

Nutrition & Hydration in Mental Health & Learning Disability Inpatient Settings: Supplement to the BDA Nutrition & Hydration Digest





ISS Classification - Unrestricted



Purpose and Scope of the Document

- Provides guidance (not strict requirements) for dietitians & catering teams in mental health (MH) inpatient settings.
- Focuses on niche considerations for optimal food service in MH.
- Offers a framework to support locally appropriate decision-making.
- Aims to raise awareness & encourage future development.
- Recommendations under each sub title to help provide practical tips.
- Supports Multi disciplinary collaboration


The Association of UK Dietitians


**Food Services**
Specialist Group


**Nutrition & Hydration in Mental Health & Learning Disability Inpatient Settings:
Supplement to the BDA Nutrition & Hydration Digest**


Amy Pratt & Rebecca Deeley, April 2025

Supported by:

The Association of UK Dietitians

**Mental Health**
Specialist Group

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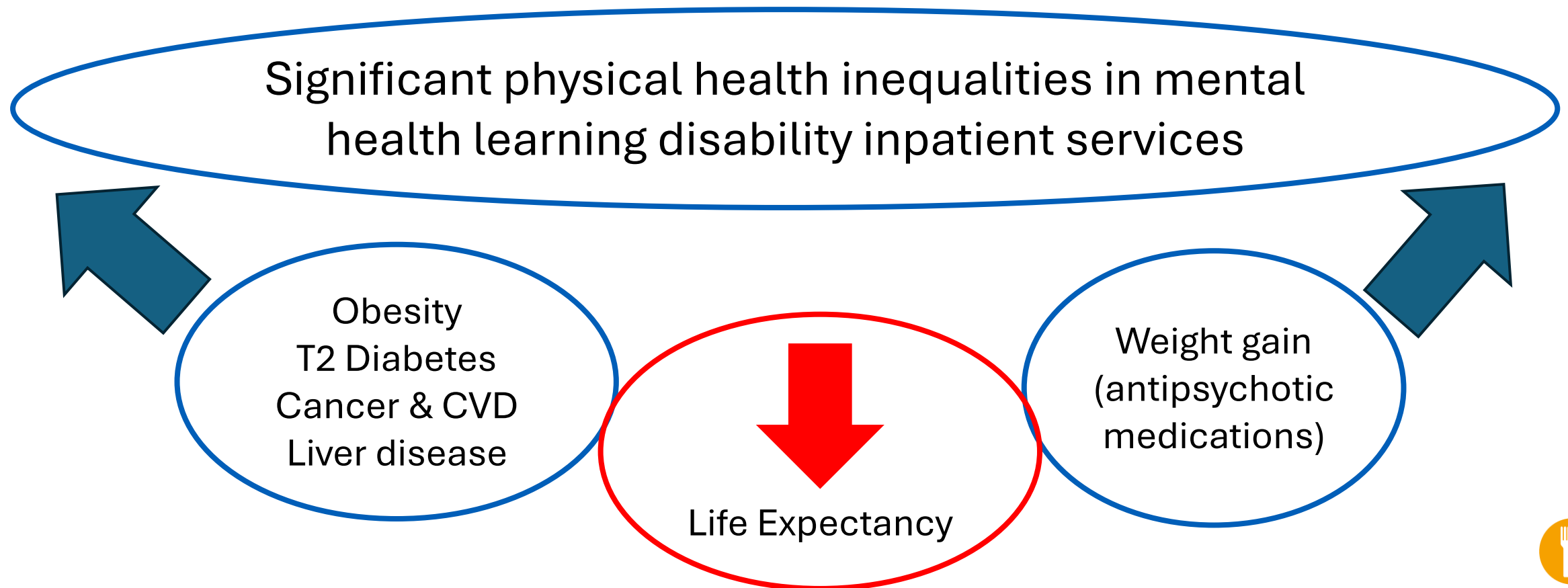
**Learning Disabilities**
Sub-Group



Why was the new guideline needed?

Multiple additional considerations for mental health settings

Not just increased length of stay....



Key Themes

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- Nutritional considerations:

Obesity and undernutrition

Medication–nutrient interactions

Constipation and hydration

Eating disorders

Sensory needs and neurodivergence

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- Menu considerations – collaboration, menu fatigue, special diet provision
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- Further considerations – waste monitoring, take away use, sustainability

Food Service Considerations

- Longer inpatient stays require varied and appealing menus.
- Menu design – pictorial menus
- 4-week cyclical menu is recommended
- Consideration for the need of staff eating with service users
- Co collaboration in menu development and design



Food Service Considerations

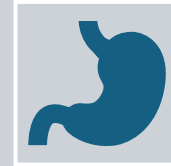
- Sensory preferences – Adaptation of food presentation, mealtime routine, ‘safe’ foods menu maybe a consideration.
- Safety practices – types of cutlery & crockery, monitoring of cutlery, food provision in seclusion units
- Meal time environment – smell, light, sound
- Ordering systems - time of ordering, electronic ordering and seeking the input of clinical teams to help with these decisions on what is most appropriate for the patient group.



Nutrition and Clinical Factors



Screen for malnutrition and weight change.



- Address constipation, hydration, and micronutrient gaps.



- Consider effects of anti psychotic medications on appetite and metabolism.



- Balance weight management with adequate nutrition.

Implementation in Practice

- Engage multidisciplinary teams early.
- Pilot small, achievable changes.
- Use feedback from patients and staff.
- Include dietitians in menu review processes.



