A Premier Foods guide to International Dysphagia Diet Standards
Welcome to the next step in our journey of assisting caterers to provide creative, tasty and inspirational recipe solutions for dysphagia sufferers that will ensure dignity in dining. In this latest guide, we aim to outline the new international dysphagia guidelines, and provide tips and advice for caterers as the industry begins to adopt the new framework.

The International Dysphagia Diet Standardisation Initiative (IDDSI) standardises the framework for texture modified foods globally. Our guide to these new standards has been designed to equip caterers with creative and inspirational recipe ideas which follow this new framework. The recipes are cost-effective, using ingredients and equipment that can be found in the average commercial kitchen, making it as easy as possible to meet the needs and provide sufferers with delicious meals that will ensure dignity in dining, and meal times are an occasion to look forward to.

We know that there are a number of challenges in catering for a dysphagia diet and we are proud to continue our collaborative work with customers to ensure the most enjoyable experience possible for those suffering with dysphagia. With the day-to-day challenges of managing budgets, meeting the requirements of specialist dietary needs, all whilst ensuring a welcoming healthcare or care home environment, there is a real need for menu solutions and products that you can rely on.

Most people look forward to mealtimes as a break in the day, an opportunity to socialise and relax as well as enjoy a range of food and drink. Those who have swallowing difficulties will tend to have the opposite experience seeing mealtimes as tedious, embarrassing, tiring, unenjoyable and sometimes frightening.

Difficulty with swallowing is found in more than 12% of healthy older people with a reduction in muscle strength, alterations in the sense of taste and saliva. Furthermore, dysphagia affects 40–70% of patients having suffered a stroke, 60–80% of patients with progressive neurological diseases such as Parkinson’s disease, as well as 60–75% of patients undergoing radiotherapy for head and neck cancer. Dysphagia is also identified as a key risk for those with learning difficulties, as well as up to 57% of people with dementia, and it has been estimated that more than 51% of older people in care homes have difficulty swallowing.

Swallowing difficulties are associated with reduced health and well-being and can cause high levels of anxiety to relatives and carers. Improving the experience of individuals with these challenges can be highly rewarding as it can make a huge difference to their quality of life.

Some individuals will have such significant dysphagia that they will need to have a detailed assessment of this condition conducted by a Speech and Language Therapist, who will review risks and advise regarding textures and consistencies of meals.

We often take swallowing for granted. There are many different reasons associated with its disruption and we need a multidisciplinary approach to ensure that individuals that have these challenges can improve their quality of life by looking forward to mealtimes. I am delighted that the new range of recipes from Premier Foods will extend the options that can be offered.

Pam Enderby, MBE, PhD, DSc (HON), MSc, FRCSLT
Prof Emeritus, University of Sheffield
Pam Enderby is Emeritus Professor of Community Rehabilitation at the University of Sheffield. She is a qualified Speech and Language Therapist and has combined research with clinical practice. She is the author of 14 books and has published 200 peer-reviewed journal articles. Her areas of research include: assessment, evaluation of rehabilitation and speech and language therapy. Pam was awarded a Fellowship of the College of Speech Therapists and has been honoured with an MBE for services to speech and language therapy.
Dysphagia in the UK

Dysphagia can affect individuals of all ages and can be short or long term with figures showing that 22% of over 55’s suffer. Dysphagia in extreme cases can be life-threatening, causing chest infections, malnutrition or dehydration. The prevalence of dysphagia is likely to increase over the next three decades as our population continues to get older. The Office of National Statistics has shown that between 1974 and 2014, the number of people aged 65 and over grew rapidly to make up 18% of the UK’s total population, with people over 75 increasing by 89%.

The International Dysphagia Diet Standardisation Initiative (IDDSI)
The International Dysphagia Diet Standardisation Initiative (IDDSI) was founded in 2013. Its aim is developing new global standardised terminology and definitions to describe texture modified foods and thickened liquids used for individuals with dysphagia of all ages, in all care settings.

Malnutrition

People requiring dysphagia diets have a greater risk of malnutrition because of numerous factors such as reduced appetite or the inability to eat independently. Many care homes and hospitals are relying on puréeing in order to deliver meals for dysphagia patients but it can impact the nutritional content of foods with a reduction in vitamins and fibre content during the process.

Dysphagia can impact on an individual’s quality of life as a result of anxiety, embarrassment and loss of taste and smell. Therefore ensuring that individuals with dysphagia have a nutritious, appetising and safe meal is essential both in terms of maintaining an individual’s well-being and quality of life.

Living with Dysphagia

Living with dysphagia can be difficult in terms of malnutrition, danger of choking, anxiety about having to eat something different to your peers, and is becoming more prevalent in today’s society.

The condition varies from person to person and some individuals are at a greater risk of malnutrition, dehydration, aspiration pneumonia and choking as a result. Dysphagia can impact on an individual’s quality of life if not managed. By the age of 75, 1 in 5 women and 1 in 6 men will have suffered a stroke in the UK – of these, 33% are predicted to develop some form of dysphagia.

