorbet/ice-cream cone/choc ice

Pure fruit juice ice lollies

Individual fruit pies

Muffins

Biscuits/cookies

Slices/fingers of cake or cake bars

Sweet waffles

Note

Remember to offer drinks throughout the day to these residents.
Some residents may benefit from supplementing their finger food meals with liquid foods in an enclosed drinking container e.g. fruit juice, soup, yoghurt drinks, milky drinks

Low Residue Diet

This information should only be followed under medical/dietetic supervision.

High residue foods are foods that increase bowel activity and this includes fibre (the undigested parts of plant foods). A low residue diet is designed to be more easily digested and will therefore allow the bowel to rest. A low residue diet can help to relieve abdominal pain, bloating, diarrhoea or flare ups of certain gastrointestinal conditions such as diverticular disease, Crohn's or ulcerative colitis.

Residents may be recommended to have low residue meals for 1-2 days before bowel surgery and for several days following surgery. Some residents may need the diet for a longer period of time. A low residue diet is also recommended when patients need to avoid foods which may obstruct narrowed areas of the bowel or irritate an inflamed bowel.

Basic principles of a low residue diet:

- Avoidance of most fresh, dried, tinned and frozen fruit, salad and vegetables
- Avoidance of wholegrain breakfast cereals, oats, wholemeal bread and flour, brown rice, brown pasta, bran and pearl barley.
- Avoidance of skin and bones of fish, gristle and tough cuts of meat.
- Avoidance of foods which contain seeds, pips or skins such as jam, marmalade, jacket potatoes and new potatoes boiled in their skins.
- Avoidance of beans and pulses, nuts and coconut
- To ensure sufficient vitamin C in the diet, smooth fruit juice needs to be included as part of the diet.

Foods suitable for a low residue diet

- White flour based bread/crackers/pasta/cakes
- Refined breakfast cereals – Cornflakes/Rice Krispies
- Peeled potatoes
- White rice
- Well cooked vegetables – cauliflower, carrots, swede
- Smooth fruit juice only
- Milk and dairy products
- Meat, poultry, fish and eggs

Examples of a low residue diet

If a low residue diet is requested and no information is available the following meals would be suitable: -

Breakfast

Smooth fruit juice
Tea or coffee
Cornflakes or Rice Krispies with milk
White bread or toast
Butter or margarine
Honey or syrup

Lunch/Evening Meal

Plain roast/stewed/casseroled meat or poultry (with no bones, skin or gristle and no added onions, vegetables, beans or pulses)
or Fresh, frozen or tinned fish (with no skin or bones)
or Cheese
or Eggs

Served with any of the following:

Boiled potatoes (without skins)
Creamed potatoes
Boiled white rice
Boiled white pasta
White bread or breadcake
Well cooked cauliflower, carrots or swede
Cheese based sauces
Strained gravy

Puddings

Sponge cakes made with white flour (no nuts or dried fruit)
Milk puddings
Custard
Egg custards
Crème caramel
Plain panacotta
Blancmange
Ice cream
Jelly or mousse
Natural or flavoured fruit yoghurts (without pieces of fruit)

Salt and Health

Eating too much salt can increase the risk of developing high blood pressure. Having high blood pressure is a major risk factor for both heart disease and stroke. By reducing salt intake it is possible to reduce blood pressure and the risk of developing heart disease and stroke.

A no added salt diet might be indicated for residents who have fluid retention. Reducing the amount of salt in the diet can help to reduce the excess fluid.

Salt is made up of sodium and chloride. It is the sodium in the salt that is harmful to health and sodium is usually listed in the nutritional information of food labels.

