

# DINING SERVICES POLICIES AND PROCEDURES FOR LONG-TERM CARE COMMUNITIES

## TABLE OF CONTENTS

|  | Page    |
|--|---------|
| <b>CHAPTER I – PURPOSE AND ORGANIZATION</b>        |         |
| Purpose philosophy and scope .....                 | I       |
| Company organizational chart .....                 | I-A-1   |
| Facility organizational chart .....                | I-A-2   |
| Dietary organizational chart .....                 | I-A-3   |
| Communication - Contact list – dietary staff ..... | I-B-1   |
| Communication - Contact list – vendors .....       | I-B-2   |
| Department communication .....                     | I-B-3   |
| Employee schedules .....                           | I-B-4   |
| <br><b>CHAPTER II – EMPLOYEE MANAGEMENT</b>        |         |
| Department communication and meetings.....         | II-A-1  |
| Job descriptions .....                             | II-A-2  |
| Dietary Manager (DM) .....                         | II-A-3  |
| Cook .....   | II-A-4  |
| Dietary Aide .....                                 | II-A-5  |
| Dietetic Technician, Registered (DTR).....         | II-A-6  |
| Registered Dietitian Nutritionist (RDN).....       | II-A-7  |
| <br><b>PERSONNEL ADMINISTRATION</b>                |         |
| Work schedules and task assignments .....          | II-B    |
| AM Cook task assignments (sample) .....            | II-B-1  |
| PM Cook task assignments (sample) .....            | II-B-2  |
| AM Diet Aide task assignments (sample) .....       | II-B-3  |
| PM Diet Aide task assignments (sample).....        | II-B-4  |
| Employee evaluation .....                          | II-C    |
| Health and safety .....                            | II-C-1  |
| Employee Health and Personal Hygiene Handbook..... | II-C-2  |
| Employee orientation and training .....            | II-C-3  |
| <br><b>CHAPTER III – BUDGETS &amp; INVENTORY</b>   |         |
| Budgeting and accounting.....                      | III-A   |
| Food budget percentage wheel .....                 | III-A-1 |
| Accounting procedures.....                         | III-A-2 |
| Purchase records .....                             | III-A-3 |

# DINING SERVICES POLICIES AND PROCEDURES FOR LONG-TERM CARE COMMUNITIES

## TABLE OF CONTENTS

### CHAPTER III – BUDGETS & INVENTORY (continued)

|  |          |
|--|----------|
| Record of invoices received .....                                    | III-A-4  |
| Records of invoices received (blank template).....                   | II-A-4   |
| Expense spend-down .....   | III-A-5  |
| General ledger distribution .....                                    | III-A-6  |
| Food and supply monthly/weekly accounting summary (cost report) .... | III-A-7  |
| Non-resident food events – guest meals .....                         | III-A-8  |
| Non-resident food events – activities and special functions .....    | III-A-9  |
| Non-resident food events – facilities selling employee meals .....   | III-A-10 |
| Non-resident meals and special functions .....                       | III-A-11 |
| Ordering food and supplies .....                                     | III-B    |
| Meal service items .....   | III-B-1  |
| Receiving .....  | III-C    |
| Damaged goods .....  | III-C-1  |
| Resolving vendor grievances .....                                    | III-C-2  |
| Storage .....  | III-D    |

### CHAPTER IV – FOOD PRODUCTION MANAGEMENT

|  |        |
|--|--------|
| Cycle menus .....                                      | IV-A   |
| Menu production sheet (sample).....                    | IV-A-1 |
| Meal replacement and food groups substitution .....    | IV-A-2 |
| Alternate menu selection .....                         | IV-A-3 |
| Menu planning for nutritional adequacy .....           | IV-A-4 |
| Meal and nourishment service and time of service ..... | IV-A-5 |
| Snacks, nourishments and supplements.....              | IV-A-6 |
| Always available meal alternates and substitutes ..... | IV-A-7 |
| Mechanically altered foods .....                       | IV-A-8 |
| Deviations from the regular portions .....             | IV-A-9 |
| Recipes and recipe manual .....                        | IV-B   |
| Portion control .....                                  | IV-B-1 |
| Portion basics at a glance .....                       | IV-B-2 |
| Common scoop sizes .....                               | IV-B-3 |
| Food preparation .....                                 | IV-C   |
| Diet census .....                                      | IV-C-1 |
| Diet census log .....                                  | IV-C-2 |
| Production schedules and instructions .....            | IV-C-3 |