The eating environment

Environment has a big role to play in making a person feel relaxed which can impact how much someone will eat.

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Pioneering Healthcare Solutions from Premier Foods

In 2012 Premier Foods began its journey to launch a ground-breaking new Healthcare Solutions Programme which re-appraised the catering offered across the industry to ensure the nutritional needs of those suffering with dysphagia were being met.

The programme initially focused on diets required for dysphagia alone, but momentum gathered and solutions are now being developed for dementia and diabetes sufferers. The programme has included a mix of practical training, workshops, on-going advice and support to the industry, along with our Dysphagia Chef of the Year competition in 2016 – a first for the industry, which celebrated and showcased the skills of chefs working in this specialist area.

We have already run over 100 training courses since the initial launch of our Healthcare Solutions Programme in 2012 with group care home operators, NHS trusts, local authorities, independent businesses and individual caterers. Whilst we have made progress in demystifying these often misunderstood conditions such as dysphagia, the hard work doesn’t stop there. We will continue to work collaboratively with the industry to understand the needs of caterers and the real-time challenges they face through all stages of the supply chain, ensuring our solutions always deliver a fresh and inspiring approach.

The next stage in our journey is to provide support to the industry as the new IDDSI framework is adopted. All of the recipes within this guide use the new international descriptors and have been provided to enable care homes and hospitals to provide nutritious and exciting meals that meet the new globalised descriptors.

The recipes also include Premier Foods products that caterers may already have in their store cupboard including: Bisto, Ambrosia, Angel Delight and McDougalls.

Top tips for varying presentation

All descriptors are explained in detail overleaf.

Piping bags – Piping bags are easy to use and will hold Level 4 purée and some Level 5 miniced and moist textures. Protecting food from forming skins. With a little practice and by altering the size of the hole, a range of shapes and replications of common foods can be achieved. Nootice can be used to give shapes interesting textures.

Food moulds – Food moulds are available in the shape of many common foods and can be used for Level 4 and some Level 5 miniced and moist textures. Simply process the food to the desired texture, fill the mould and then freeze. Once frozen they can be popped out and stored. To re-generate plate, the frozen shapes and steam until heated thoroughly.

Shaped cutters - Cutters are available in a variety of shapes and sizes, from geometric shapes like circles, squares and rectangles to the shapes of more fun things. Cut the cutters first, fill using a piping bag and then remove. Again, this works best with Level 4 purée and Level 5 miniced and moist textures but can also be used with Level 6 soft textures too.

Quenelles - Level 4 and Level 5 textures can be shaped into quenelles using two spoons. This shape is more attractive to the eye than when food has been allowed to drop off a spoon.

Layering – Level 4, Level 5 and Level 6 textures can all be layered in oiled cutters or glass dishes. This enhances the visual appearance and is a simple effect. Use a piping bag for Level 4, a spoon can be used for other textures.
What are descriptors?

Descriptors detail the types and textures of foods needed by individuals who have oropharyngeal dysphagia (swallowing difficulties) and who are at risk of choking or aspiration (food or liquid going into their airway). The descriptors provide standard terminology to be used by all health professionals and food providers when communicating an individual’s requirements for a texture modified diet.

Previous descriptors:
Dysphagia Food Texture Descriptors which have been previously used within the industry are:

B Thin Puree Dysphagia Diet
Food has been puréed or has a purée texture which does not require chewing, it is a thin purée that is smooth throughout with no ‘bits’

C Thick Puree Dysphagia Diet
Food has been puréed or has a purée texture which does not require chewing, it is a thick purée that is smooth throughout with no ‘bits’

D Pre-mashed Dysphagia Diet
Food is soft, tender and moist which needs very little chewing, it has been mashed up with a fork before serving, it is usually very thick, smooth but non-pouring

E Fork Mashable Dysphagia Diet
Food is soft, tender and moist but needs some chewing, it can be mashed with a fork, it is usually very thick, smooth but non-pouring

New descriptors:
Within the IDDSI Framework, the food textures are:

- 0 Thin
  - Flows fast like water and can be drunk through any type of test/rice paper, cup or straw or as appropriate for age and skill

- 1 Slightly thick
  - Thicker than water, flows through a straw, syringe, test/teat/nipple but requires a little more effort to drink than liquids

- 2 Mildly thick
  - Pours quickly from a spoon, but slower than thin drinks

- 3 Liquidised/Moderately thick
  - Can be drunk from a cup but cannot be piped, layered or moulded on a plate as it is too thin. No oral processing or chewing is required

- 4 Puréed/Extremely thick
  - Usually eaten with a spoon, can be piped, layered or moulded but does not require chewing. The food should fall off the spoon in a single spoonful when tilted and continues to hold shape on the plate

- 5 Minced & Moist
  - Can be eaten with a fork or a spoon, can be scooped and shaped on the plate, small lumps visible within the food but these lumps are easy to squash with tongue

- 6 Soft & Bite-Sized
  - Can be eaten with a fork, spoon or chopsticks (depending on hand control) and can be mashed/broken down with pressure from a fork. Chewing is required before swallowing

- 7 Regular
  - Normal, everyday foods of various textures that are developmentally and age appropriate

So, what’s new?
The new descriptors according to the IDDSI framework provide additional detail, further assisting healthcare professionals who are catering for patients who have varied levels of swallowing difficulties. Dysphagia isn’t a one size fits all condition, and patients require different levels of texture modification.

