

THERAPEUTIC MENU PLANNING

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THE PLANNING PROCESS

The menu planning process within Care is a complex task. The menu must meet the needs of each resident in term of preference of taste, texture, and quality. It must:

- Meet the needs of the various medical requirements of many residents
- Clearly state allergens
- Provide for people who are unable to eat certain foods
- Be well balanced in overall nutritional value

Therapeutic menu planning

When we go a little deeper into therapeutic menu planning, then it is more about the **individual condition and the dietary requirements** to support complex needs such as celiac disease, lactose intolerance, malnutrition, dehydration, skin integrity, cognitive decline and so on.



Case study

I would like to share with you a **success story Case Study** which, although challenging, was not impossible with the right team – myself a specialist in Care Nutrition, our Head of Catering Services, Adrian Silaghi, The lead Nurse, one-to-one care staff and the catering team.

A new resident came into our care recently. The Lead Nurse on the Unit contacted Adrian to ask for help as **the resident in question had very specific and complex dietary needs**. The Nurse explained that the person coming into our Care had spent an extended time in hospital of late and had lost a lot of weight. They were **celiac** (meaning they are unable to have any foods containing gluten), **lactose intolerant** (no dairy), **vegetarian** and **required a texture modified puréed diet**.

There were also other factors which made this case appear slightly more challenging. Adrian contacted me to ask for help and we immediately got to work in preparation for our new guest.

In the first instance, I was very aware that many people who spend time in hospital do tend to come to us quite dehydrated. I was also unsure what this person might be able to tolerate. So, when looking at **plant-based protein sources** I didn't want to load the diet with very fibre rich beans and pulses which may cause discomfort, especially if the person was dehydrated.

We decided that for the first two weeks, we would design a **very simple menu** which would be very **gentle on the digestive system** whilst still providing nutritional balance. Within those two weeks, we would get to know the person's preferences, how they liked to eat and drink, what level of communication was available and what they were able to tolerate well.

Slowly over time we began introducing new elements to the diet, increasing hydration and bringing in the fibre rich plant-based proteins gradually. All the while **monitoring the progress**.

After four days of living with us we had seen some very **positive outcomes**. The new resident had already **gained weight and was loving the food**. Their fluid intake was increasing and they had become calmer and more relaxed. Success!

Over the coming weeks we will introduce **more foods and flavours** and continue to support this person's needs and well-being.