# DINING SERVICES POLICIES AND PROCEDURES FOR LONG-TERM CARE COMMUNITIES

## TABLE OF CONTENTS

|   |         |
|---|---------|
| <b>CHAPTER IV – FOOD PRODUCTION MANAGEMENT (continued)</b>          |         |
| Detailed daily production sheet.....                                | IV-C-4  |
| Production sheets – breakfast, lunch & dinner .....                 | IV-C-4  |
| Food handling .....   | IV-D    |
| Cooling HACCP.....  | IV-D-1  |
| Food temperature cooling log.....                                   | IV-D-2  |
| HACCP logs / flowcharts .....                                       | IV-D-3  |
| <br><b>CHAPTER V – DINING PROGRAMS</b>                              |         |
| Meal service and set-up .....                                       | V-A-1   |
| Setting up trays and tray line service .....                        | V-A-2   |
| Tray sequence for meal service .....                                | V-A-3   |
| Tray set-up .....   | V-A-4   |
| Table set-up .....  | V-A-5   |
| Assistive devices and equipment .....                               | V-A-6   |
| Dining program guidelines .....                                     | V-B     |
| Types of dining programs .....                                      | V-B-1   |
| Family and social dining.....                                       | V-B-2   |
| Recording food intake .....   | V-C-1   |
| <br><b>CHAPTER VI – NUTRITIONAL CARE MANAGEMENT</b>                 |         |
| Weight variance assessment and intervention (blank).....            | VI-A    |
| Medical nutrition therapy (MNT) assessment process .....            | VI-A-1  |
| Nutritional assessment process flowchart .....                      | VI-A-2  |
| Nutritional screening and data collection forms .....               | VI-A-3  |
| Nutritional screening and data collection forms (blank) .....       | VI-A-4  |
| Nutritional risk factors .....                                      | VI-A-5  |
| Nutritional risk checklist – ranking scale .....                    | VI-A-6  |
| Nutrition at Risk (NAR) Committee .....                             | VI-A-7  |
| Food preferences interview .....                                    | VI-A-8  |
| Dietary quarterly progress notes .....                              | VI-A-10 |
| Dietitian referral log .....  | VI-A-11 |
| Dehydration risk assessment .....                                   | VI-A-12 |
| Free fluids restriction .....                                       | VI-A-13 |
| Pressure sore intervention protocol .....                           | VI-A-14 |
| Weight variance assessment and intervention.....                    | VI-A-15 |
| Protocol – decreased appetite poor intake or refusal of meals ..... | VI-A-16 |