A review of the existing standards has resulted in a framework that is culturally sensitive, measurable and applicable to individuals of all age groups in all care settings. The new framework consists of eight levels; zero to seven (as opposed to four), where drinks are measured from Level 0 to Level 4, and foods are measured from Level 3.

The aim of the IDDSI is to provide standard terminology for descriptors globally. Before this standardisation, there was a major barrier to research in the dysphagia field. Terms like, ‘Thin Puree Dysphagia Diet’ in the UK may not translate to liquid consistencies in other countries around the world, whereas the new IDDSI provides clear and fully defined descriptors which can be used and translated worldwide.

Feeding safety routines

Pam Enderby, MBE, PhD, DSc (HON), MSc, FRCSLT Prof Emeritus, University of Sheffield

Pam has compiled these tips to help put together safe feeding routines for your patients and residents

- Conscious level – No-one should be given food or drink if unconscious or semi-conscious. Alternative nutritional and hydration options should be discussed with the responsible clinician
- Distractions – Reduce distractions at mealtimes to facilitate concentration and awareness
- Time – Allow adequate time to support the individual to eat and drink. Consider the use of insulated containers to maintain the temperature of food for those people whose mealtimes may be prolonged
- Positioning – People should sit upright for all snacks, meals and drinks. People should remain sitting upright for at least 30 minutes after a meal to avoid reflux
- Oral Hygiene – It is of key importance to note that people with swallowing difficulties often have poor oral hygiene which can lead to increased likelihood of chest infections. Ensure the mouth is clean and free from residue at the end of the meal. Encourage a ‘clearing swallow’; a ‘saliva swallow’ or a drink of water to assist in clearing residue from the mouth.

Cleaning teeth and mouths at intervals during the day is good practice

- Carer position – The carer’s position should be at eye level so that signs of difficulty can be observed as well as being able to provide verbal prompts and encouragement. Sitting beside the individual may lead them to turn their head which may make swallowing more difficult
- Utensils – Ensure you have the correct utensils identified for the individual to facilitate a safer swallow and improve sensory awareness
- Glasses and hearing aids – Swallowing requires multi-sensory stimulation. Food should be visually appealing in its presentation and smell appealing in order to stimulate the appetite (and salivary flow)
- Dentures – Dentures, if worn, should fit well. Be aware that some individuals prefer to eat without their dentures and softening the diet may help

Modifying Diet – Texture modification is common in clinical practice. Modifying diet and adding extra sauces, gravy or custard makes chewing easier for those who are frail or have reduced masticatory skills

The key differences
- The new IDDSI framework now includes liquids and regular food to provide context
- The old descriptors were based on a consensus of expert opinion. The new framework has been developed after much research and collaboration across the world and each level is based on evidence
- There are now eight levels of texture modified diets from 0 = Thin (a drinkable liquid which flows fast like water) to 7 = Regular (normal everyday food with a variety of textures)
- The levels are identified by numbers, text labels, and colour codes to facilitate uptake in all care settings
- A category for transitional foods is provided

Testing descriptors
No special equipment is needed to test the correct consistency of the food, making the guide simple and accessible to everyone whether in a domestic kitchen or a large commercial catering environment. More details about testing methods can be found on the IDDSI website: http://iddsi.org.
Eating nutritious and well-presented food is a vital part of our everyday lives and this is no different for those who need to have their food texture modified. Modifications of food range from thin and thick purées, finely chopped soft foods, moistened foods, to naturally soft foods whether cooked or raw. Our experience shows that all textures can be delicious and presented in appetising ways that will enhance the lives of those who need them.

**A practical guide to preparing meals**

**Thickening up**

If using thickening powders it is important to allow time for rehydration as some powders will take a few minutes to do this. It is best to leave this to stand, then test against the descriptor checklist before serving. McDougalls Thickening Granules can be used, or the following Premier Foods products can also help thicken up your meals:

- Pro-pannacotta
- Mucilage
- Gel Crem Hot
- Gel Crem Cold

In addition to Premier Foods store cupboard products, there are other thickening agents available. Our chefs at Premier Foods use a number of these, including Sosa products, which have been used in recipes throughout this guide. All prescription thickeners should be treated as a medication. It should be stored appropriately and only used for the person named on the prescription. Having Sosa products available in your kitchen allows you to cater for dysphagia sufferers efficiently, whilst keeping nutritional value. Our top five Sosa products are:

- Pro-pannacotta
- Vegetable Setting Powder
- Instابلur
- Gel Crem Hot
- Gel Crem Cold

*Why Sosa? Sosa products is a functional ingredient that offers solutions for caterers when creating dysphagia modified food.*

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Sosa products is a functional ingredient that offers solutions for caterers when creating dysphagia modified food.