75% of the salt we eat comes from the salt which is added by the manufactures

An adult should aim to have less than 6g (around a teaspoon) of salt a day

How to identify the amount of salt/sodium in food from a food label

Nutrient	Low (a healthier choice)	Medium (only have in moderation)	High (have only occasionally)
Salt	0.3g or less per 100g	0.31 – 1.49g per 100g	1.5g or more per 100g
Sodium	0.1g or less per 100g	0.11 – 0.59g per 100g	0.6g or less per 100g

Suggestions to help reduce a resident's salt intake

- Try to avoid or use only a very small amount of salt when cooking
- Rock salt and sea salt have the same amount of sodium as ordinary table salt so are not suitable alternatives
- Avoid using salt substitutes such as Lo-salt, Saxo low salt
- Try using herbs and spices in cooking for extra flavour
- Avoid all salted, tinned or processed meats, for example: bacon, ham, chopped pork, corned beef, gammon, anchovies, salami and sausages. Aim to choose unprocessed fresh or frozen meats, poultry and offal.
- Avoid all smoked, cured or tinned fish in brine for example sardines, kippers, salmon and tuna.
- Avoid using garlic salt, celery salt, yeast extract, soy sauce, bicarbonate of soda, bottled/packet sauces, gravy granules and stock cubes. Choose reduced salt varieties if necessary.
- Avoid tinned vegetables. Choose fresh or frozen which are lower in salt.
- Choose unsalted butter
- Avoid hard cheeses. Choose cream or cottage cheese which is lower in salt

- Avoid packet, instant and tinned soups. (For tinned soups check the label some of them may not be high in salt).
- Avoid salted snacks such as crisps, nuts, biscuits and popcorn
- Bread and breakfast cereals are an important part of a healthy diet but some contain lots of salt. Compare labels and choose the lower salt ones

Alternative ways to flavour food

- Black, white or cayenne pepper
- Adding fresh or dried herbs
- Adding fresh garlic, onion, chilli and ginger
- Use of non salt condiments such as apple or mint sauce, redcurrant jelly, cranberry, vinegar, mustard powder, oil and vinegar dressings
- Home-made mayonnaise

Examples of a low salt/no added salt diet

If a low salt or no added salt diet is requested and no information is available the following meals would be suitable:

Breakfast

Fruit or Fruit Juice

Suitable cereal with milk and sugar

Scrambled, poached, fried or boiled egg

Suitable bread/toast with unsalted Butter/full fat spread and/or jam/marmalade/honey

Tea or coffee

Lunch/Evening Meal

Suitable meat/fish/poultry/egg/pulses or **suitable** cheese

With bread or unsalted potatoes/rice/pasta

With salad or unsalted vegetables

Suitable sauces or low salt gravy

Puddings

Sponge cake

Milk puddings

Custard

Ice cream

Jelly or mousse

Natural or flavoured fruit yoghurts

Note: If any packet/tinned foods are used the label would need to be checked for the salt content or think about using a home-made one where you can control the salt content

Food Allergy and Food intolerance

What is the difference between food intolerance and food allergy?

Food allergy is a reaction to the protein in a food. It occurs quickly (usually within 60mins of eating the food) and can affect blood pressure and breathing and can be life threatening (anaphylaxis).

Food intolerance is usually a reaction to something other than protein in a food, it is usually a delayed reaction (many hours after eating the food) and although the symptoms can be unpleasant they are not life threatening.

Food Allergy

The function of the immune system is to prevent harm to the body. It normally does this by fighting off invaders but in certain people who are prone to allergy, the immune system mistakenly registers harmless foods or substances as a threat.

The level of sensitivity varies from person to person, and an individual's reactions may vary from one day to the next. Factors influencing severity can include illness, stress, alcohol consumption and exercise. In some cases severe symptoms may be caused by the tiniest trace of the food.

Severe allergic reactions to foods are becoming more and more common. Occasionally allergic reactions can be life threatening and people who know they are at risk must always remain vigilant when food is around.

What are the symptoms of anaphylaxis?

Any or all of the following symptoms may be present:

- swelling of throat and mouth
- difficulty in swallowing or speaking
- difficulty breathing - due to severe asthma or throat swelling
- hives (nettle rash) anywhere on the body, especially large hives
- generalised flushing of the skin
- abdominal cramps, nausea and vomiting
- sudden feeling of weakness (drop in blood pressure)
- collapse and unconsciousness

How do residents with severe allergy protect themselves?