# DINING SERVICES POLICIES AND PROCEDURES FOR LONG-TERM CARE COMMUNITIES

## TABLE OF CONTENTS

### CHAPTER VI – NUTRITIONAL CARE MANAGEMENT (continued)

|  |         |
|--|---------|
| Clinical pathway – weight loss prevention flowchart .....        | VI-A-17 |
| Anthropometric system review .....                               | VI-A-18 |
| Food fortification program .....                                 | VI-A-19 |
| Supplementation decision tree for weight loss intervention ..... | VI-A-20 |
| Enteral nutrition .....  | VI-A-21 |
| Enteral audit log .....  | VI-A-22 |
| Diet manual .....  | VI-B    |
| House diets .....  | VI-B-1  |
| Diet order transmission .....                                    | VI-B-3  |
| Tray cards .....   | VI-B-4  |
| Diets and color codes used in this facility .....                | VI-B-5  |
| Hydration .....  | VI-B-6  |
| Clinical role delineation according to scope of practice .....   | VI-C-1  |
| Clinical dietitian scope of responsibility .....                 | VI-C-2  |
| Clinical dietitian & DTR orientation and training .....          | VI-C-4  |
| Registered dietitian nutritionist competency review .....        | VI-C-5  |
| RDN/DTR reference clinical guidelines .....                      | VI-C-6  |
| WVC RDN quick reference guide .....                              | VI-C-7  |
| Analysis of avoidable vs. unavoidable weight changes .....       | VI-C-8  |

### CHAPTER VII – GENERAL SANITATION

|   |          |
|---|----------|
| Sanitation standards .....                                | VII-A    |
| Cleaning schedule .....                                   | VII-A-1  |
| Sanitation checklist .....                                | VII-A-2  |
| Temperature records – cooking .....                       | VII-A-3  |
| Temperature records – deliveries .....                    | VII-A-4  |
| Temperature records – equipment .....                     | VII-A-5  |
| Temperature records – cooking & cooling log .....         | VII-A-6  |
| Food thermometer calibration .....                        | VII-A-7  |
| Thermometer calibration record .....                      | VII-A-9  |
| Handwashing .....   | VII-A-10 |
| General sanitation .....                                  | VII-B    |
| Environmental safety – safety & accident prevention ..... | VII-B-1  |
| Cabinets and drawers .....                                | VII-B-2  |
| Can opener and base .....                                 | VII-B-3  |
| Cleaning of dining areas .....                            | VII-B-5  |
| Cleaning of floors .....                                  | VII-B-6  |

# DINING SERVICES POLICIES AND PROCEDURES FOR LONG-TERM CARE COMMUNITIES

## TABLE OF CONTENTS

|   |          |
|---|----------|
| <b>CHAPTER VII – GENERAL SANITATION (continued)</b>         |          |
| Coffee brewing equipment .....                              | VII-B-7  |
| Monitoring dishwashing machines .....                       | VII-B-8  |
| General dishroom sanitation .....                           | VII-B-9  |
| Machine dishwashing, drying and storage .....               | VII-B-10 |
| Manual dishwashing .....                                    | VII-B-11 |
| Juice dispenser .....                                       | VII-B-12 |
| Dry storage areas .....                                     | VII-B-13 |
| Electrical food machines .....                              | VII-B-14 |
| Garbage and trash disposal .....                            | VII-B-17 |
| Hoods, vents and filters .....                              | VII-B-18 |
| Hot food tables, tray carts and shelves .....               | VII-B-19 |
| Cleaning of ice machines .....                              | VII-B-21 |
| Ingredient bins .....                                       | VII-B-22 |
| Storage of cleaning supplies and janitor’s closet .....     | VII-B-23 |
| Mops and mop buckets .....                                  | VII-B-24 |
| Pest control and monitoring .....                           | VII-B-25 |
| Ranges and ovens .....                                      | VII-B-26 |
| Refrigerator and freezer – dietary .....                    | VII-B-27 |
| Refrigerators in resident rooms .....                       | VII-B-28 |
| Sanitizing cloths in red buckets .....                      | VII-B-29 |
| Shelves, countertops and other surfaces .....               | VII-B-30 |
| Steamers and steam kettles .....                            | VII-B-31 |
| Walls and ceilings .....                                    | VII-B-32 |
| Employee health and personal hygiene handbook .....         | VII-C    |
| <br><b>CHAPTER VIII – DISASTER AND EMERGENCY MANAGEMENT</b> |          |
| Disaster and Emergency Management .....                     | VIII-A   |
| Disaster and mass casualty food service .....               | VIII-A-1 |
| Emergency menu .....  | VIII-A-2 |
| Suggested inventory guide .....                             | VIII-A-3 |
| Serving sizes to provide approximately 2 oz. protein .....  | VIII-A-4 |
| Emergency water plan .....                                  | VIII-A-5 |
| Water heater instructions .....                             | VIII-A-6 |
| Emergency food delivery list .....                          | VIII-A-7 |
| Disaster and emergency checklist .....                      | VIII-A-8 |
| Emergency disinfection drinking water .....                 | VIII-A-9 |