**Factors that can change the consistency of puréed foods**

- Temperature at which the food is puréed - If food is puréed hot, it will require less added liquid to reach the same consistency than the same food that has been puréed chilled. Food items that contain natural gelatine such as animal products will be firmer when cold and become more fluid once reheated.
- Temperature at which the food is stored - A cold dessert may thicken up if refrigerated for several hours so care needs to be taken that the food is the right consistency when served.
- Reheating method - Reheating may produce a crust or skin so it is best to reheat foods in a steamer or re-heat whilst covered, to prevent drying out. Always ensure that food has reached the correct temperature and that correct procedures have been followed. To ensure safety, always check the consistency and temperature of meals at the point of service.

**Thinning down**

When adding liquid to puréed foods, it is important to consider that this will reduce the flavour and also dilute the nutritional value of the dish. To enhance the dish, you could use stock or gravy to thin down the dish. Alternatively, try using the following products which will also add nutrition and calories to your dish:

- Milk
- Yoghurt
- Custard
- Syrups
- Fruit Juice
- Condensed Milk
- Cream

Investment in a good quality food processor or blender will improve the consistency of purées as well as save you time in the kitchen, particularly when puréeing fibrous foods such as meat products. When using a food processor or liquidiser, overfilling will result in an inconsistent purée, whilst trying to puree too small an amount will not work, as the blade will not reach the food.

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Ingredients

- Salt and pepper (to taste)
- 10g Lemon juice
- 50g Fresh chives
- 4 x 50g Frozen spinach pellets
- 100g Thick yoghurt
- 25g Sosa Gelcrem Hot

For the curry sauce

- Salt and pepper (to taste)
- 500g Full fat milk
- 500g Skinless and boneless smoked haddock fillets
- 5g Ground cinnamon

For the curried rice

- Salt (to taste)
- 675g Full fat milk

For the toast

- 10 Eggs

For the mushroom

- 10 Peppercorns

For the bacon

- 1 Onion
- 2 Carrots
- 500g Smoked gammon hook
- 1 Stirl Bisto Ham Bouillon (made up as per pack instructions)
- 2 Bay leaves
- 10 Peppercorns

For the sausage

- Vegetable oil (for frying)
- 50g Onion (chopped)
- 10g Tomato purée
- 400g Lincolnshire sausage meat
- 200ml Bisto Gluten Free Gravy (made up as per instructions)
- Food thickener (if required)

For the tomato

- 600g Homepride Tomato and Basil Sauce
- 20g Sosa Gelcrem Hot

For the beans

- 200ml Bisto Gluten Free Gravy
- 400g Baked beans
- 20g Sosa Gelcrem Hot

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For the egg

- 9 Eggs
- 100g Milk
- 100g Cream
- Salt and pepper

For the toast

- 675g Full fat milk
- 185g Bread (toasted)
- 15g Sosa Vegetal Setting Powder
- Salt (to taste)

Method

1. Start by preparing the bacon. Cut the vegetables and place in a pan with the smoked gammon hook, Bisto Ham Bouillon, bay leaves and peppercorns.
2. Bring to a simmer and cook gently until tender and falling apart the bone. (this should take between 2.5hrs – 3.5hrs). Remove the smoked gammon hook from the pan and cool slightly reserving the stock.
3. To make the bacon purée, heat the reserved stock as needed. Check the seasoning and complete Level 4 texture checks. If needed, food thickener can be added to adjust the texture.
4. For the egg, combine all the ingredients together in a metal bowl. Stirr the egg with water on the stove and place the metal bowl and egg mixture on top of the pan. While continuously until egg mixture is thick and has reached 75% before transferring to a blender and process until smooth. Complete Level 4 texture checks.
5. For the mushrooms, heat the tomato, blend the Homepride Tomato and Basil Sauce to a fine purée and pass through a sieve. Heat the sauce and blend in the Sosa Gelcrem Hot. Leave to stand for 5 minutes to thicken. Complete Level 1 texture checks. If needed, food thickener can be added to adjust the texture. If any required. The bacon purée can be spread by adding a food thickener or more stock if required. The bacon purée can be spread onto the plate or set into a mould before slicing thinly and reheating when needed.
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11. For the curry sauce, bring the vegetables and tomato purée in a pan with the smoked gammon hook, Bisto Ham Bouillon, bay leaves and peppercorns. Complete level 4 texture checks. If needed, food thickener can be added to adjust the texture. If any required. The bacon purée can be spread by adding a food thickener or more stock if required. The bacon purée can be spread onto the plate or set into a mould before slicing thinly and reheating when needed.
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Serving suggestion:

Plate the rice in a shallow bowl, space the haddock evenly across the surface, pipe the curry and spinach purées in the gaps, finely grate the egg over the top and serve.

