



Safe Eating and Drinking Policy Paces Sheffield Adult Services Provision

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1. Purpose & Scope

Paces has a duty of care to safeguarding the wellbeing of all of its adult services service users. The service users at Paces have a wide range of medical conditions (often having secondary conditions associated with a primary neurological condition diagnosis). As such, they have an increased likelihood of requiring additional support with regards to nutrition, eating and drinking.

In addition to this Paces' services create an environment that promotes autonomy and independence. Doing so with regards to the development of independent cooking, eating and drinking skills must be carefully considered and planned to ensure this is done so safely.

2. Context

Paces services are provided from their current base at Smithy Wood Business Park. Paces currently provides 2 areas of support through its Adult Services.

1. Conductive Education Adult Day Service
2. Sessional Adult Conductive Education Service

The eating and drinking requirements and subsequent procedures for each service will differ slightly due to differences in the nature and extent of service delivery. The information below predominantly relates to eating and drinking within Paces Day Service Provision since providing food, drink and nutrition are daily activities within the service. However, there are elements which will also be applicable within the sessional services.

3. Summary of Eating and Drinking

The provision of food and drink is a vital area of Paces Day Provision management. Mealtimes are important and pleasurable occasions for many service users and providing good meals and mealtimes in a pleasant environment is a key aim within the service.

Paces Day Provision opening hours cover only one main meal – lunch. Most of the time the service users at Paces will bring their own food with them for lunch however Paces routinely will provide snacks and drinks for all service users as well as regularly preparing a meal (usually once a week) with the service users themselves taking a lead role in this process.

The support that Paces provides to help service users both prepare and consume food and drink will vary significantly between different individuals. However, all such support should be properly assessed and planned with as much input as possible from the service users and/or their families. Any help provided should be aimed at enabling the participant to have their needs met as well as promoting personal choice, food preferences and independence at all times.

For food and drink provided by Paces efforts should be made to find out what service users would like to eat and the options they are given should reflect this. Service users should be offered both choice and quality.

4. Roles and Responsibilities

4.1. Paces Role

The organisation should:

- Offer choice of food and drink and flexibility in how people want to consume their food
- Provide this policy and support for all to implement the policy relating to the nutritional care provided by the organisation and the provision of therapeutic or self-selected diets.
- Ensure that service user's preferences are respected and met as fully as possible.
- Enable service users to consume food in ways that respect their dignity and any needs or requests for privacy while eating.
- Ensure that staff who provide support for cooking, eating and drinking are trained in basic nutrition, food hygiene and food preparation.
- Provide training for staff in dysphagia and First Aid.

4.2. Paces Staff Role

All staff who have designated duties in relation to the provision or service of food to service users should:

- Understand the importance of food and drink to service users.
- Understand the importance of ensuring special dietary requirements are met.
- Ensure the needs of vegetarians, vegans, ethnic minority service users and any others with specific dietary requirements are respected.
- Ensure that all service users are able to exercise choice in what they eat and drink.
- Provide discreet and dignified assistance to those service users who require it.
- Maintain high standards of hygiene when preparing, cooking, handling or serving food.
- Make themselves available for training sessions as required.
- To follow eating and drinking plans specific to individuals

5. Menus & Food Options

Food Choices such as snacks and participant-prepared meals need to be appealing and enticing and balance healthy, nutritional content with provision of the sorts of food that an individual participant will want to eat. Service user satisfaction should be a strong influence on menu planning, with a focus on popular choices that also deliver good nutritional content.

Since Paces Day Provision is a small placement and usually only snacks and one cooked meal a week are provided it is therefore not necessary to plan menus far in advance. Instead, the fact that the provision is small should allow for flexible and spontaneous planning based on individual or group ideas and decisions. For example, a service user's birthday could allow for them to choose the menu

and a cake to be made, or local produce purchased on a trip off site could allow for a new recipe to be tried.

Seasonal content should be used, particularly with fruit and vegetables.

Food options must:

- Meet all relevant nutritional standards and provide a healthy, balanced diet.
- Not be monotonous or repetitive
- Offer a choice of dishes over time.
- Be created by, or in collaboration with, service users whenever possible.

Information should be kept as a record of all food served.

