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**BDA** The Association  
of UK Dietitians



**Older People**

Specialist Group

# OLDER PEOPLE SPECIALIST GROUP

## Winter 2023



Happy Festive Season and welcome to the winter newsletter edition.

I hope you all have some exciting plans this month or at least manage to get some well earned rest. Don't forget to take a moment to reflect and celebrate your successes and achievements of this year. This has been a rollercoaster of a year for your OPSG committee and I am so proud to end the year with significant projects where the end date is in sight. Your committee is dedicated to representing you and the older adult population. As always there will be little rest for us as we have plenty more projects heading our way. We will endeavour to keep you updated; and keep a look out for any launch events.

Your OPSG team!



# Eating, Drinking and Ageing Well

Our much anticipated and long awaited Eating, Drinking and Ageing Well resource is now live. Please promote this resource amongst your networks so that the public understands how healthy older adults can support themselves to continue ageing well. The resource took 4 years to develop and this included commissioning the University of Plymouth to perform a literature review of the latest evidence base relating to its key concepts. Check it out now.

## Eating, drinking and ageing well

Having a nutrient-rich diet over the age of 65 is important for everyone, which means choosing foods with slightly more protein, calcium, folate (folic acid) and vitamin B12. The amount of carbohydrates, sugar, fibre, fat, and salt you need are likely to remain the same as for younger adults.



### Enjoyment of eating and drinking

Taking pleasure in food and drink can help you eat well and maintain your health. Enjoyment can be increased by getting involved in choosing food and drinks that you like and preparing, cooking and serving meals. For some, sharing a meal with friends or family helps or for others eating alone is more beneficial. Cultural and religious identity is often linked with food and drink too and is there to be celebrated.



### Weight

As you get older maintaining your weight is usually best for good health, giving you enough energy to stay well, socialise and be active. If you have a low body weight you may need some support. If you are very overweight, losing weight may be good for your health but it is important to still eat a nutrient-rich diet, take regular activity and maintain muscle. If you are slightly overweight, losing weight might not actually improve your health.



### Activity

Moving more and keeping active, together with eating a nutrient-rich diet keeps your muscles, bones and joints strong.



### Vitamin D

Vitamin D supports bones, muscles and teeth. It helps preserve muscle strength, preventing falls, the softening of bones and the risk of fractures.

Vitamin D supplements purchased from a supermarket or pharmacy should provide 10micrograms (400 IU) each day and are the most effective way to meet your needs.

They should be taken in winter but you may benefit from them all year round. Vitamin D3 is your best choice, however, people following a vegan diet may find vitamin D2 more useful.



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Some of the key topics identified in the resource include maintaining body weight, getting enough of the nutrients needed as you get older, the importance of vitamin D, hydration, realistic levels of activity needed alongside nutrition and why it's so important to enjoy what you eat, and eat in a way you enjoy.

**“This resource is the culmination of five years work within the Older People Specialist Group Committee and is clearly needed and wanted. Every step of the way and each time we spoke about it with other professionals and organisations we’ve been asked when it will be ready for them to use!”**

(Alison Smith)



## Eating, drinking and ageing well. A nutrient-rich diet is...

**Fruit and vegetables**  
Fruit and vegetables provide a wide range of vitamins and minerals. Have at least five varied portions every day. Pick leafy greens like kale, spinach, and lettuce which are good sources of folate.

**1 portion =**  
80g fresh, frozen or canned  
30g dried

**Carbohydrate (Starchy)**  
Carbohydrates provide energy, especially for the brain. Have one portion of something starchy at each meal.

**1 portion =**  
190g cooked pasta, rice or grains  
80g bread or chapatis  
30g breakfast cereal or flour  
150g potato, sweet potato, yam, cassava, plantain

**Fibre**  
Fibre gets your gut working normally, supporting good gut bacteria and it can also help mental health. To help maintain a healthy gut choose wholegrain carbohydrate options and eat fruit, vegetables, beans and lentils.

**Protein**  
Protein is good for muscle strength, so have at least one portion with each meal. Consider having two or more portions of fish per week, one of which is oily, such as salmon or mackerel. Limit processed meats.

**1 portion =**  
90g cooked meat or poultry  
140g fish or shellfish  
2 eggs  
100g meat alternative  
150g cooked beans or lentils  
30g nuts

**Milk and milk-based foods**  
Milk and milk-based products are a key source of calcium. Have three portions of milk and milk-based products per day such as milk, yoghurt, or cheese. If you don't like, or can't have milk and milk-based foods, choose calcium-fortified milk-free alternatives.

**1 portion =**  
200ml milk  
30g cheese  
125g yoghurt

**Fat**  
Fats are high in energy and should be eaten sparingly but they can help you absorb vitamins like A, D, E and K. Limit high-fat foods like processed meats and pastries. Swap butter/ghee for unsaturated vegetable, rapeseed, olive and sunflower oils and spread. Nuts and seeds are also good choices.