# DINING SERVICES POLICIES AND PROCEDURES FOR LONG-TERM CARE COMMUNITIES

## TABLE OF CONTENTS

### CHAPTER VIII – DISASTER AND EMERGENCY MANAGEMENT (continued)

|  |          |
|--|----------|
| Plans for specific disasters .....               | VIII-B   |
| Earthquake.....                                  | VIII-B-1 |
| Explosion – internal or external .....           | VIII-B-2 |
| Fire – internal or external .....                | VIII-B-3 |
| Extreme weather conditions including floods..... | VIII-B-4 |
| Hot weather hydration precautions .....          | VIII-B-5 |
| Checklist for extreme heat .....                 | VIII-B-6 |
| Extreme weather .....                            | VIII-B-  |

### CHAPTER IX – DIETARY DEPARTMENT INSERVICE LESSON PLANS

|   |         |
|---|---------|
| Food storage .....  | IX-A-1  |
| Maintaining hydration .....   | IX-A-2  |
| Meal alternate selections .....                                     | IX-A-3  |
| Sanitizing bucket – red bucket .....                                | IX-A-4  |
| Accuracy of meals – condiments for therapeutic diets .....          | IX-A-5  |
| Disaster and emergency procedures .....                             | IX-A-6  |
| Fortified food diet protocol .....                                  | IX-A-7  |
| Glove use .....   | IX-A-8  |
| Mechanically altered diets .....                                    | IX-A-9  |
| Mechanically altered diets – thin puree preparation .....           | IX-A-10 |
| Snacks and nourishments.....  | IX-A-11 |
| Cooling food .....  | IX-A-12 |
| Disaster & emergency management - This is an emergency! .....       | IX-A-13 |
| Food preparation for census, recipes, production sheet & menu ..... | IX-A-14 |
| Food preparation – meats .....                                      | IX-A-15 |
| Open refrigerated dairy and condiments storage guidelines .....     | IX-A-16 |
| Manual warewashing using 2 and 3 compartment sinks .....            | IX-A-17 |
| How to prepare and serve thickened liquids.....                     | IX-A-18 |
| Low temperature machine dishwashing .....                           | IX-A-19 |
| Portion sizes .....   | IX-A-20 |

# DINING SERVICES POLICIES AND PROCEDURES FOR LONG-TERM CARE COMMUNITIES

## TABLE OF CONTENTS

### CHAPTER X- QUALITY ASSESSMENT PROCESS

#### PROCEDURES, EVALUATION CRITERIA AND DATA COLLECTION FORMS

|  |        |
|--|--------|
| Quality Assessment and Improvement (QAPI) .....                          | X-A    |
| 12 Action Steps to QAPI .....  | X-A-1  |
| Suggestions for implementing QAPI steps .....                            | X-A-1  |
| Quality Assessment of a Meal – Acceptance and Food Intake .....          | X-A-2  |
| Tray Accuracy .....  | X-A-4  |
| Quality Assessment: Nutritional Adequacy .....                           | X-A-5  |
| Nourishment Distribution .....   | X-A-6  |
| Quality Assessment of Congregate Dining Programs .....                   | X-B-1  |
| Dining Enhancement Program Review .....                                  | X-B-2  |
| Quality Assessment of a Meal: System Analysis and Improvement Plan ..... | X-B-3  |
| Satisfaction Questionnaire .....   | X-B-4  |
| Tracking Form: Storage of Refrigerated Foods Checklist .....             | X-B-5  |
| Quality Assurance Process Improvement .....                              | X-B-6  |
| Accuracy of Fortified Food Preparation .....                             | X-B-7  |
| Resident at Risk of Unplanned Weight Loss .....                          | X-B-8  |
| Quality Assessment of a Meal at Point of Service .....                   | X-B-9  |
| CMS memorandum Summary – QAPI at a Glance .....                          | X-B-10 |