Food choices for regular food such as snacks and drinks should be changed regularly to stimulate appetite and variety and dull, repetitive and unimaginative options should be avoided. Prepared meals may include desserts which will not only enhance the enjoyment of a meal but may also contribute much-needed calories for some service users who are nutritionally vulnerable. Service users may also provide their own desserts.

6. Choice

The services management team should ensure that proper choice is available, and that sufficient allowance is made in the budget for this. If service users that attend Paces are from a range of ethnic backgrounds it is important to sometimes offer familiar dishes from their own culture. The ages of the service users should also be considered including balancing traditional recipes with contemporary ones.

Events such as birthdays, Christmas and other cultural and/or religious celebrations can be celebrated with appropriate foods and be used, when possible, as an opportunity for service users to invite friends, family or others from the community to join in.

Shopping information, recipes and menus should be provided in a format that is understandable and accessible for the service users. For example, consideration of braille, audio or pictorial versions. Food and cooking information may also need to be loaded onto AAC devices or accessed in other electronic formats.

Where required menus and food choices should be read or explained to service users to help them understand the choices they have. Service users should be engaged often in the planning, preparation and serving of food within the day provision. Staff should use imaginative ways to engage service users in choosing the food they want.

It is necessary for staff to take into account the eating and drinking plans of individuals, IDDSI levels and safety when choosing what to cook, eat and drink. Where individuals choose foods which are not suitable or do not fit within their eating and drinking plans, Paces staff will first try to find ways of preparing the foods to a level which would be safe i.e. by removing skins, swapping out an ingredient

or cooking things for longer until they are soft etc. Where a suitable or safe way of preparing cannot be done, staff will speak to the service users and explain why and work with them to make alternative choices. Even where a service user has the capacity to understand the risk of eating outside of a plan, they will not be supported to do so whilst at Paces.

7. Drinks

It is important to ensure that all service users are well hydrated. Water in particular should always be available. This is particularly important for service users who are not able to get themselves a drink independently.

Staff should be aware of urine colour as a possible indicator of hydration levels. Odorless pale urine will generally indicate good hydration levels. Dark, strong-smelling urine will generally be an indicator of poor hydration levels.

8. Providing Support with Food and Drink Preparation and with Eating and Drinking

Support and assistance with both the preparation and consumption of food and drink is of the upmost importance in Paces. Supporting active and independent participation is key to the Conductive Education ethos of the organisation.

8.1 Serving Food/Supporting Eating and Drinking

It is important to use appropriate techniques for serving food. Support should include:

- The provision of all assistance necessary to ensure the service users actually eat what, and as much as they want.
- The need for staff to act with sensitivity and respect for participant's dignity and ability.
- The need for service users to be enabled to eat their food and drink as independently as possible.
- The need to have adequate and appropriate supportive equipment available to enable service-users to eat and drink independently whenever needed.
- The need for staff to help service users to be in an appropriate position that allows them to eat and drink safely.
- Access to and following individual eating and drinking plans where required.

An appropriate number of staff should be made available at mealtimes to enable both hands-on support to eat and drink but also encourage independence with these skills. The number of staff required for this on a specific day is at the discretion of the senior classroom staff team.

Wherever possible service users should be able to decide where, when and with whom they want to eat and who they wish to support them to eat. This may not always be possible however due to factors such as staff availability and skills, other scheduled activities etc...

Staff will be given individual facilitation information, continuous training within the day provision and supported in-house training to become familiar with the best way to assist each individual participant with eating and drinking. The individual approach will balance both the nutritional

requirement to take in food and drink and the developmental needs of learning to eat and drink independently (or with facilitation).

8.2 Support with Food and Drink Preparation

Whenever possible service users will be encouraged to engage in the preparation of food and drink that they themselves then consume. The staff team will also enable service users to lead meal planning and sourcing of food within their day. This will usually happen on a once-weekly basis.

As with eating and drinking it is important to provide appropriate and differentiated hands-on support, verbal and visual guidance, positioning and equipment to enable this to take place. Risk assessments must be in place for assistance with food preparation and appropriate staffing ratios must also be in place.

9. Risk Assessments

Food and drink preparation and Eating and Drinking will all require risk assessments to be carried out. These will be generic risk assessments for across the day provision and will be carried out by the services management team. Individual risk assessments may be required in specific circumstances (e.g. an individual who is at risk of self-harm).