First and foremost it is important to avoid the food(s) which causes a reaction. It is important that accurate information about the ingredients of foods is available for such residents. Some have medication that should be taken if they inadvertently eat the food that affects them. This should all be detailed in their care plan. Care should be taken to avoid cross contamination. (See information on page 59)

What is cross contamination and why is it important?

Cross contamination occurs when a food that is free from an allergen such as nuts, milk or egg, becomes contaminated with that allergen. It can occur during food manufacture, food preparation, or food service.

How can cross contamination be avoided?

- Pay special attention to ingredients' labels. Check each time a product is used as ingredients can change.
- Try to keep any allergen containing foods in a separate area of the kitchen.
- Label all foods clearly especially if they are unpacked.
- Take care that surfaces are clean and free of an allergen before commencing food preparation. Wipe up spillage immediately.
- Avoid using odd shaped containers to store foods, as these can be difficult to clean, and may be contaminated with an allergen despite having been washed.
- Use separate cooking utensils, cutlery and plates for residents with a food allergy. If this is not possible, ensure all cooking utensils are thoroughly cleaned in a dishwasher or with hot soapy water before use.
- Do not re-use cooking oil that has previously been used to fry a food the resident is allergic to.
- Hand hygiene is important. If you touch a food containing an allergen, ensure hands are thoroughly washed before you continue to prepare an allergen-free meal.
- Care is needed in serving. Ideally allergen-free meals should be served separately. If using a bulk trolley system, it is crucial that separate serving spoons are used for each food item, as there is a high risk of contamination if the same spoon is used.
- A food can be contaminated by coming into contact with an allergen; this means that removal of e.g. nuts from a meal (e.g. a cake with a nut decoration) will still leave traces of nut which may be enough for some residents to experience a severe reaction. The meals containing allergens must therefore be kept away from other meals and covered prior to giving to the resident.

Food Labelling Regulations

There are 14 major allergens a person can have an allergy to.

Changes to food labelling have now been in place since December 2014. Any of the 14 allergens that are on the regulatory list have to be emphasised on the label of 'pre-packaged food' if they are used as ingredients.

Previously, loose foods (that can be bought without packaging) for example in supermarkets, delis, cafes and restaurants didn't have to provide information about food allergens. However, since 13th December 2014, information on any of the 14 allergens used as ingredients has to be provided for these foods if this information is requested.

14 Major Allergens	Foods which may contain the allergen
Celery 	This includes celery stalks, leaves, seeds and the root called celeriac. You can find celery in celery salt, salads, some meat products, soups and stock cubes.
Gluten 	Wheat (such as spelt and Khorasan wheat/Kamut), rye, barley (oats may be contaminated with gluten – gluten free oats need to be purchased) are often found in foods containing flour, such as some types of baking powder, batter, breadcrumbs, bread, cakes, couscous, meat products, pasta, pastry, sauces, soups and fried foods which are dusted with flour.
Crustaceans 	Crabs, lobster, prawns and scampi are crustaceans. Shrimp paste, often used in Thai and south-east Asian curries or salads, is an ingredient to look out for.
Eggs 	Eggs are often found in cakes, some meat products, mayonnaise, mousses, pasta, quiche, sauces and pastries or foods brushed or glazed with egg.
Lupin 	Lupin is a flower, but it's also found in flour! Lupin flour and seeds can be used in some types of bread, pastries and even in pasta.
Milk 	Milk is a common ingredient in butter, cheese, cream, milk powders and yoghurt. It can also be found in foods brushed or glazed with milk, and in powdered soups and sauces.

