

## **Berkshire Eating Disorders Service (BEDS)**

- The BEDS team may be involved to help you with your child's eating difficulties after discharge. Please ask for their leaflet.

## **Discharge**

- Discharge planning is normally considered once the young person is medically stable and is managing their meal plan to the required stage. This is usually at least the Stage 4 meal plan.
- Once your child is medically stable, we will start to hand this supervision back to you as parents / guardians, ready for going home. You can ask for support from the nurses if you find this challenging.
- This will be in liaison with the medical team on the ward and the community team(s), which may include the CAMHS or BEDS teams, who will follow up and provide support when your child leaves hospital.

## **Useful information and support**

Resources for young people with an eating disorder, their parents and families include:

[www.edauk.com](http://www.edauk.com)

[www.youngminds.org.uk](http://www.youngminds.org.uk)

[www.b-eat.co.uk](http://www.b-eat.co.uk)

If you have any further questions, do not hesitate to talk to any member of staff. We are here to help.

To find out more about our Trust visit  
[www.royalberkshire.nhs.uk](http://www.royalberkshire.nhs.uk)

**Please ask if you need this information in another language or format.**

RBFT Lion & Dolphin Ward, April 2024  
Next review due: April 2026



# **What to expect when your child is admitted to Lion and Dolphin Ward with an eating disorder / food refusal**

## **Information for parents and carers**

---

## **This leaflet aims to help you understand the process when your child is admitted to hospital because of an eating disorder.**

---

### **Admission**

On the paediatric ward there are number of steps that are followed:

- Your child will have an initial set of blood tests (normally in the Emergency Department – A&E). This will be followed by repeat tests every 12 hours for the first 48 hours, and then every 24 hours after starting on a feeding plan. The tests are done to monitor levels of electrolytes and salts in your child's body to ensure they do not change too quickly.
- A set of observations will be done every four hours, including heart rate, temperature, respiratory rate and blood pressure, sometimes lying and standing. If your child has a low heart rate, they will be attached to a heart monitor so we can monitor them; strict bed rest will be started including using a wheelchair to transfer to the toilet etc.
- The medical team will decide when strict bed rest can stop once their observations are stable.
- Your child will be started on a 10-day course of vitamin supplements to meet the requirements needed for their body function.

### **What will happen on the ward?**

- Your child will be nursed in a ward bed, not in a cubicle, with the curtains open for close observation.
- Your child's weight will be measured daily, on waking and after passing urine. This will be done with your child in underwear and a hospital gown with your child's back to the scale. This is known as a 'blind weight', as the weight results will not be shown or given to the child.
- Your child will not be allowed to the toilet or bathroom for 60 minutes after mealtimes, and when they go, ward staff will accompany them. This includes when your child goes to shower.
- When needing the toilet or shower, a wheelchair will be used to transfer until bed rest is no longer required.
- Your child will not be allowed to leave the ward unaccompanied (even to other parts of the hospital) during their admission.

### **Feeding plan**

- A referral will be made to a dietitian, who will contact you regarding meal plans.
- Your child will get a copy of the meal plans each day, which has three options for lunch, and three for dinner.
- A member of ward staff will observe meal times and snacks
- Your child will need to finish all foods and drink provided. No leftovers are permitted.

- All food is to be finished in 30 minutes for main meals and 15 minutes for snacks. If your child does not meet this requirement, they will be given a meal-replacement supplement drink. Food should be encouraged as the best choice for all snacks and meals.
- If the daily blood test results are within normal range, then your child will move on to the next stage of their meal plans with different food options.
- Staff will be there to support your child during and after mealtimes. We have a play team who can offer colouring, drawing, films, puzzles and much more, for distraction.
- Nasogastric tube (NGT) feeding (tube feeding via the nose) will be necessary after 24 hours if your child has **not** complied with the prescribed meal plan. The tube will be placed twice a day to give the meal replacement drink equivalent for food not eaten.
- If your child refuses an NGT or NGT feeds, a multidisciplinary team meeting will be held with appropriate health care professionals.
- Restraint may be used after very careful consideration and multi-disciplinary team meetings if they are medically at risk and refuse access to the NGT / passing the NGT.