10. Individual Care Plans

In line with our other service-provision policies and procedures Individual Care Plans will be utilised as and when needed for individualised eating and drinking support. This is most likely to be in cases where individual service users require a non-oral diet (e.g. PEG feeding) or a mixture of oral and peg-feeding. However, it may also be to specify individual requirements around dysphagia, diabetes, allergies, blended food, keto diet etc...

Requirement for an Individual Eating and Drinking Plan will be identified at the Initial Consultation point and be reviewed annually or as required thereafter. However, should an individual's needs change and they are already attending Paces then an Eating and Drinking Plan can be created at any time.

Individual Plans regarding eating and drinking will be created by a member of the management team in consultation with the individual, their family and the appropriate professionals if required.

10.1. Individual Eating and Drinking Plans

Some individuals will have an Eating and Drinking Care Plans in place upon joining Paces and some may need to be written by an external professional for Paces staff to follow. Resources will be made available if any additional training is required for an Eating and Drinking Plan to be carried out safely and effectively. If equipment is required for an Eating and Drinking Plan to be carried out this would not usually be provided by Paces but Paces have a selection of adaptive cooking, eating and drinking apparatus which can be used if appropriate/required.

All staff are to be trained on dysphagia and are required to read and follow any Eating and Drinking plans put in place by other professionals.

Safeguarding of adults at Paces is of paramount importance. We work at all times to ensure that the health and welfare of the service users is maintained to a high standard.

At Paces we recognise that there are certain risks associated with lunchtimes and snack times. We work hard to ensure that these risks are reduced as much as possible.

There are some service users that require additional support in terms of feeding and drinking. These adults are supported by Speech and Language Therapists and dietitians. They will each have an individual Eating and Drinking plan.

These are shared with all staff and copies are kept within each service users folder and in the main room and can be referred to at all times. Particular care will be taken regarding the consistency of food and drink given to the service users, in line with the IDDSI guidelines. This will be outlined on the mealtime mat. Staff will liaise with parents/ service users to ensure that appropriate meals are selected, i.e. food that can be blended to the appropriate consistency. Where service users bring in food readily prepared, the consistency must follow the service users SaLT plan. Staff will only give service users food that is compliant with the guidance set out on each service users mealtime mat.

10.2 Staff training:

Staff have regular training from the Speech and Language Therapist. This includes details of what might cause difficulties when eating, risks to the service user when eating and drinking, positioning of the service user, managing the risks with food, textures of food and the IDDSI guidelines, and creating quality mealtimes.

Staff will also have training on how to Peg feed and in Emergency First Aid.

10.3 What to do when there is a concern?

There are times when staff may have concerns that a service user may be at risk when they are eating and drinking.

1. Staff will work closely with the SaLT to ensure that the risks with eating and drinking are reduced to the lowest possible level.
2. If concerns remain regarding a service user's eating and drinking, this should be shared with the Management Team. At this stage parents/ carers would be contacted to share this concern, this would be either via telephone or a face- to-face conversation. Parents/ carers will be informed that staff will now be completing a mealtime check list every time the service user is given something to eat or drink to monitor for any adverse signs. See Appendix 1.
3. Initially the Mealtime Checklist will be completed every mealtime for 2 weeks to help to monitor and formalise any concerns staff have raised. Following 2 weeks monitoring with

the Mealtime Checklist, if concerns have been identified and documented, parents will be informed and an offer of SALT review made (if not already underway).

4. If we have monitored a service user with the Mealtime Checklist for 2 weeks, their feeding has been optimised with SALT advice, and we are still observing risks to the service user during a mealtime, Paces Adult services reserve the right to refuse to give further oral food or drink that day. This decision would be made by the member of staff supporting the service user at lunchtime with the Conductor and a member of the management team.