<p>Molluscs</p> 	<p>These include mussels, land snails, squid and whelks, but can also be commonly found in oyster sauce or as an ingredient in fish stews</p>
<p>Mustard</p> 	<p>Liquid mustard, mustard powder and mustard seeds fall into this category. This ingredient can also be found in breads, curries, marinades, meat products, salad dressings, sauces and soups.</p>
<p>Nuts</p> 	<p>Not to be mistaken with peanuts (which are actually a legume and grow underground), this ingredient refers to nuts which grow on trees, like cashew nuts, almonds and hazelnuts. You can find nuts in breads, biscuits, crackers, desserts, nut powders (often used in Asian curries), stir-fried dishes, ice cream, marzipan (almond paste), nut oils and sauces.</p>
<p>Peanuts</p> 	<p>Peanuts are actually a legume and grow underground, which is why it's sometimes called a groundnut. Peanuts are often used as an ingredient in biscuits, cakes, curries, desserts, sauces (such as satay sauce), as well as in groundnut oil and peanut flour</p>
<p>Sesame seeds</p> 	<p>These seeds can often be found in bread (sprinkled on hamburger buns for example), breadsticks, houmous, sesame oil and tahini. They are sometimes toasted and used in salads.</p>
<p>Soya</p> 	<p>Often found in bean curd, edamame beans, miso paste, textured soya protein, soya flour or tofu. Soya is a staple ingredient in oriental food. It can also be found in desserts, ice cream, meat products, sauces and vegetarian products</p>
<p>Sulphur dioxide (sometimes known as sulphites)</p> 	<p>This is an ingredient often used in dried fruit such as raisins, dried apricots and prunes. You might also find it in meat products, soft drinks, vegetables as well as in wine and beer. If you have asthma, you have a higher risk of developing a reaction to sulphur dioxide.</p>

Table of allergens is based on information from the Food Standard Agency

Gluten Free Diet

Gluten is a protein found in wheat, barley and rye. A similar protein is found in oats and often oats are contaminated with gluten cereals during processing. Residents who have Coeliac Disease are intolerant/sensitive to gluten and therefore must avoid all foods that contain it. When a resident with Coeliac Disease eats gluten the lining of the gut becomes inflamed and damaged which results in a decreased absorption of nutrients from food.

The gluten free diet must be followed strictly and it is recommended that it is continued for life. A gluten free diet is also used for people with Dermatitis Herpetiformis (a skin condition) and gluten sensitive ataxia (neurological condition).

Which foods contain gluten?

- Avoidance of foods that use **wheat, oats (gluten free oats can be eaten), barley** or **rye** as an ingredient. This includes oatmeal, wheatmeal, Bulgar wheat, couscous, malt, spelt, pearl barley, semolina, durum wheat and rusk. Under the food labelling regulations, manufacturers must indicate on the label of any pre-packaged food if it contains gluten.
- **Oats** contain avenin, which is a protein similar to gluten. However, research has shown that most people with Coeliac Disease can safely eat avenin. Problems can occur if oats are produced in the same place as wheat, barley and rye, as the oats can become contaminated with these other grains. Only gluten free oats which are uncontaminated can be eaten by people with Coeliac Disease. There are a very small number of people with Coeliac Disease who may still be sensitive to gluten-free, uncontaminated oat products. (<https://www.coeliac.org.uk/gluten-free-diet-and-lifestyle/gf-diet/oats/>) Discuss with the resident or their family if they are able to tolerate oats.
- Avoid alcohol made from these cereals such as beer, lager, stout and ale including low alcohol varieties
- Avoidance of foods made from wheat flour such as bread, pasta, cakes, crackers, muffins, chapattis, biscuits (including communion wafers), pastries and pies.
- Malt extract and malt flavourings are made from barley and regularly used in the food industry as a flavour enhancer. They are commonly found in breakfast cereals, ready meals, soups, confectionery and snack products. Barley waters and cordials are also unsuitable to drink.

- Normal wheat starch is not gluten free and should be avoided. Modified starch can be made from a variety of sources including wheat. If the source of modified starch contains gluten it will be stated in the ingredient list and should be avoided.
- Processing or manufacturing where cereal products have been added to food causes hidden sources of gluten. This includes tinned, packet and convenience foods.

Which foods are naturally gluten free?

