

Good Practice in supporting patients at mealtimes with eating and drinking

How carers, nurses and family can help

Eating, Drinking and swallowing as we age:

Some patients may find eating and drinking harder as they get older or if they are unwell or particularly tired. This might affect chewing, swallowing, attention, or appetite. With the right support, mealtimes can still be safe, comfortable and enjoyable.

What happens:

Eating and drinking are complex tasks. Patients may vary in how they manage to eat and drink due to changes in:

- Alertness or concentration;
- Vision, hearing or dental health;
- Mobility or posture;
- Appetite or thirst awareness.

General good practice for mealtimes for all patients:

Posture and positioning:

- Make sure the patient is **fully awake and alert** before offering food or drink;
- Support the patient to sit **upright**, ideally in a chair;
- If the patient needs to eat while in bed, reposition them to as upright as possible. Bed should be between 45-90 degree angle. Ensure the head, neck and shoulders are upright, even if the body is more reclined. Head should not be extended backwards;
- If you are helping them eat, sit **at eye level and facing them**;
- Never give food or drink to someone who is drowsy or not fully alert.

Habits and gentle reminders:

- Offer **clear verbal and non-verbal prompts** to encourage eating and drinking;
- Allow the patient to eat at **their own pace** – do not rush;
- Accept that meals may need to be **delayed** if the patient is tired or unsettled;
- Sitting and eating with the patient can help reduce anxiety and encourage eating.

Environment and routines:

- Take patients to the toilet before mealtimes;
- Create a **calm, quiet mealtime environment**;
- Reduce background noise, clutter and distractions;
- Ensure glasses, hearing aids and dentures are in place if needed;
- Use good lighting so food is easy to see.

General good practice for patients who need feeding:

Note: Patients who are fed by others are more likely to develop chest infections.

Special care should be taken to feed these patients.

Follow this advice:

- Ensure patient is wide awake;
- Ensure position is as upright as possible;
- Ensure mouth is clean before eating and drinking. (*See Leaflet 4: Mouth Care*);
- Ensure dentures are in place and well fitting;
- Reduce distractions during the meal;
- Feed at the patient's rate of eating. This is usually slowly;
- Never rush the person eating;
- Use a teaspoon but load it fully;
- Watch the throat move to ensure the swallow has happened before giving the next mouthful;
- Some patients need extra time to swallow again;
- Listen for any changes in breathing or how their voice sounds after swallowing. Prompt them to cough and then swallow, if you hear a wet or gurgly voice;
- If patient needs to cough or clear their throat, give them time to do this and then prompt them to swallow afterwards. This extra swallow helps clear the residue out of their throat;
- Some patients need to take sips of a drink after every few mouthfuls of food;
- Avoid having food and drink in the mouth at the same time;
- Complete mouthcare after meals to remove food residue;
- Remain upright after eating for at least 30 minutes to reduce the chances of reflux.

Note: Some patients may have a swallowing impairment (dysphagia) and have additional instructions on safe feeding from the Speech and Language therapist.

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