This would be reviewed mealtime to mealtime using the Mealtime Checklist as a guide for when adverse signs have been observed. This plan is put in place to try to mitigate the potential long-term effects of aspiration and reduce choking risks and is designed to keep the service user safe whilst at Paces. If a service user has a PEG, the rest of the service user's food or drink would be administered via their PEG if appropriate and parents would be informed. If a service user does not have a PEG, parents will be contacted

In some very rare cases, the medical team, the family and the service users may have collectively made the considered decision to 'feed at risk' and this may be a) while the service user is on the waiting list for a PEG to be fitted or b) a decision which is under regular review and monitoring from the full medical team and SALT. In these cases, Paces adult services may request that parents or service user sign a 'known aspirator' form to acknowledge the risks staff are taking during feeding. This would only be done where a professional has agreed with the decision to feed at risk. Paces adult services can review the decision to feed at risk and decline to continue to take these risks at any time.

11. PEG feeding

Some service users at Paces are peg fed.

All staff must receive training from the Nutricia nurse team before assisting a service user with Peg feeding. A register of those staff trained is kept in the training records and updated regularly. Guidelines for the safe peg feeding of a service user can be found at in the next section. Feed given by a staff member will be recorded on the individuals electronic file.

Any service user who is peg fed has a feeding plan that has been put in place with the dietician. Copies of these can be found on the Log my Care online system. This plan will be adhered to at all times.

There may be instances where service users are fed orally and via a peg. In these cases, it may be appropriate that the feeding plan has a degree of flexibility. Staff will liaise with parents/ dietitians to ensure that there is an agreed arrangement in place. It may be appropriate to amend the amount of feed given depending upon how much food the service user has had prior to the peg feed. This information will always be shared with parents/ carer and recorded in the service uses diary as well as in our own records.

- a. Peg Feeding guidelines

- For individuals who bring their feeds and tubes in on a daily basis, a member of staff must check that all the necessary equipment and any food to be given has been sent in.
- Only staff trained to tube feed must undertake this task and the training must be followed at all times.
- The individuals feeding plan must be adhered to at all times, which will state the amount of food and liquid required throughout the day.
- Staff will record the tube feed on our electronic note system.
- Parents/ carers should always be informed when there has been any problems with the tube feeds and any necessary action taken.
- If a tube comes out, everyone's n plug size is on the wall in the peg room, training should be followed to put the n plug in place and the NUTRICIA nurses called out to replace the peg button.
- Where individuals' equipment is kept onsite, it should be stored in service users individual drawers/ boxes. Tubes should be changed periodically according to training guidelines and

12. Food Hygiene and use of PPE

All staff should apply the highest standards of hygiene when preparing, handling and serving food at mealtimes. Moreover, food hygiene legislation requires all staff to be trained in food hygiene to a standard in line with their responsibilities.

The use of PPE, and ensuring other hygiene precautions, must be adhered to both for preparing food and drink and assisting an individual to eat or drink. Staff should undertake appropriate training for this.

13. Choking Risks

Staff should be aware of service users being at risk of choking, especially in those with a history of swallowing difficulties or dysphagia.

Choking incidents pose a potentially serious medical emergency. All Paces staff will undergo First Aid training (in line with First Aid Policy) to include training on how to help someone who is choking.

14. Guidelines and Publications.

- NICE has published a range of guidelines and standards to support the nutritional health of people receiving healthcare or adult social care. These include:
 - Clinical Guideline CG32: Nutrition Support for Adults: Oral Nutrition Support, Enteral Tube Feeding and Parenteral Nutrition (updated August 2017)
 - Quality Standard QS24: Nutrition Support in Adults (November 2012)
- Adult social care providers in England must comply with the Health and Social Care Act 2008 Regulation 14: Meeting Nutritional and Hydration Needs in order to maintain registration with the Care Quality Commission.
- Food Safety Act 2008
- Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
- Food Hygiene (England) Regulations 2013

Appendix 1

Paces Mealtime checklist

If a service user is reported to be having difficulties at mealtimes, please complete this checklist at the next mealtime and every mealtime until told otherwise by a member of the senior management team.

Service user name:.....

Reported concern:.....

Date of mealtime checklist:.....

Staff member completing checklist:.....

	Tick each time observed	What food/drink?	Any other factors i.e. Illness, tired, distracted etc.
Coughing when drinking			
Coughing when eating			
Choking			
Wet sounding voice on speaking			
Wet sounding breathing			
Rattly chest			
Laboured breathing			
Eye watering			
Gagging			
Vomiting			
Throat clearing			

Multiple swallows			
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The named above will be closely observed throughout the meal time and each time the member of staff observes any of the above difficulties it will be marked down.