

Help sheet no. 7

Appropriate meal sizes for residents

People's food and nutrition needs depend on their size, gender, activity and level of health.

Catering for different needs

The facility's catering system should be flexible enough to provide different amounts of food depending on individual need.

The 'right' amount of food is about providing **opportunities** for residents to eat a nutritionally adequate diet, not serving just the minimum amount needed.

The best food supply is one that provides quality meals, snacks and fluids at least six times a day. Beyond this, some residents, for example those with limited appetites or increased food and nutrition needs, will still require special food and fluid preparation.

Food volumes

Older people need foods from the following core food groups each day:

- Meat or meat alternatives: 1–1.5 serves
- Milk and milk products: 3 serves
- Fruits: 2–3 serves
- Vegetables: 4–6 serves for women; 4–7 serves for men
- Bread and cereals: 3–5 serves for women; 4–6 serves for men (in this case, 1 serve of bread = 2 slices)

(For a definition of serve sizes, see *Australian guide to healthy eating* (for consumers) 1998, Commonwealth of Australia, Phone 1800 020 103 Ext 8654.)

These specifications represent basic amounts of food. Some residents will require more than that listed. These basics may provide the nutrients required but eating is also about social occasion and enjoying food. Other foods that we enjoy, like alcohol, chocolates and cakes, can be offered. Special occasions, celebrations and 'happy hours' are opportunities to serve a range of other foods and drinks.

The 'right' amount

An example of a daily food pattern:

Breakfast

- 1/2–1 cup fruit juice (variety of pure juices)
- Cereal (1 cup) with milk and sugar or honey – preferably higher fibre types
- Yoghurt
- Tinned or fresh fruit
- Cooked item – egg, baked beans, tomatoes, cheese
- Toast/bread – wholemeal or white with margarine/butter and spreads
- Tea/coffee

Lunch

- Meat, chicken, fish or egg (lean cooked meat weight). Aim for 2–3 slices of roast meat (60–90g) enough to cover 1/3–1/2 of a 25 cm dinner plate depending on thickness; 1/4 chicken; 2 eggs; 1/2–3/4 cup casserole. Gravy/sauce additional.
- 3–4 vegetables – approx two heaped tablespoons for each vegetable.
- Rice and pasta (1/2 cup is equal to 1/2 serve cereal) substituted for one vegetable if appropriate for dish. Larger serve depending on appetite.
- Bread or roll and margarine/butter
- Dessert: a variety of types. Weight of serve will vary with dessert type. Aim to 1/2 fill a large dessert bowl or about 3/4–1 cup full of dessert. For example, custard or ice cream. Garnish with cream for extra moistness and energy.
- Glass of water/juice/cordial/milk
- Tea/coffee

Dinner

- Soup – 1 cup
- Hot entrée dish with 2–3 vegetables or sandwich (4–6 points) or salad with 1–2 slices meat, chicken, fish or 1–2 eggs
- Bread or roll and margarine/butter
- Dessert as described above and 1/2–3/4 cup tinned fruit or a piece of fresh fruit cut up
- Glass of water/juice/sweet cordial/milk
- Tea/coffee

Morning tea, afternoon tea and supper

- Cheese and biscuits/fresh fruit/sweet biscuits/cake/scone/raisin toast/muffin/yoghurt/1/4–1/2 sandwich/ice cream
- Milk drink/water/juice/sweet cordial/tea/coffee

Offer finger foods for those who wish to maintain their independence and might be having difficulty due to physical disability or cognitive problems.

Egg served at breakfast is a useful way of adding a meat alternative and improves food variety. Unfortunately, the ‘cooked breakfast’ has disappeared from a lot of menus, despite being an excellent source of protein and nutrients. Facilities that have retained the cooked breakfast will find it easier to satisfy the nutrient needs of their residents.

[Clients who require texture-modified diets are at greater nutritional risk. See help sheet 13 Catering for those with swallowing problems – texture-modified diets.](#)

Are residents getting enough food?

Maintaining body weight within the desirable range is one measure of adequacy of food intake. Regular monitoring of body weight, signs of dehydration, together with assessment of food and fluid intake, will help determine if residents are getting enough food. Refer to:

- [Help sheet no 9 Promoting independence at mealtimes](#)
- [Help sheet no 11 Identifying and managing unintentional weight loss](#)
- [Help sheet no 14 Drinking and fluids – maintaining hydration](#)

Residents with limited appetites

Despite a menu plan that offers nutrition and variety, residents with reduced appetites or special nutrition needs may need a dietary supplement. Most people on texture-modified meals could benefit from a daily supplement. Milk drinks can be given as part of the overall meal plan, although commercial supplements contain extra vitamins and minerals in an easy to consume form. For residents who dislike milk, fruit-based protein supplements are available. Seek further advice from an accredited practising dietitian about cost effective supplements for your residents.

More information

A food and nutrition policy and food specifications set the standards for meal quantities and food variety. An accredited practising dietitian can assist in setting appropriate food standards and planning menus. Contact the Dietitians Association of Australia to find a dietitian who specialises in accreditation and menu planning in residential facilities.

Refer to **help sheet 31 Accessing health professionals**.

Adapted from Stewart A., (1999), *Nutrition guidelines for residential aged care facilities* (unpublished) Contact Alison Stewart, Consultant Dietitian.

Useful reference

Wood, Bacon, Stewart and Race, Department of Human Services Home and Community Care Program (2001) *Identifying and assisting home based frail elderly people who are nutritionally at risk – a resource manual*. Department of Human Services.

www.health.vic.gov.au/agedcare/hacc/nutrition

Note: If there are issues with food or fluid intake, seek specialist assessment and advice from an accredited practising dietitian. See the Dietitians Association of Australia website at www.daa.asn.au or call the accredited practising dietitians hotline on 1800 812 942.