Supporting good nutrition in mental health: an introduction to the NEMO/MHIG website


A training resource for dietitians to introduce this website to colleagues

Reviewed December 2014, Review December 2016
Good nutrition has a key role in physical and mental health

Unfortunately, not all mental health services are staffed with enough dietitians to support optimal nutrition care

A 2007 project by dietitians at the Royal Brisbane and Women's Hospital's Inner North Brisbane Mental Health Service capitalised on the unique working relationship and communication lines that exists between mental health service case managers and their clients to fill this gap
A web-based resource was developed

- informed by home visits, work-shadowing, focus groups with mental health case managers, a literature review and professional expertise
- contained 'action-based' resources

Resources were:

- designed to support the delivery of basic nutrition care
- not designed to replace specialised nutrition and dietetic services or to be handouts for patients
- directed/informed basic nutrition education by case managers
- provided the 'who' and 'how' for more specialised referrals

In 2009-10, this resource underwent a rigorous National endorsement process through

- Queensland Health’s NEMO mental health team with
- DAA’s mental health interest group
the web-based resource


1. This training PowerPoint can be found here
2. Find the main resource here
3. If you know which resource you want click here
4. Supporting literature is here
the web-based resource: NSAPs

Let’s work through three examples to see how you might use this resource…
worked example - 1

Situation: You’ve noticed over subsequent visits with a client that their clothes are getting baggier.

Scan through the ‘what you might see’ list to see if what you’ve noticed is there...

- Your patient eating a lot of takeaway
- Your patient not eating much at all
- Your patient gaining weight very quickly
- Your patient having no food in their cupboard or fridge
- Your patient not having anything to cook meals on or with (i.e. no stove, microwave, no pots and pans etc.)
- Your patient losing weight very quickly
- Your patient’s clothes being baggier than usual
- Your patient complaining of sore mouth and/or teeth
- Your patient drinking excess cola, coffee or energy drinks
- Your patients relying on one or two types of food (examples could be milk; pies; soft drink; alcohol; biscuits; bread)
- Your patient having nowhere to store food
- Your patient leaving plates lying around with food scraps on them
- Your patient having lots of junk food in their cupboard and/or empty boxes of processed food lying around
- Other general nutrition issues

Click on the hyperlink
Following the hyperlink brings you to a page with two potentially useful resources. Review them both to inform further discussion and steps to take with your client.

(Note to dietitian: print and bring both resources to training session for review)

If you choose the wrong one, just click the back arrow.

Each page links also back to the main page.
Situation: Your client has changed to antipsychotic medications and you notice them starting to gain weight quickly. Scan through the ‘what you might see’ list to see if what you’ve noticed is there…

- Your patient eating a lot of takeaway
- Your patient not eating much at all
- Your patient gaining weight very quickly
- Your patient having no food in their cupboard or fridge
- Your patient not having anything to cook meals on or with (i.e. no stove, microwave, no pots and pans etc).
- Your patient losing weight very quickly
- Your patient’s clothes being baggier than usual
- Your patient complaining of sore mouth and/or teeth
- Your patient drinking excess cola, coffee or energy drinks
- Your patients relying on one or two types of food (examples could be milk; pies; soft drink; alcohol; biscuits; bread)
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- Your patient having lots of junk food in their cupboard and/or empty boxes of processed food lying around
- Other general nutrition issues

Click on the hyperlink
You scan through the list and in this case you decide, knowing the side effects of this medication, that your client may potentially have an increased appetite/reduced satiety. Review this resource for some useful tips. *(Note to dietitian: print and bring resource to training session for review)*
Situation: You’re not quite sure quite where your client is ‘at’ with their diet, but you feel there might be ‘room for improvement’. Scan through the ‘what you might see’ list to see if what you’ve noticed is there…

- Your patient eating a lot of takeaway
- Your patient not eating much at all
- Your patient gaining weight very quickly
- Your patient having no food in their cupboard or fridge
- Your patient not having anything to cook meals on or with (i.e. no stove, microwave, no pots and pans etc)
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Click on the hyperlink
A more general sheet may highlight areas you can broach, or you could try a basic nutrition assessment.
Follow the steps on the action plan…

Step 1. Starting from the bottom of the diagram below, ask your patient how many serves a day they eat from this row (breads/cereals). Write the number in the box to the right hand side. Not sure about serve sizes? See the shaded box.