For the curry sauce

- 400g Sharwoods’ Balti Sauce
- 25g Sosa Gelcrem Hot

For the spinach and chive purée

- 4 x 50g Frozen spinach pellets
- 100g Thick yoghurt
- 50g Fresh chives
- 10g Lemon juice
- Food thickener (as required)
- Salt and pepper (to taste)

For the beans

- 400g Baked beans
- Food thickener (if required)

For the mushroom

- 100g Onion (sliced)
- 50g Garlic (crushed)
- 450g Flat mushrooms (sliced)
- 100ml Bisto Vegetable Bouillon (made up as per instructions)
- Food thickener (if required)

For the egg

- 9 Eggs
- 100ml Milk
- 100ml Cream
- Salt and pepper

For the toast

- 675g Full fat milk
- 185g Bread (toasted)
- 15g Sosa Vegetal Setting Powder
- Salt (to taste)
Lunchtime can be a distressing time for dysphagia sufferers, but with the below recipes and the presentation tips on page 11, you can ensure your patients and residents are looking forward to lunchtime and provide them with essential nutrients.

**Hearty lunchtime**

### Roast Chicken Dinner

**Ingredients**
- For the chicken:
  - 1 tsp Vegetable oil
  - 300g Onion, finely chopped
  - 750g Diced chicken thigh meat (1.5cm dice)
  - 100g Pato Stuffing
  - 500ml Bisto Chicken Bouillon (made as pack instructions)
- For the sauce:
  - 50g Butter
  - 800g Brussel sprouts and transparent
  - 25g Butter
  - 450ml Boiling water
  - 450ml Heated whole milk
  - 500ml Bisto Chicken Bouillon
  - 100g Paxo Stuffing (1.5cm dice)
  - 750g Diced chicken thigh meat
  - 300g Onion, finely chopped
  - 1 tbsp Vegetable oil
  - 30g Crushed garlic
  - 60g Root ginger

**Method**
1. To make the chicken, heat the vegetable oil in a pan and add the onion, stir fry for 5 minutes until soft and transparent.
2. Add the diced chicken and fry for 3 minutes.
3. Add the Pato Stuffing and the Bisto Chicken Bouillon. Mix well and cook for 30 minutes until the chicken is soft and tender. Add more stock if required.
4. When the chicken is soft, thicken the sauce with the Bisto Gluten Free Gravy.
5. Complete Level 6 texture checks.
6. To make the smash, combine the heated milk and the boiling water, stir in the Smash and mix well.
7. Add the butter and season to taste.
8. Complete Level 6 texture checks.
9. For the honeyed carrots and parsnips, lay out a sheet of tin foil and baking parchment.
10. Place all the ingredients on top of the parchment and fold in the edges to create a parcel. Twist the edges to seal.
11. Cook the parcel in the oven at 160°C for 30-40 minutes until soft and tender.
12. Complete Level 6 texture checks.
13. Cook the broccoli in a pan of boiling water until soft and tender. Strain and toss in the butter.

### Vegetable Korma

**Ingredients**
- For the korma:
  - 60g Fresh ginger (peeled and finely grated)
  - 30g Crushed garlic
  - 150ml Vegetable Oil
  - 150g Onion (cut to 4mm cubes)
  - 100g Carrot (cut to 4mm cubes)
  - 150g Butternut squash (cut to 4mm cubes)
  - 100g Sweet potato (cut to 4mm cubes)
  - 600g Coconut milk
  - 100g Double cream
  - 100g Ground almonds
  - Salt (to taste)
  - 15g Shawarma Korma Paste
- For the mushroom and tomat daal:
  - 500g Red lentils
  - 550g Mushrooms (cut to 4mm dice)
  - 150g Shawarma Tikka Paste
  - 100g Homepride Tomato and Basil Sauce
  - 30g White wine vinegar
  - 50g Sugar
  - Salt (to taste)
- For the cucumber and coriander salad:
  - 400g Ripe avocado flesh
  - 100g Coriander leaves
  - 100g Cucumber
  - 10g Fresh lemon juice
  - Seasoning (to taste)

**Method**
1. To make the korma, mix the ginger and garlic in the oil over a moderate heat for 2 minutes.
2. Add the vegetables and continue cooking for 5 minutes.
3. Add the coconut milk and double cream and continue cooking until the vegetables are soft.
4. Stir in the almonds and reduce until thickened and season to taste.
5. Complete Level 5 texture checks.
6. For the mushroom and tomato dahl, put the lentils, mushrooms, Shawarma Tikka Paste and Homepride Tomato and Basil Sauce in a pan and bring to a simmer.
7. Cook for 15 minutes over a medium heat, stirring regularly, until the mixture thickens.
8. Stir in the wine and the sugar and season to taste.
9. Complete Level 5 texture checks.
10. For the cucumber and coriander salad, blend all the ingredients together until smooth, then season to taste.