- These include all fresh meat, poultry, fish, shellfish, eggs, dairy produce, fruit, vegetables, nuts, rice, lentils, pulses, beans and potatoes.
- Special prescribable gluten free products can be used to replace ordinary bread, breakfast cereals, crackers, biscuits, pasta and flour. Discuss with your Care Home GP about prescribing these. Starter packs are available from most companies to trial their gluten free prescribable products. Biscuits are not now normally allowed on prescription
- **Sheffield gluten free food product food allowance is 8 gluten free units per person per month**
- Non-prescribable gluten free foods can be found in supermarkets, chemists and health food shops to obtain 'luxury' items or biscuits not prescribed by GP's

Cooking and shopping hints

- Use the 'Coeliac UK food and drink directory' to check if foods are gluten free which is available from Coeliac UK. Check for additions/deletions monthly which are available on the Coeliac UK web site
- Take care to prevent cross contamination. Ensure that gluten free food is prepared in a gluten free environment.
- Wash down surfaces before preparing food
- Wash hands before handling gluten free food especially after other food preparation
- Cook gluten free and gluten containing foods in separate dishes/pans
- Use separate utensils for serving gluten free foods
- Always cut/prepare bread etc on a separate board/plate to gluten containing foods

- Toast using a clean grill pan/separate toaster to the residents having gluten containing bread or use toasting bags
- Never remove ordinary coatings (breaded or battered) from made products for example fish from a fish shop and give it to the resident with Coeliac disease as the food will always be contaminated with gluten.
- Avoid Butter/full fat spread/marmalade/jam/pickle containers contaminated by ordinary breadcrumbs used by residents.
- Avoid foods cooked in the same oil as gluten containing products for example chips cooked in the same oil as fish in batter.

Examples of a gluten free diet

If a gluten free diet is requested and no information is available the following meals would be suitable:

Breakfast

Fruit juice

Cornflakes, Rice Krispies or gluten free porridge oats (**check in 'Coeliac UK Food and Drink directory' as not all brands are suitable**)

Gluten free bread or toast (use separate toaster or toasting bags)

Butter or margarine (avoid cross contamination from other users)

Jam/marmalade/honey

Lunch/Evening meal

Fruit juice

Plain roast meats (do not use items coated in flour or breadcrumbs)

or Poached fish (basic white sauce thickened with cornflour)

or Cheese or cottage cheese

or Tuna, salmon, or tinned fish

or Eggs (without a coating)

Served with any of the following:

Fresh potatoes - Roast, boiled, chipped, creamed or baked

Gluten free bread

Boiled rice

Fresh vegetables

Salad vegetables (check label of any dressings to be used)

Gravy made with gluten free powder or stock cubes and thickened with cornflour if desired (check label)

Puddings

Any type of tinned/fresh fruit

Jellies

Milk pudding (not semolina)

Yoghurt (check label)

Vanilla ice cream (check label)

Sponge cake made with gluten free flour, gluten free biscuits

Drinks

Cocoa (check label of drinking chocolate), coffee, fruit juice, tea, water, squash (not barley varieties), fizzy drinks (check label of cloudy fizzy drinks)

Further information/assistance

Coeliac UK

Address - 3rd floor, Apollo centre, Desborough Road, High Wycombe, Bucks, HP11 7QW

Helpline - Tel 033 333 22033

Website - www.coeliac.org.uk

Milk/Lactose Free Diets

Some residents need to avoid milk because they are allergic to it, whereas others may avoid milk because they are intolerant to some of the components of milk for example the milk protein or milk sugar (lactose). Whatever the reason they will require meals free from milk or any foods and drinks containing milk.

Principles of milk free diets

- Avoidance of milk and milk products
- Avoidance of foods and dishes that use milk or milk products as an ingredient
- Avoidance of processed foods which use any of the ingredients listed below
- Manufacturers must indicate on the label of any pre-packaged food if it contains milk or milk products
- If in doubt whether food items are milk free check with manufactures
- Milk is a good source of calcium. When milk is removed from the diet the resident should have been advised by a dietitian on alternative calcium sources to eat or to use calcium enriched soya, rice, nut or oat milk alternatives

Ingredients to be avoided on milk free diets

- Cows milk (fresh, UHT, evaporated, condensed, dried, whole semi-skimmed or skimmed milk)
- Butter, butter oil, butter milk
- Cream
- Cheese (Cheddar, Brie, Camembert, Edam, Danish blue, Gouda and Mozzarella have minimal amounts of lactose and may be tolerated by some residents. Discuss with the resident or their family if they are able to tolerate these cheeses)
- Yoghurt, fromage frais
- Casein, caseinates, hydrolysed casein, sodium caseinate
- Curd
- Ghee
- Lactoglobulin, lactoalbumin
- Lactose
- Milk solids, non-fat milk solids
- Whey, hydrolysed whey, whey/hydrolysed whey powder, hydrolysed whey sugar, whey syrup sweetener
- Rennet

Foods allowed on a milk free diet

Beans, pulses, fish eggs, meat, poultry and other milk free proteins.