Step 2. Work up the diagram, row by row, writing in your patient’s answer in the space provided.

Step 3. Compare their answers with the recommended serves from each row.

Step 4. Advise on ways to increase or decrease foods for a more balanced diet. If your patient is on a budget, refer to “Healthy Shopping on a Budget” for more information.

What’s a standard serve? Here are some examples…

- **Grain (cereal) foods**: 1 slice bread, ½ cup cooked pasta/rice/noodles, 2/3 cup cereal, 3 crispbreads, 1 crumpet
- **Vegetables**: 1 cup salad, ½ cup cooked vegetables, ½ medium potato, ½ cup sweet corn, ½ cup beans, peas or lentils
- **Fruit**: 1 piece e.g. apple, banana or orange; 2 small pieces e.g. kiwi fruit or apricots; ½ glass juice; 1 cup diced/canned fruit
- **Milk and alternatives**: 1 cup (250ml); 1 tub yoghurt (200g); 2 slices cheese (40g); 1 cup (250ml) soy/rice milk, calcium fortified
- **Lean meat and alternatives**: 65g lean red meat; 80g lean poultry; 100g fish; 2 eggs; 1 cup cooked legumes; 30g nuts

**Extras**: 1 Tbsp butter/margarine; 1 slice of plain cake/small cake-type muffin (40g); 1 Tbsp honey/jam; 2-3 sweet plain biscuits; 2 scoops ice-cream; Half a chocolate bar (25g); 30g potato chips; 1/2 can soft drink; ½ meat pie; 12 hot chips

<table>
<thead>
<tr>
<th>Patient’s diet</th>
<th>Goal Serves/day</th>
<th>Food group</th>
</tr>
</thead>
<tbody>
<tr>
<td>Limit</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Men: 3 serves</td>
<td>Lean meat, poultry, fish, eggs, tofu, nuts, seeds, legumes, beans</td>
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<tr>
<td></td>
<td>Women: 2.5 serves</td>
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</tr>
<tr>
<td></td>
<td>Men: 2.5 serves</td>
<td>Milk and alternatives, mostly reduced fat</td>
</tr>
<tr>
<td></td>
<td>Women: 2.5 serves</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Men: 2 serves</td>
<td>Fruit</td>
</tr>
<tr>
<td></td>
<td>Women: 2 serves</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Men: 6 serves</td>
<td>Vegetables and legumes/beans</td>
</tr>
<tr>
<td></td>
<td>Women: 6 serves</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Men: 6 serves</td>
<td>Grain (cereal) foods, mostly wholegrain and/or high fibre cereal</td>
</tr>
<tr>
<td></td>
<td>Women: 6 serves</td>
<td></td>
</tr>
</tbody>
</table>

* Serves per day for men and women aged 19-50. For further information go to [www.eatforhealth.gov.au](http://www.eatforhealth.gov.au)
“I know the resource I need”


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“I know the resource I need”

Following this hyperlink takes you to the full list of Nutrition Support Action Plans (NSAPs) and a number of patient handouts. Select the one you want from this list.
supporting resources

Background journal article:

DAA Mental Health interest group

In DAA’s DINER resource ([http://daa.asn.au/members/diner/](http://daa.asn.au/members/diner/)), search ‘MHANDi’ Mental Health And Nutrition and Dietetics Information

Find a dietitian (APD):
acknowledgements

• Royal Brisbane and Women’s Hospital
  – Department of Nutrition and Dietetics
  – Inner North Brisbane Mental Health Service

• NEMO mental health group

• DAA Mental Health Interest Group committee

• DAA MHIG members