

Guidance on supporting someone to eat

Sporting someone to eat can require patience and can be frustrating. It is therefore important for staff to support each other. Supervision is very important for staff who are supporting a young person with their eating.

Key points:

- Checking with health professionals and family to ensure we maintain consistency in approach
- Careful preparation and planning in discussion with family/health professional
- Clear boundaries and consistency in approach
- Be mindful of your own subjective food prejudices about food and do not share these.
- Liaise with family/health professionals each week to report back and review strategies.
- Remember we are supporting the treatment programme, not leading it.

Planning:

- Talk to the family about the pre agreed menus for the week. The family will have been asked to do this as part of the treatment programme. Ensure you ask about fluids.
- Check with family/health professionals what 'completion' means.
- Do not allow the young person any choice in what they eat.
- Agree the times of snacks and lunch in line with the curriculum timetable.
- Check with the family/health professional how long will be given for the young person to eat a snack and a meal (usually 30 mins for a main meal, 15 mins for a pudding and 15 mins for a snack).
- Talk to the young person about what is helpful for them to complete their meal or snack e.g. do they want to sit in the kitchen? Or classroom? Do they like or need music on? To read? Etc.?
- Talk to the young person about whether they would like prompts about timings
- Responsibility to eat is the young persons, not yours.

Pre eating

- Remind the young person 15 mins before the snack or lunch, of their agreement and to prepare. Examples of preparations agreed might be use of the toilet before eating, get what they need for completion and a reminder of what they have agreed to eat. Timing is very important.
- Remind the young person to bring any strategies they use with them
- Present the lunch/snack
- As health of the young person improves, they can take responsibility to prepare and arrive for lunch/snack
- Liaise with family/health professional regarding any changes to pre eating management. This may occur after a review.

Eating

- It is unhelpful to engage in any conversations about the food itself, the quantity of food or whether they like it or not (remember it has been pre agreed). Any difficulties need to be addressed away from an eating experience.

- Everything the young person needs during eating should have been 'pre-planned e.g. reminding them to eat, how much to put on their fork/spoon, chewing appropriately.
- Take the emphasis off the food
- If you are sitting with the young person, distractional topics can be helpful, but make sure they don't use this as a means to avoid eating!
- Don't get into discussions about any other person's portions, including your own!
- Give prompts regarding timing and once timing is up, remove the plate.
- If you notice the young person becoming distressed, acknowledge this and let them know that you are there and they can keep going. Contain their distress and do not allow this to be a motive to stop eating e.g. by encouraging them to take a few breaths or using some helpful statements. Once someone stops eating it can be harder to start again.
- If the young person is seen hiding, disposing food and /or engaging in unhelpful behaviours, deal with it in a compassionate manner and understand the distress that lays beneath the behaviours. Do not ignore it however. This colludes with the young person and leaves them feeling unsafe.
- Talk to the health professionals about possible strategies such as motivational placemats, cue cards with self-statements if the young person is struggling.
- Your role is to contain the distress so that the young person can complete the food. If you eat with them, this can be a useful role model and can normalise the situation. Remember you are not in treatment and can choose what you eat and drink!
- Monitor fluid intake during eating. Remind the young person if appropriate.
- Once completed, encourage the young person to complete their food and balance chart. Support them if necessary.

Clear boundaries

- Discuss with family/health professionals what should happen if the young person is unable to complete their lunch/snack. It is important that everyone has the same approach.
- Discuss with family/health professional if a supplement is to be used if the lunch/snack is not completed. It is not an alternative to food.
- Discuss with family/health professional what not completing means e.g. half finished. Everyone having the same boundaries is very important.
- The agreed amounts to be eaten are non-negotiable. The aim is to disempower the eating disorder and contain the anxiety of the young person. It may cause distress in the short term but makes the young person feel safe in the long term.
- Take the emphasis off food and provide positive reinforcements.
- Be positive and focus on the times the young person has completed.