### Minted Lamb Kasserole

**Ingredients**
- For the minted lamb:
  - 1kg Lamb (finely minced)
  - 100g Homepride Tomato Korma
  - 100g Grated carrots
  - 15g Bisto Chicken Bouillon
  - 500ml Bisto Gluten Free Gravy
  - Salt (to taste)
  - 10g Mint sauce
  - Salt and pepper (to taste)
  - Food thickener (if required)
- For the pea smash:
  - 400ml Water
  - 400g Peas
  - 40g Butter
  - 60g Smash (dry)
  - Salt and pepper (to taste)

**Method**
1. Heat the oil in a pan and fry the lamb mince for 4-5 minutes until lightly coloured.
2. Add the onion, carrot, white wine and rosemary then reduce the liquid by half.
3. Add the Bisto Chicken Bouillon, Bisto Gluten Free Gravy and mint sauce and cook gently for 45 minutes until the lamb is tender.
4. Season to taste and thicken with food thickener (if required).
5. Complete Level 5 texture checks.

**Serving suggestion:**
Serve with thick yoghurt.

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**Ingredients**
- For the pea smash:
  - 250ml Water
  - 400g Peas
  - 40g Butter
  - 60g Smash (dry)
  - Salt and pepper (to taste)

**Method**
1. For the pea smash, put the water in a pan and bring to the boil.
2. Add the peas and cook for 3 minutes.
3. Transfer the peas and water to a food processor and blend to a smooth purée with the butter.
4. Pour into a bowl and whisk in the dry smash until fully combined.
5. Season to taste.

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**Allergens:**
- Milk, Gluten, Celery, Wheat, Barley, Sulphur Dioxide

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**Procedure Information**
- **Texture Checks:**
  - Level 3: Broccoli
  - Level 4: Red lentils
  - Level 5: Grated carrots
  - Level 6: All other ingredients

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**Serving suggestion:**
Serve with any seasonal vegetables.
The below recipes have been developed with teatime in mind, something savoury to provide patients with essential nutrients whilst allowing them to dine with their fellow residents with confidence, ensuring they look forward to their last meal of the day.

### Mac & Cheese Bolognese

**Ingredients**
- 15ml Olive oil
- 500g Minced beef
- 150g Onion (diced)
- 150g Carrot (chopped)
- 500g Minced beef
- 15ml Olive oil
- 75g Mayonnaise
- 15g Fresh lemon juice
- Food thickener (if required)
- 5g Curry powder
- 5g Turmeric powder
- Salt (to taste)

**Method**
1. Pre-heat the oven to 150˚C.
2. On the stove heat the oil in a heavy based casserole dish. Add the beef mince, sweat for 2 minutes.
3. Add the onion and carrot then cook until brown.
4. Add the minced beef, add the beef stock, korma paste for 2 minutes.
5. Add the raisins and Bisto Chicken Bouillon and simmer for 20 minutes or until the chicken is cooked through.
6. To make the apricot purée, blend the apricots to a fine purée with the lemon and the sugar.
7. Heat the purée to a boil. Add the Sosa Gelcrem Hot, and blend.
8. Allow to rest for 5 minutes, and then blend again.
9. Check the texture and season if required.
10. To make the rocket and avocado purée, blend all of the ingredients together until smooth.
11. Taste and season and complete Level 4 texture checks.

**Serving suggestion:**
Serve with smooth fruit chutney such as mango or tomato or try substituting the stilton with your favourite cheese.

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### Coronation Chicken Salad

**Ingredients**
- 10g Sharwood’s Korma Paste
- 450g Chicken breast
- 150g Raisins
- 300g Cranned apricots (drained)
- 50g Raisins
- 450g Chicken breast
- 200g Bisto Chicken Bouillon
- 75g Mayonnaise
- 15g Fresh lemon juice
- Food thickener (if required)
- 5g Curry powder
- 5g Turmeric powder
- Salt (to taste)

**Method**
1. Blend all the ingredients together in a blender until smooth.
2. Bring to the boil and pour into ramakin dishes and leave to set.
3. Once set complete Level 4 texture checks.

**Serving suggestion:**
Serve with bread and butter pudding. It can be easily adapted for Level 6, cut the bread into appropriate size pieces, instead of using breadcrumbs.

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### Savoury Bread Pudding

**Ingredients**
- 700g Milk
- 300g Cream
- 175g Fresh breadcrumbs (made with McDougalls Soft Bap Mix)
- 3g Sosa Pr O-Pannacotta

**Method**
1. Blend all the ingredients together in a blender until smooth.
2. Bring to the boil and pour into ramekin dishes and allow to set.
3. Once set complete Level 4 texture checks.