# **CHAPTER I**

## **PURPOSE AND ORGANIZATION**

### **PURPOSE PHILOSOPHY AND SCOPE**

Dining services are designed to provide the highest quality nutritional care and food service.

### **POLICY**

The Dining Services Department will provide optimal nutrition care for residents.

### **PURPOSE**

The primary purpose of the Dining Services Department is to provide wholesome, safe and appetizing food that meets the nutritional and psychosocial needs of residents in keeping with their stated wishes and the physician order in compliance with local, State and federal requirements and company standards for quality of service.

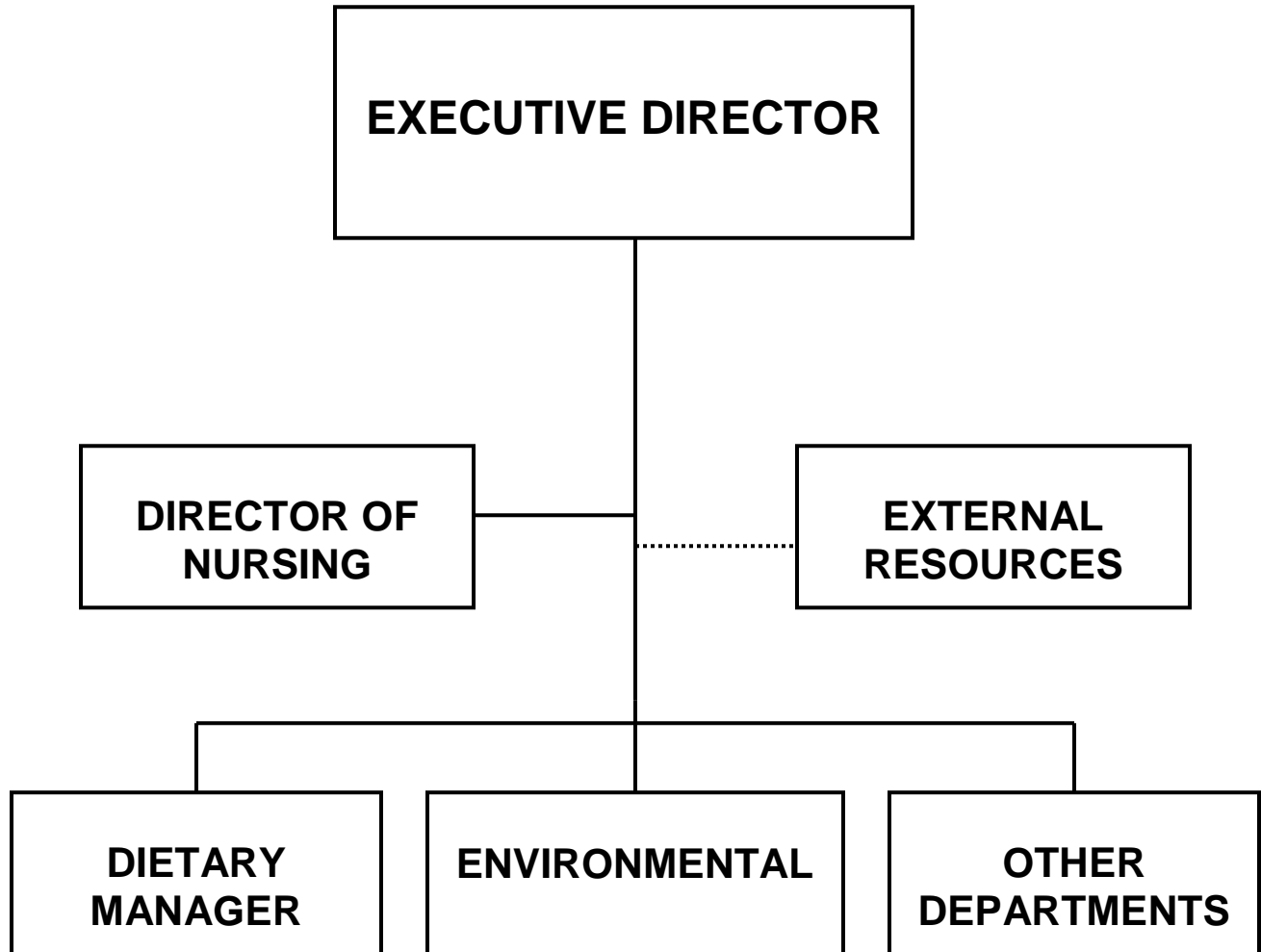
### **PHILOSOPHY**

Each resident is an individual with a personality of his/her own. The resident comes to us with their lifetime habits and unique needs and experiences. Regardless of their choices, all will be met to the best of our ability with respect to their dignity and individuality.



**CHAPTER I**  
**PURPOSE AND ORGANIZATION**  
**FACILITY ORGANIZATIONAL CHART**

*(Insert your Facility Organizational Chart)*



# **CHAPTER III**

## **BUDGETS AND INVENTORY**

### **BUDGETING AND ACCOUNTING**

#### **POLICY**

Dining Services Department will follow the budgets for labor, food, supplies, equipment and capital expenditures, as established by the company and facility leadership each fiscal year (FY).

#### **PURPOSE**

To ensure that the Dining Services Department will receive sufficient operating funds to provide for residents' nutritional needs.

#### **PROCEDURE**

- A. The Dietary Manager (DM) is responsible for maintaining the budget based on census and PPD given by the Executive Director.
- B. The required accounting systems are maintained and available for review and audit at all times.
- C. The DM is responsible for providing accounting information to the Administrator upon request and at least monthly.