**Vitamin B12**  
Intake can be low in older adults but vitamin B12 can help maintain energy levels and health. Regularly have foods fortified with it, for example breakfast cereals or yeast extract, or have animal products including lean meat, fish, poultry, eggs, milk and milk-based foods as outlined above.

**Drinking enough?**  
Fluid is also important as you age. As you get older, you might not recognise the feeling of thirst as you used to, but you still need to drink. All fluids count, not just water. Other fluids include tea, coffee, milk, squash, fruit juice, fizzy drinks, hot chocolate and weak alcoholic drinks (up to 4% strength (ABV)). Water, tea, coffee (without added sugar) and milk are the best choices for your teeth. Men and women have slightly different fluid needs:

**WOMEN**  
at least  
**1600 ML**  
per day  
= 3 PINTS

**MEN**  
at least  
**2000 ML**  
per day  
= 3½ PINTS

**250ml**  
7-8 FULL MUGS A DAY

**150ml**  
11-14 FULL CUPS A DAY

Cups & glasses can be lots of different sizes so it's important to know how much fluid they hold.  
Drinking often during the day can be the key to getting all the fluid you need.

If you drink less than the amount advised and are worried that drinking more might cause you problems controlling your bladder, please discuss this with a healthcare professional.

**Alcohol**  
Alcohol isn't an essential nutrient and intake should not exceed national recommendations of 14 units per week. Spread your intake across the week, rather than drinking in large quantities in one go – and have some alcohol-free days.

**Sugar**  
Sugar doesn't provide the body with anything it needs to keep well. Limit your intake of sweet snacks, sugary drinks and confectionery.

**Salt**  
Salt can make food tastier but too much can increase your risk of high blood pressure. Limit it and try replacing with herbs, spices, garlic, vinegar and lemon juice. Reduce your intake of processed meats and salty snacks, as well as the amount of salt you add when cooking or at the table.

## Chief Medical Officer's annual report 2023: health in an ageing society

The Eating, Drinking and Ageing Well launch coincided quite beautifully with release of the Chief Medical Officer's (CMO) Annual Report.

**“We didn't plan to launch the new resource on the same day as the CMO Annual Report but it is fitting that its focus is on our ageing population and the considerations we need to make. This is why we are incredibly pleased to now be able to offer this practical and timely resource that will help older adults to age well. I am so delighted that this much anticipated resource has now been published and is now available to the public and health care professionals.”**

(Vittoria Romano, OPSG Chair)

**Please help raise awareness of the new resource by sharing with your networks.**

Available on the [BDA site](#) with a downloadable printable version.



Supported by Friends of the Elderly and British Geriatrics Society.



# Published

## NICE Stroke Rehabilitation

Great news. NICE Stroke rehabilitation in adults published 18th October 2023 have Dietitians included as core multidisciplinary stroke rehabilitation team!

BDA OPSG collaborated with BDA neuroscience group in submission of comments on the draft: [See page 78 \(80-87\).](#)

**Nice Guideline**  
**NG236**

## Improving the assessment of older adult's nutrition in primary care: recommendations for a proactive, patient-centred and aetiology approach.

Led by Rebecca Fisher, Allied Health Professional Prescribing and Procurement Advisor for the NHS London Procurement Partnership, with contributions from OPSG committee members. This BMJ Health article discusses the importance of using the biopsychosocial model when supporting older adults nutrition in primary care.

click here!

## The BDA want members' input on their Strategic Plan.

The plan covers the three and ten year ambitions and commitments from 2024.

All the key resources and supporting documents are now available on the website, so please do get involved during this consultation period. Further information can be found [here](#).

Your  
**VOICE**  
**MATTERS**



# Events this Past Quarter



## Outcomes Indicator Launch Events

This quarter we hosted two webinars with the Optimising Nutrition Prescribing Specialist Group to launch the new Outcome Indicators Toolkit. June Davis from Allied Health Solutions led the webinars to introduce the new toolkit and answer questions from attendees. The webinars were well attended and the early feedback on the toolkit has been positive with one attendee saying “Excellent - great to finally have this document. Long overdue! Well done!”

This toolkit was developed with the aim of providing a set of outcome indicators relevant to the variety of work undertaken by members in each of the specialist groups. We hope that it can be used in a variety of settings to support and inform clinical practice as well as support dietitians to measure outcomes that are not only relevant to their practice but that can also be used to highlight the important specialist services that we provide as a profession.

The webinar recordings and the Outcome Indicators Toolkit is available for members to view.







## Learning for BDA virtual study day on sustainability

Elaine Lane represented BDA OPSG committee at this full, if not overwhelming, study day.

Some highlights included:

- The NHS Net Zero Food Programme with Joanna Instone. Video summary [here](#).
- The Process Of Embedding Sustainability Into Renal Practice with Angeline Taylor, Chair of BDA Renal Specialist Group
- Showcasing Sustainable Healthcare In Newcastle with Amy Johnston, Assistant Waste Manager, Newcastle
- Reducing Enteral Feed Plastics with Sophie Stenson.

