

Bedfordshire Community Health Services NHS

Making Mealtimes Manageable!



- 9th June 2021
- Emma Cronly-Dillon & Tegen Evans

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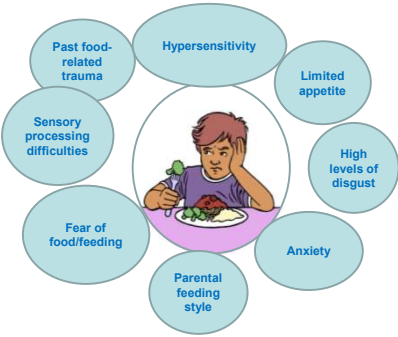
What would success look like for your child?

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Why do children develop feeding difficulties?





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The 8 senses & how sensory processing difficulties can impact feeding behaviour.

1. **Visual input (sight)**
2. **Gustatory input (taste):** Flavours, texture and temperature. five specific tastes – salty, sweet, bitter, sour and umami (savory).
3. **Tactile input (touch):** Our tactile system helps us to understand the important sensation of pressure, texture, hot and cold, and pain.
4. **Hearing input (auditory)**
5. **Olfactory input (smell):** The power of smell can be underestimated. It is strongly linked to emotion and memory (neurobiological) and therefore can trigger unexpected trauma reactions.
6. **Vestibular input (balance):** These receptors are in the inner ear and stimulation occurs through any change in position, direction or movement of the head. Vestibular input contributes to our sense of body position in space, posture and muscle tone, the maintenance of a stable visual field, bilateral co-ordination, a sense of equilibrium/balance and gravitational awareness.
7. **Proprioceptive input (movement):** This system tells us where our body is in space and detects and controls force and pressure. It helps us to feel grounded and know where we are and what we are doing.
8. **Interceptive input (internal):** Sometimes called the hidden sense, the interoceptive system gives us the ability to feel what is happening inside our body i.e. hunger and fullness, thirst, body temperature, heart and breathing rates etc....

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Why do we really need food?

Carbohydrate

Protein

Fruit & Vegetables

Dairy

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Methods to fortify the diet

Vitamin and mineral supplements & nutritional supplements
Vitamin and mineral supplements can be; sprays, drops, liquids, tablets, chewable tablets and gummy tablets.

- Skimmed milk powder can be used to fortify milk. Each table spoon (tbsp) (15g) of milk powder contains; 50kcal and 5.5g protein. Suggestion to add 2-4 tbsp to a pint of whole milk.
- Foods can also be fortified with; butter, cream, evaporated milk, cheese, nut butters, jam & honey,

| Weight | Calories (kcal) | Protein (g) |
|---|-----------------|-------------|
| 1 pt semi-skimmed milk | 300 | 19.4 |
| 1 pt whole milk | 396 | 19.2 |
| 1 pt whole milk + 4 tablespoons dried milk powder | 570 | 37.2 |

Some foods that you can buy in shops are also fortified with additional vitamins and minerals Fortified foods.

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| | | | |
|--|--|---|-----------------------------|
| Per 2 biscuits; Iron 4.5mg, folic acid 64ug, b vitamins | With milk; Iron- 4mg, calcium 582mg, b12 1.2ug, folic acid 60ug + b vitamins | Per 150ml vitamin A- 230ug, vitamin E- 7.5mg, vitamin C- 108mg and B vitamins | Per 1.5g- 30ug iodine |
| Per slice- 0.75ug vitamin D, 150mg calcium, 2.1mg iron + B vitamin | Per serving in water; 800ug vit A, vit E 3mg, 20mg vit C, B vit b12 0.6ug, 120mg calcium, 3.3mg Iron | Vit D 4.74ug per 2 eggs | Per tube- 1.25ug vitamin D |
| 1/2 a can- 1.5ug vitamin D, 4.2mg iron | Per 15g- 2400mg omega 3 | Per 85g pot 0.75ug vitamin D | Per 47g pot 1.4ug vitamin D |
| Per 100ml- vit A 78ug, 2.2ug vit D, 122mg calcium, 1.2mg iron | Per 15g- 3000mg omega 3 | | |

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Why is a mealtime routine important?

breakfast

snack time

lunchtime

snack time

dinner time

Wash Your Hands

Scrape Your Plate

Pack Up

Sit at the Table

clean the table

lay the table

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Bedfordshire Community Health Services **Encouraging good eating before, during & after a meal** **NHS**

Before a meal

- Limit snacks – no more than 30-60 mins before
- Encourage physical activity during the day
- Use food-based activities i.e. messy play, food growing
- Involve children in planning meals
- Involve children in food preparation
- Involve in setting the table

During a meal

- Share meals as a family
- Eat at a table
- Consider seating position (90:90:90)
- Offer safe/liked foods regularly
- Encourage good behaviour
- Only gentle encouragement to try new foods
- No/Minimal distractions
- Aim for low-stress environment

After a meal

- Allow children to leave the table when they have finished eating
- Talk about food experience – what did they like/not like
- Use a diary of food exposure

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Bedfordshire Community Health Services **Sensory Activities** **NHS**

Proprioceptive/Heavy Work activities

- Using your muscles!
- Pulling & pushing activities
- Stretching
- Crawling through tunnels
- Setting the table!