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### For the curried chicken

- 10g Sharwood’s Korma Paste
- 450g Chicken breast
- 150g Raisins
- 200g Bisto Chicken Bouillon
- 75g Mayonnaise
- 15g Fresh lemon juice
- Food thickener (if required)
- 5g Curry powder
- 5g Turmeric powder
- Salt (to taste)

**Method**
1. Heat the Sharwood’s Korma Paste with the curry and turmeric powder on a pan over a medium heat.
2. Fry the chicken in the paste for 2 minutes.
3. Add the raisins and Bisto Chicken Bouillon and simmer for 20 minutes or until the chicken is cooked through.
4. Transfer to a blender and process until smooth. Stir in the mayonnaise, lemon juice and thickener (if required).
5. Season to taste.

**Serving suggestion:**
Pipe the bolognese purée into a serving dish then pipe small arc shapes on top to give the effect of macaroni.

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### For the apricot purée

- 400g Ripe apricots flesh
- 100g Rocket
- 100g Cucumber
- 10g Fresh lemon juice
- Salt and pepper (to taste)

**Method**
1. To make the apricot purée, blend the apricots to a fine purée with the lemon and the sugar.
2. Heat the purée to a boil. Add the Sosa Gelcrem Hot, and blend.
3. Allow to rest for 5 minutes, and then blend again.
4. Check the texture and season if required.
5. To make the rocket and avocado purée, blend all of the ingredients together until smooth.
6. Taste and season and complete Level 4 texture checks.

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### For the mac and cheese

- 1kg Homepride
- •
- 150g Carrot (chopped)
- 150g Onion (diced)
- 500g Minced beef
- 15ml Olive oil

**Method**
1. On the stove heat the oil in a heavy based casserole dish. Add the Homepride Bolognese Sauce and cook in the oven for 1 hour or until the meat has softened and the sauce has thickened.
2. Check the seasoning and blend to a smooth purée before completing Level 4 texture checks (if needed, a food thickener can be added at this stage).
3. For the mac and cheese, blend all ingredients together in a blender until smooth.
4. Season to taste and complete Level 4 texture checks.

**Serving suggestion:**
Pipe the bolognese purée into a serving dish then pipe small arc shapes on top to give the effect of macaroni.
Delightful desserts

Everyone enjoys a treat! These dessert recipes provide dysphagia sufferers with the opportunity to enjoy something sweet after their lunchtime or evening meal which is quick and easy to prepare for caterers.

Passionfruit Pavlova

The passion gel is quite sour which will contrast the super sweet meringue.

Ingredients

For the white meringue
- 10g McDougalls Meringue Mix
- 70ml Water
- 140g Sugar
- 110ml Cream

For the caramelised sugar
- 1kg Sugar

For the caramelised meringue
- 10g McDougalls Meringue Mix
- 70ml Water
- 140g Caramelised sugar
- 110ml Cream

For the Ambrosia cream
- 200ml Cream
- 150ml Ambrosia Custard

For the passion fruit gel
- 225g Passion fruit puree
- 50g Sugar
- 25g Sosa Gelcrem Cold

Method

1. Using a mixer, mix together the McDougalls Meringue Mix and water until fully dissolved.
2. Add the sugar in a steady stream whilst whisking on high speed. Continue whisking until a full peak consistency is obtained.
3. In a separate bowl whip the cream until soft peaks are formed.
4. Fold the two mixtures together and complete Level 4 texture checks.
5. To make the caramelised sugar, heat the sugar in a pan on the stove.
6. Take the sugar to a dark caramel then immediately remove from heat and pour into a metal tray to cool.
7. When cold, break the caramel up into pieces and transfer to a blender, blend to a powder and put to one side.
8. For the caramelised meringue, using a mixer, mix together the McDougalls Meringue Mix and water until dissolved.
9. Add the caramelised sugar in a steady stream whilst whisking on high speed.
10. Continue whisking until a full peak consistency is obtained.
11. In a separate bowl whip the cream until soft peaks are formed.
12. Fold the two mixtures together and complete Level 4 texture checks.
13. To make the Ambrosia cream, combine the cream and Ambrosia Custard and whip together until thick.
15. To make the passion fruit gel, blend all ingredients together until fully incorporated.

Serving suggestion:

Layer up on a dessert plate using piping bags with nozzles.

Bird’s Lemon Ice Cream

Ice cream is not normally suitable for people with dysphagia as it will change consistency as it melts in the mouth. If ice cream is fluid there is a greater risk of aspiration. This recipe is designed to combat this. The ice cream does not melt and will remain a mousse consistency even once defrosted.