## IDDSI Festival



Alison attended the IDDSI Festival and presented with Four Seasons National Chef Trainer, Andy Cullum about the importance of use of nutrient dense food fortification for modified texture food, and also the need to ensure nutrient dense modified texture snacks are provided for people who have chosen to follow advice to have modified texture food.

There was a focus from several speakers on the RCSLT 'Position statement on the use of thickened fluids in the management of people with swallowing difficulties' and the need for all of us as Healthcare Professionals to ensure that we have considered the limited evidence base for use of thickened fluids for our patients, and that we actively support patients to make informed choices about whether to follow recommendations regarding having thickened fluids and/or modified texture food.

The RCSLT Position Paper which follows the Position Statement due for publication in January 2024.



# BDA Research Symposium

*Wednesday 6th of December in Birmingham*



Look out for our committee at the annual BDA Symposium. This is the second year that we are sponsoring a research stream and we've had some great abstract submissions.

## Welcome to the committee

This quarter we have welcomed two new committee members to our group and Selena (previous student member) will be staying on within the comms team.

### **Kato Lambrechts - Student Member**

Hi, I'm Kato. Thank you for inviting me to join the BDA OPSG community as a student volunteer. I am a second year Dietetics student at the University of Hertfordshire.



My interest in older adult nutrition has developed thanks in part to volunteering at AgeUK Barnet since 2019. The roles I have taken on included developing a healthy eating and cooking course for older people in assisted living accommodation, writing a monthly nutrition column, working in a dementia day care centre, and organising activities to help with social connection and mobility.

I am looking forward to learning as much as I can from the experience and knowledge of the OPSG community and trying out new skills as a new member of the communications team.



## Jill Mcrae - Social Media Officer

Hi, I'm Jill MacRae, I am a Community Dietitian with almost 30 years in the profession.

I recently changed roles to become the Lead Dietitian for Care Homes and Care at Home with NHS Highland.

I've worked with this trust for 21 years and was previously based in

Edinburgh, Medway Towns, Maidstone, Tunbridge Wells, London and the Isle of Skye before returning home to Ross-shire in the north of Scotland. I studied in Glasgow for my BSc. with State registration and London for an MA in Food Policy.



I applied to the OPSG to join as a Social Media Officer in the spirit of 'putting myself out there' and the desire to be more involved with a specialist group. I am currently getting up to speed with everything this entails and enjoying lots of new challenges

I look forward to working the OPSG Committee and group members. These are exciting times for all Dietitians, our leadership and guidance is essential both in the acute and community environment..

My favourite quote is 'if you want to go fast, go alone; if you want to go far, go together.' I hope we go far together as Dietitians with a shared passion.

## Share something here...?

**Achieved something you think others in the profession would like to hear about? Hosting an event that you want others to know about? We'd love to shout about it in our next newsletter so get in touch.**



# Quarterly Recipe

**Wondering what to bring for your Christmas get togethers? Look no further.**

1. Preheat the oven to 180°C & line a muffin tray with paper cases.
2. Soak the sultanas/raisins & candied peel in 4tbsp boiling water.
3. Whisk the eggs, sugar, & salt in a large mixing bowl for 3-mins until light coffee coloured and fluffy. Add the grated carrot and lemon zest; whisk to combine.
4. Fold in the flour, ground almonds, baking powder, & spices, along with the glacé cherries and pecans, with a large metal spoon until they are all mixed together. Finally, add the soaked sultanas/raisins & candied peel, and mix in with the metal spoon.
5. Spoon the mixture carefully into the cases, making sure that they are roughly even and that the mixture comes four fifths of the way up the sides. Place in the middle of the oven for 30-mins.
6. Now it is time to make the icing.
7. Once the cupcakes are out of the oven, take them out of the tin and sit them on a wire rack for 10-mins to cool. Ice them individually and service, or keep un-iced in a tin until needed.

## Christmas Cupcakes

80g sultanas or raisins  
120g candied peel  
4 medium eggs  
100g dark Muscovado sugar  
1/4 tsp salt  
200g finely grated carrot  
Finely grated zest of 2 unwaxed lemons  
100g plain flour  
50g ground almonds  
2tsp baking powder  
2tsp ground ginger  
1tsp mixed spice  
15 scratches grated nutmeg  
1tsp ground cinnamon  
60g glacé cherries, halved  
60g pecans, roughly chopped

### For the icing:

- 6a. Place 170g icing sugar, 2 tbsp water, 1 medium egg white, & a pinch of salt into a large bowl over a pan of boiling water. Stir with a clean metal spoon for 2-mins to dissolve the sugar.
- 6b. Remove the bowl from the heat & beat with a handheld whisk for 9-minutes. When it's done, the mixture should stand up in peaks.

*Adapted from "Red Velvet Chocolate Heartache" by Harry Eastwood*

If you have resources to share or suggestions for future events, please get in touch.

Contact us via our email address or by following us on social media

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