

Snack Wednesday

When a resident has a small appetite, have lost weight or are unable to eat enough food, it is important to make every mouthful count. 2-3 high energy snacks a day can help support optimal oral intake.

Snacks should be able to meet:



Religious or cultural beliefs



Texture modification requirements



Therapeutic diet needs e.g. coeliac disease



Likes, dislikes and dietary choice

Texture modified snack ideas:

Level 4 pureed: Smooth rice pudding, smooth nut butter mixed with cream or milk to form Level 4 puree food

Level 5 Minced and Moist: Mashed banana, mashed cake with cream / custard, mashed tuna (with mayonnaise/ butter/ smooth mustard



Level 6 Soft and Bite-sized: Soft cake/ cake bars, ripe avocado mashed with cream cheese or greek yoghurt



Level 7 Easy Chew: Soft biscuits (e.g. jaffa cakes), soft/ stewed fruit, soft sandwiches with moist fillings (e.g. egg mayonnaise)

Disclaimer: All diet offered should be the correct consistency (see IDDSI), in line with agreed safer swallowing recommendations using appropriate testing methods

Diabetic snack ideas:

- Crackers or toast and cheese 
- Sandwiches with meat, cheese, egg or fish and mayonnaise
- Oatmeal or digestive biscuits with butter
- High fibre cereal (avoid sugar coated varieties) or porridge 
- Full fat yoghurts (with no added sugar)
- Reduced sugar custard or rice pudding with cream added
- Sugar free jelly with fruit and cream
- Handful of nuts 
- Crisps/breadsticks and dips
- Milk or hot milky drinks (with no added sugar)

Aim for:

- 3 energy dense snacks per day
- Minimum energy intake of 150 calories per snack
- A nourishing food with higher protein content



Nourishing drinks

If a resident is unable to eat solid foods offer a nourishing drink e.g. fortified milkshake. Encouraging nourishing fluids will provide both fluid and extra calories, as well as additional protein and micronutrients. Encourage full fat milk, milky coffee, hot chocolate, horlicks, fortified soup and fruit smoothies