- Fresh, plain beef, pork, lamb, chicken, turkey, rabbit, offal, fish and shellfish (without sauces, butter or breadcrumbs), eggs, soya cheese, tofu, dried peas, beans and lentils, soya milk, rice milk, oat milk, nut / almond milk, soya desserts and soya yoghurts (check the food label as may contain lactose). Nuts (non- coated).

Fats and oils

- Vegetable oils, lard, dripping, suet, milk free margarine such as Granose or Pure or soya margarines

Fruit and Vegetables

- Fresh, frozen, tinned and dried fruits. Fresh, frozen, tinned and dried vegetables and salad. Fruit and vegetable juices. Potatoes; boiled, jacket, chipped or mashed without milk and butter

Sweets and sugary foods

- Jam, honey, marmalades, boiled sweets, mints, pastilles, gums, jelly, sugar, syrup, treacle, some plain chocolate (check the food label)

Cereals

- Bread (check label), pastry, chapatti, porridge, some breakfast cereals (check labels), rice, polenta, couscous, semolina, tapioca, sago, pasta, dried noodles

Drinks

- Fruit juice, squash, fizzy drinks, tea, coffee, cocoa, beer, lager, spirits (not cream liquers), wine

Miscellaneous

- Marmite, Oxo, Bovril, Bisto, popcorn, herbs, spices, salt, pepper, vinegar, clear vinegar pickles, olives, mustard and mustard powder, gelatine

Examples of milk free diet

If a milk free diet is requested and no information is available the following meals would be suitable: -

Breakfast

Fruit juice
Breakfast cereal with soya milk
Bread or toast
Soya or milk free margarine
Jam or marmalade

Lunch/Evening meal

- Roast, stewed, casseroled, or fried meat or chicken (check gravy mix is milk free)
- or** Poached fish in water with lemon or tomato based sauce, or tinned fish in oil, brine, or tomato sauce, or fried fish (except in batter/bread crumbs)
- or** hard boiled eggs
- or** Beans such as baked beans, vegetable and bean casserole

Served with any of the following:

Boiled, baked, chipped, roast, sauté potatoes
Boiled pasta or rice
Bread with soya or milk free margarine
Vegetables (except in sauces or butter)
Salads (no dressings)

Puddings

Fresh or tinned fruit
Specially prepared milk free pie or sponge cake with custard made with a suitable soya/nut/ rice or oat milk
Jellies – plain or fruit
Sorbet or soya desserts such as soya yogurt or soya ice cream

The following ordinary foods should NOT be used for a milk free diet:-

Milk puddings, custards, milk based sauces, batters (containing milk or milk products), Yorkshire puddings, pastry, quiches, sausage rolls, pies, cakes, sponges or crumbles made with ordinary margarine/butter. Fish fingers, fish cakes, battered or fish in breadcrumbs, chicken in bread crumbs, pizza, mayonnaise, salad cream, ice cream.

Nut/Peanut Free Diets

Some residents may be allergic to peanuts and other nuts. Some residents may only have mild symptoms others can have more severe reactions, and these symptoms can be life threatening.

Principles of a nut free diet

- Strict avoidance of nuts and all foods/products suspected of containing nuts or nut oils is the only totally safe policy for residents with a nut allergy.
- Some people who are allergic to nuts are also allergic to beans and pulses. It is best to check with the resident before offering these.