Oral Motor

- Vibrating teethers, pulling faces, massaging jaw/cheeks
- Talk about different parts of the mouth whilst using a mirror
- Have a box of chewable toys
- Offer stick shaped finger foods
- Suck thick liquid through a straw

HEAVY WORK ACTIVITIES FOR KIDS

NEURO Centre
01938 75339676 | neurocentre@nhs.uk | neurocentre.nhs.uk

Sensory considerations at the table:

- Noise cancelling headphones
- Wobble cushions
- Weighted items i.e. cutlery

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Bedfordshire Community Health Services **Practical strategies for improving food acceptance** **NHS**

6 STEPS TO EATING

| 1 | 2 | 3 | 4 | 5 | 6 |
|---|--|--|--|---|---|
| VISUAL | TOUCH | SMELL | TASTE | TEXTURE/ SOUND | SWALLOW |
| | | | | | |
| What does it look like? | What does it feel like? | What does it smell like? | What does it taste like? | What is the texture like? What sound makes in your mouth? | Any other sensation? |
| Color, size, appearance, shape, shiny/matte | Wet/dry, soft/hard, cold/hot, smooth/bumpy, rough/sticky | Small, Medium, Large AND sweet, sour, salty, spicy, bitter, bready | Small, Medium, Large AND sweet, sour, salty, spicy, bitter, bready | (In your mouth) loud, quiet, crunchy, squeaky <small>* Not expected to eat, it is ok to spit it out.</small> | Any other sensation? <small>* Small mouthful is ok and gradually increase quantity</small> |

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Bedfordshire Community Health Services **Practical strategies for improving food acceptance** **NHS**

- Food exposure
- Messy play/ food exploration
- Older children could use a diary for this
- Offering the same foods several times and coming back to previously unliked foods
- Knowing the difference between gagging and choking
- Sticker charts or goal setting with older children



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How do you monitor progress?

- Set your goal or expectations
- Review your process/plan
- Monitor weight gain & growth
- Recognise when you need support.

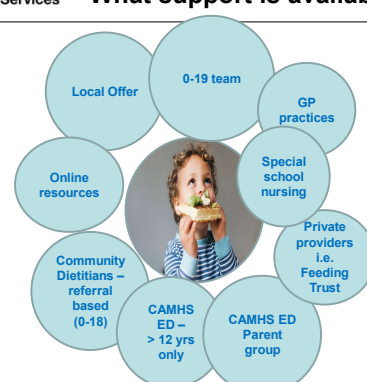



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What support is available locally?



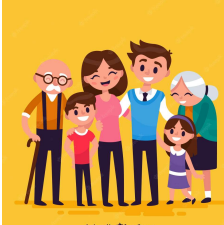
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Summary

- Consider what **success looks like** for you
- Consider what the **underlying causes for feeding difficulties** may be for your child
- Offer liked/safe foods regularly for your child – **protect growth as a priority**
- **Use fortified foods and supplements** to plug gaps in your child's diet
- Ensure your **family mealtime routine is clear & communicated**
- Build opportunities for **sensory activities and food exposure** regularly into your child's day/week
- **Seek support** when you think your child is losing weight/not growing or developing nutritional deficiencies
- **Progress comes from acceptance**



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Further Reading

- [Food Refusal and Avoidant Eating in Children, including those with Autism Spectrum Conditions: A Practical Guide for Parents and Professionals](#) by Gillian Harris and Elizabeth Shea
- [Helping your child with Extreme Picky Eating](#) by Katja Rowell and Jenny McGlothlin
- [Interception The Eighth Sensory System – Practical Solutions for Improving Self-Regulation, Self-Awareness and Social Understanding](#) by Kelly Mahler

Websites:

- <https://www.cambscommunityservices.nhs.uk/Bedfordshire/services/occupational-therapy/sensory-processing-awareness-training>
- <https://www.feedingtrust.org/>
- <https://patientwebinars.co.uk/wp-content/uploads/2020/03/2.-Fussy-Feeders-Older-Children.pdf>
- <https://patientwebinars.co.uk/condition/fussy-eating-in-children/webinars/>

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Questions?



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