- D. The Registered Dietary Nutritionist (RDN) will provide guidance and support in maintaining the budget and assist the DM as needed.

# **CHAPTER II**

## **EMPLOYEE MANAGEMENT**

### **JOB DESCRIPTION**

**POSITION TITLE:** Cook

**SUPERVISOR:** Dietary Manager (DM)

### **QUALIFICATIONS**

1. One (1) year quantity-cooking experience desired. Formal education - graduation from high school. Ability to read, write and understand English.
2. Sufficient job knowledge to plan production, know basic principles of quantity food cookery, how to use major equipment and ability to read and follow recipes, production sheets and therapeutic diets.
3. Sufficient accuracy to be precise when weighing and measuring food ingredients and portions.
4. Knowledgeable in basic standards of production and preparation of high quality foods in specified quantities.
5. Knowledgeable in basic food safety and sanitation standards to store food correctly and maintain area clean.
6. Willingness and ability to provide supervision and guidance to dietary staff in the shift assigned to keep a safe, quiet and orderly environment and serve meals on time.
7. Ability to take instructions and follow through pleasantly and competently.
8. Keep food handler card and health records current.

### **ESSENTIAL JOB FUNCTIONS**

1. Prepare regular and therapeutic food items using standardized recipes to be served at stated time. Check trays to assure resident receives proper food in proper amount.

## **CHAPTER II**

### **EMPLOYEE MANAGEMENT**

2. Prepare meat and main dishes, vegetables, soups and accompaniments for assigned meals per menu.
3. Clean and wash equipment used in cooking.
4. Keep own work area clean.
5. Equipment used: food chopper, mixer, ovens, ranges, steamer, meat slicer. Report any damaged equipment to Dietary Manager.
6. Maintain sanitation practices within regulatory and quality assurance standards.