- All nuts should be excluded from the diet, these include:-

almond	betel nut	Brazil nut	cashew
chestnut	cob nut	coconut	hazel
filbert	peanut	pecan	pinenut
pistachio	walnut	oyster nut	monkey-nut
acorn	macadamia		

(Peanuts are also known as groundnut, ground pea, earthnut, pinder, goober nut, and monkey-nut)

- Check ingredients lists carefully – avoid any foods that have the following listed:-

Vegetable oil labelled to contain nut oil			
peanut oil	arachis oil	ground nut oil	mixed nuts
peanut butter	earth nuts	Chinese nuts	Goober
Goober pea	pinda	walnut oils	
Hydrolysed vegetable protein			

- Avoidance of food additives:- E471
E472 (a-c)
Lecithin (unless of soya or egg origin) is used as an emulsifier in food processing
- It is important not to fry in oil that has been used to fry foods containing nuts.
- It is very important to ensure that contamination does not occur from other foods, utensils and machinery.

Examples of a nut free diet

If a nut free diet is requested and no information is available the following meals would be suitable:

Breakfast

Fruit or fruit juice
Breakfast cereal – check it is nut free
Bread or toast – check it is nut free
Butter or margarine
Jam or marmalade

Lunch/evening meal

Roast, stewed meat or poultry (check gravy mix is nut free)
or Tinned or poached fish in sauce (check sauce is nut free)
or Eggs such as omelettes, egg mayonnaise (check labels)
or Quiche and vegetable dish (avoid bean dishes)

Served with any of the following:

Boiled, creamed, baked, roast potatoes
Boiled pasta or rice
Bread with butter or margarine
Vegetables or salad

Puddings

Jellies
Fresh or tinned fruit
Sponge puddings, fruit crumbles, fruit pies (check recipe is nut free)
Milk puddings
Yoghurts (check labels)
Ice cream (check labels)
Custard or cream

Note

Residents should not be given;

- Cakes decorated with nuts and cakes
- Cakes containing nuts such as carrot and walnut cake, rich fruit cake
- Salads containing nuts such as Waldorf salad.

Egg Free Diets

An egg free diet involves the complete avoidance of eggs and food containing egg derivatives.

Principles of an egg free diet

- Avoidance of fresh eggs or any foods containing fresh or dried eggs such as quiche, cakes, sponge puddings, scones, meringues, biscuits, pastries, pancakes, Yorkshire puddings, batters, egg and breadcrumbs coated foods, Scotch eggs, egg custard, lemon meringue filling or rissoles, croquettes bound together with egg, Quorn products.
- Avoidance of any foods containing egg derivatives such as dried egg, egg white (albumen), egg lecithin (E322, sometimes used as an emulsifier), egg yolk such as mayonnaise and dips.
- Egg nog drinks and Advocaat

Examples of an egg free diet

If an egg free diet is requested and no information is available the following meals would be suitable:

Breakfast

Fruit juice
Breakfast cereal (check labels) with milk
Bread or toast
Margarine or butter
Jam or marmalade

Lunch/evening meal

Fruit juice or soup (check soup labels)
Roast or stew or casserole meat or poultry (check gravy mix labels)
Poached fish in sauce (check sauce labels) or use tomato based sauce
Fried or tinned fish in oil or brine or tomato (check breadcrumb coatings)
Cheese
Beans such as baked beans, vegetable and bean casserole.

Served with any of the following:

Boiled, creamed, baked, chipped, roast or sauté potatoes
Boiled pasta or rice
Bread with butter or margarine
Vegetables or salads (no dressings)

Puddings

Fresh, tinned or stewed fruit
Milk puddings
Fruit crumbles or jelly

Note

Some supermarkets and health food shops stock egg substitutes for cooking and baking

Kidney (renal) diets

The main function of the kidneys is to remove waste products and water from the blood by making urine. Many of the waste products come from the food and drinks consumed.

When the kidneys do not work waste products build up to poisonous levels in the blood, making the resident feel ill.

Residents may have dialysis in order to remove these waste products as well as needing a 'renal diet' to help control the level of waste products and water.

Note:

- **If you have a resident with kidney (renal) failure under the care of the Sheffield renal unit always contact the dietitian at the renal unit for specific dietary guidance.**
- **If the resident is not under the care of the Sheffield renal unit ask your care home GP to refer to the community dietitians**

Further information/assistance

Sheffield Renal Dietitians

Telephone – 0114 2714162

Notes