PLACE Assessment Form 2025 Organisational questions - Food

The organisational questions relating to Food have now recognised some differences and noted caveats in mental health services.

Menu - For answer by Mental Health /Learning Disabilities organisations only (choose one option)

The organisation operates an 'à la carte' menu		
The organisation has a four-week or more menu cycle		
The organisation has a three-week menu cycle		
The organisation has a two-week menu cycle		
The organisation has a one-week menu cycle		

Note: For the following three questions, in adult mental health services it is not necessary to routinely offer snacks to all patients where dietitian advice is that this is inappropriate, but they must be available on request by ward staff.

Note: Snacks may include fruit/vegetables (e.g., carrot/celery sticks) but such provision does not allow for a yes response to the question above re availability of fruit.

Are patients offered a snack (e.g., cheese and biscuits), between breakfast and lunch?	Y	N	
Are patients offered a snack between lunch and the evening meal?	Y	N	

Why this matters

- PLACE assessments can lack nuance, especially in Mental Health
- Food Service questions are currently focused on compliance with the BDA Nutrition & Hydration Digest
- The few additions that consider mental health settings are a positive move forward, but there could be more!

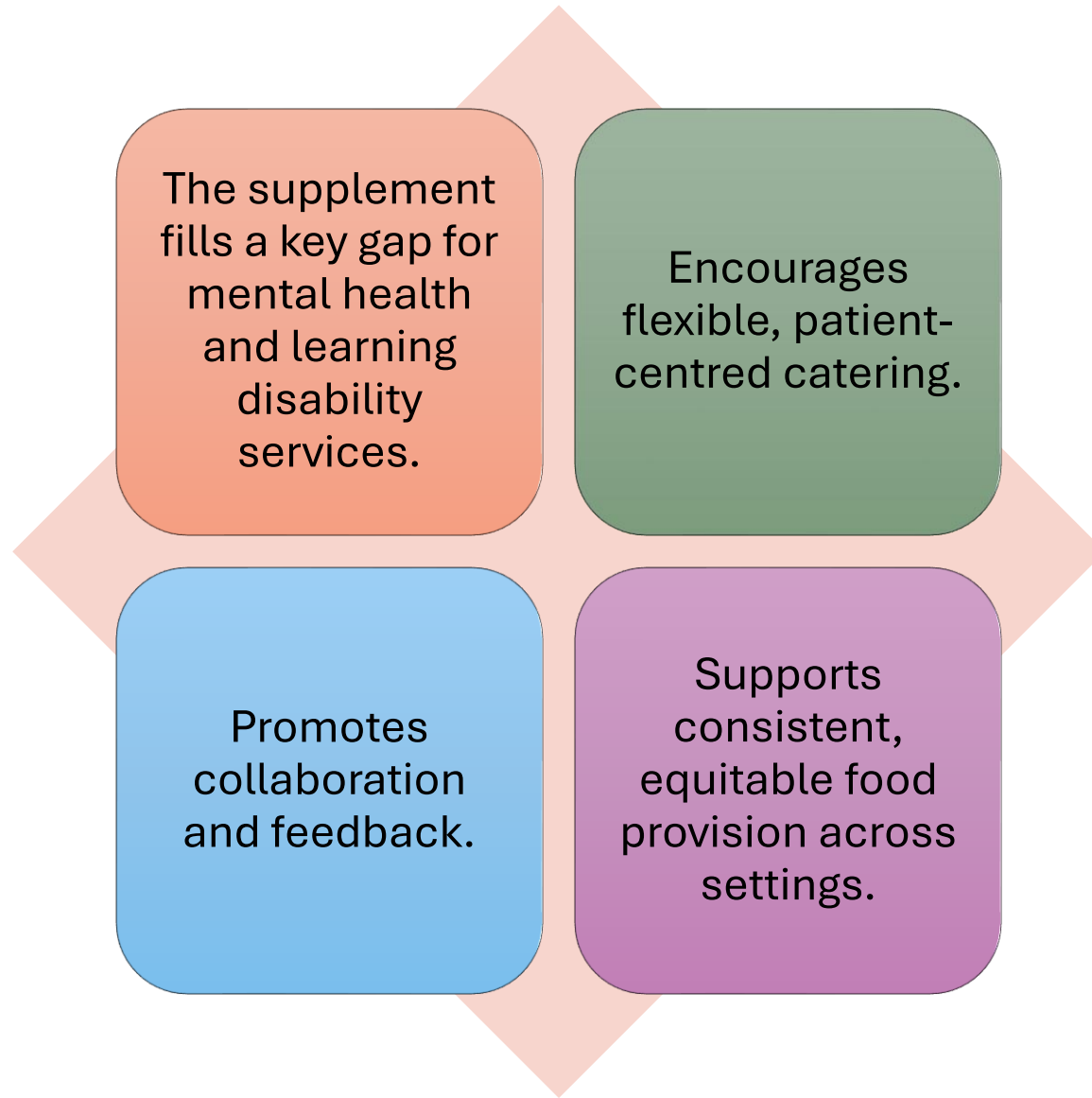
Collaboration – peer reviewers

- The document was written by Amy Pratt and Rebecca Deeley.
- They were supported by various professional associations & experts in mental health



Mental Health Specialist Group & Learning Disability
& Forensic Specialist Subgroup Committees





Key Takeaway messages

Any questions?

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