Ingredients

• 150g Bird's Ice Cream Mix
• 150g Full fat milk
• 300g Lemon curd

Method

1. Combine the Bird's Ice Cream Mix and milk in a bowl.
2. Use an electric whisk until mixture has thickened and doubled in volume, this should take about 5 minutes.
3. Fold the lemon curd and Bird's Ice Cream Mix together until combined.
4. Transfer to a container and deep freeze.
5. Complete Level 4 texture checks before serving.

Apricot Crumble

Ingredients

• 150g Tinned apricot (drained)
• 200g Caster sugar
• 35g Sosa Gelcrem Hot

Method

For the apricot filling
1. Blend the drained tinned apricot and sugar together.
2. Bring the purée to the boil and blend in the Sosa Gelcrem Hot.
3. Leave to stand for 5 minutes and then blend again.

For the crumble topping
1. Cook the McDougalls Crumble Mix until golden brown.
2. Blend the cooked crumble to a very fine crumb.
3. Add the Ambrosia Custard and blend until smooth.

Serving suggestion:

Serve with Ambrosia Cream. Variations of this dish can be made with other fruits such as apple, rhubarb, berries and pear. Some fruits (without seeds) could be cut and softened instead of puréeing to make suitable for Levels 5 and 6.
**Snacking**

Snacking is a great way to ensure your patients and residents are satisfied throughout the day. These simple and creative recipes provide them with something exciting to keep them going.

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**Tomato Truffles**

**Allergens:** Milk, Sesame

**Ingredients**
- Tomato purée
- Homepride Tomato and Basil Sauce
- Sosa Vegetal Setting Powder
- Water
- Sosa Instangel
- Tomato purée
- Milk

**Method**
1. To create the tomato truffles, blend together the milk, tomato purée, Homepride Tomato and Basil Sauce, Sosa Vegetal Setting Powder and salt for 1 minute.
2. In a separate bowl whip the cream until soft peaks are formed. Fold the cream and tomato mix together.
3. Place in a piping bag and in the fridge for 30 minutes.
4. Pipe tomato mousse on to squares
5. Place in a piping bag and in the freezer for 30 minutes.
6. Strain through a muslin cloth to remove all particles and create tomato water (after straining you remove all particles and create a tomato shape but then ensure the cling film is loosened so the mousse can easily be removed once frozen.
7. Freeze tomato mousse.
8. Once frozen remove from cling film and place cocktail sticks ready for dipping in tomato glaze (keep in the freezer and dip from frozen).
9. To create the tomato jelly glaze, whisk together the water, Homepride Tomato and Basil Sauce (sieved and smooth) and salt for 1 minute.
10. Add the Sosa Gelcr (sieved) and salt for 1 minute.
11. You will need to have everything ready and work quickly when dipping the tomato mousse in the glaze as it will set very quickly.
12. The tomato glaze should give a thin coverage on the mousse. It should be thin enough that you can squish with your tongue force alone and swallow as a single bolus. If the tomato glaze fractures into small pieces it will not be suitable for Level 4.
13. Complete Level 4 texture checks.

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**Smoked Salmon and Cucumber**

**Allergens:** Allergens: Milk, egg, gluten, soya, wheat

**Ingredients**
- Smoked salmon
- Horseradish sauce
- Bisto Béchamel Sauce
- Bisto Béchamel Sauce (made up per 175ml Bisto
- Sosa Gelcr
- 10g Sosa Gel
- Cold
- Juice of 1 lemon
- Salt and cayenne pepper
- Lemon

**Method**
1. For the salmon mousse, blend together the salmon, Bisto Béchamel Sauce and horseradish sauce in a food processor until smooth. If needed, push through a sieve to remove particles.
2. Season the mixture with salt, cayenne pepper and lemon juice.
3. Add the Sosa Gelcr to a fine mesh and mix well.
4. Leave to stand and thicken before completing Level 4 texture checks.
5. To make the cucumber juice, remove the seeds with a spoon and roughly chop the cucumber. Freeze before use (can be done in advance).
6. Blend the cucumber to extract the juice and pass through a sieve to remove any particles.
7. For the cucumber gel, blend all ingredients together until fully combined.
8. Allow to stand for a few minutes to thicken, and then blend again to give a glossy finish to the gel.

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**Chocolate & Baileys Cupcakes**

**Allergens:** Milk, egg, gluten, soya, wheat

**Ingredients**
- Baileys
- McDougalls Chocolate Sponge Mix
- Baileys
- Ambr
- Double cream
- Ambrosia Custard
- Baileys

**Method**
1. Blend the cooked McDougalls Chocolate Sponge Mix to a fine crumb.
2. Add the Ambrosia Custard and Baileys and blend to a smooth purée.
3. Complete Level 4 texture checks.
4. To make the icing, combine the double cream, Ambrosia Custard and Baileys.
5. Whip together until thick.
6. Complete Level 4 texture checks.

**Serving suggestion:**
Serve in cupcake cases with a spoon.
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