#### **ADDITIONAL DUTIES**

1. Assist in supervising the work of the dietary personnel and is responsible when DM is absent.
2. Maintain inventory and inform DM of needed items.
3. Basic knowledge on placing food orders to perform task in the absence of DM.

#### **PHYSICAL REQUIREMENTS**

1. Frequent lifting up to fifty (50) pounds.
2. Frequent leaning, squatting and reaching.
3. Frequent standing.
4. Occasional pushing and pulling up to thirty (30) pounds.
5. Repetitive fine manipulation and grasping.

# CHAPTER II

## EMPLOYEE MANAGEMENT

I have received a copy of my Job Description and understand the responsibilities of my position.

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

Facility Representative \_\_\_\_\_ Date: \_\_\_\_\_

# **CHAPTER II**

## **PERSONNEL ADMINISTRATION**

### **WORK SCHEDULES**

#### **WORK SCHEDULES AND TASK ASSIGNMENTS**

##### **POLICY**

Work schedules will be provided to each employee.

##### **PROCEDURE**

###### **A. Work Schedules**

1. The Dietary Manager (DM), with the aid of the Registered Dietitian Nutritionist (RDN) develops specific work schedules according to detailed tasks and times as appropriate to the facility.
2. Sample work schedules and task assignments in this Manual are given for guidelines; these should be adjusted for specific tasks as appropriate to the facility.
3. A work schedule and task assignment is specific for each position and posted in a visible location in the kitchen.
4. Work schedules must be followed.
5. If there is no task assignment work schedule for a position, the DM is responsible for writing it and instructing the employee using the blank form in the next page.
6. Some tasks are performed daily, others only as needed. The form should indicate frequency, as well as recommended times that coincide with the daily schedule for each position.



# CHAPTER II

## PERSONNEL ADMINISTRATION

### TASK ASSIGNMENTS

#### PM DIET AIDE TASK ASSIGNMENTS (SAMPLE)

|                     |   |
|---------------------|---|
| 11:00 AM to 1:00 PM | Clock in. Put on clean apron and hair cover. Wash hands. Help serve AM trayline, deliver carts, and answer requests for special items.  |
| 1:00 PM to 1:15 PM  | Help AM Cook clean back kitchen. Wash all items.  |
| 1:15 PM to 2:50 PM  | Check and prepare snacks, special needs items for dinner, and prepare beverages for dinner.   |
| 2:50 PM to 3:00 PM  | Break.  |
| 3:00 PM to 4:00 PM  | Wash hands. Finish preparing for meal service. Help dish salads and desserts. Clean up area.  |
| 4:00 PM to 4:45 PM  | Assist Cook preparing any dinner items and dishing up cold and individual items. Prepare all special requests. Advance preparation and pouring for breakfast and lunch the next day.                  |
| 4:45 PM to 5:00 PM  | Set up tray line and get ready to start serving on time.  |
| 6:00 PM to 7:00 PM  | Finish tray line and clean-up. Put all items away. Finish cleaning, washing dispensing equipment and leaving breakfast items ready. Set up breakfast tray cards and if necessary tray delivery carts. |
| 7:00 PM             | Clock out. Off duty.  |

**Other duties as assigned**



# **CHAPTER II**

## **PERSONNEL ADMINISTRATION**

### **ORIENTATION AND TRAINING**

#### **EMPLOYEE ORIENTATION AND TRAINING**

##### **POLICY**

All employees will receive appropriate orientation and training upon hire to perform the required job.

##### **PROCEDURE**

1. All new employees:
  - a. Attend the required facility orientation session prior to scheduling the first day of work.
  - b. Are given department sufficient training prior to working in the kitchen, using the equipment and preparing and serving food for residents.
2. The training includes department policies and procedures.
3. The employee orientation guide and proof of skills competency is completed by each new hire, and signed by the employee upon completion, and retained in their file.
4. The Dietary Manager is responsible for training employees and may assign training with coworkers, as long as performance is closely supervised and competency level is validated.
5. All employees are expected to attend the scheduled training programs.
6. Skills competencies of employees are validated routinely through observation of work performed and work outcomes, and oral and written testing. Results are kept in the employee file, shared with the employee and the employee's supervisor, and utilized to develop performance improvement plans.

# **CHAPTER III**

## **BUDGETS AND INVENTORY**

### **PURCHASE RECORDS**

#### **POLICY**

It is the policy of this facility that purchase records will be maintained for accuracy of accounting systems and budgetary compliance.

#### **PROCEDURE**

- A. Invoices are recorded on Daily Record of Invoices Received Form and totaled weekly. The original invoice is processed and a copy will be provided to the Accounts Payable (AP) Department.
- B. A Special Functions Report Form is used to summarize purchases made by the Dietary Department for special activities, functions or events for other departments (previously approved). The total amount spent on special functions is deducted from total food cost.
  - 1. When ordering food specifically for other departments, a separate invoice may be requested from the vendor and submitted directly to AP Department for payment with the requesting department head's approval.
  - 2. If items are billed directly, do not include in the Monthly Spend-Down or Accounting for Dietary Department; segregate and document in a separate Spend-Down and Accounting Form.
- C. The Dietary Food and Supply Monthly Accounting Summary is completed by the Dietary Manager monthly and submitted to the Administrator.
- D. Copies of forms and invoices will be kept for one (1) year in the Dietary Department, or in accordance with State requirements and company policy.





# **CHAPTER III**

## **BUDGETS AND INVENTORY**

### **NON-RESIDENT FOOD EVENTS: ACTIVITIES AND SPECIAL FUNCTIONS**

#### **POLICY**

The Dining Services Department provides food items for social events to ensure that adequate supplies are available for special activities.

#### **PROCEDURE**

1. The Activity Director requests items needed for a special function at least one week in advance using the Special Functions Form.
2. The Dietary Manager reviews and orders the food, processes the invoices and completes the GL distribution as outlined in the Policy and Procedures.

# CHAPTER IV

## FOOD PRODUCTION MANAGEMENT

### MEAL REPLACEMENT AND FOOD GROUPS SUBSTITUTION

#### POLICY

A resident who refuses food served will be offered appropriate substitutes of similar nutritive value.

#### PROCEDURE

- A. A list of available substitutions is posted by the Dietary Department.
- B. When a resident refuses a food item, nursing assistants check available substitutions list and obtain resident's choice.
- C. The Dietary Manager follows up to identify food preferences and assist with choices.
- D. When possible, substitution will provide a similar nutrient value to the uneaten foods.
- E. Nursing assistants document consumption of meal replacement or food substitute on the Nursing Assistant Flow Sheets per facility policy.

| Food Refused | Appropriate Substitutes  |   |
|--------------|--|---|
| Meat, entree | Cottage cheese<br>Sliced cheese or Meat<br>Alternate Meat sandwich | Eggs<br>PB&J sandwich<br>Yogurt                                   |
| Milk         | Cottage cheese<br>Sliced cheese<br>Yogurt                          | Chocolate milk<br>Milkshake<br>Ice cream<br>Soy milk, almond milk |
| Vegetable    | Vegetable soup<br>Vegetable juice<br>Alternate vegetable           | Fruit<br>Fruit juice  |
| Fruit        | Fruit juice  |   |
| Bread        | Crackers, cookies<br>Cereal grains                                 | Tortillas, pita, rice, couscous,<br>amaranth, pasta               |
| Starch       | Bread, crackers, cookies   | Cereal, cream soups, starchy<br>vegetables                        |
| Dessert      | Ice cream, yogurt, pudding   | Fruits, gelatin desserts  |

# CHAPTER IV

## FOOD PRODUCTION MANAGEMENT

- F. Residents who do not drink milk are given the following substitutes on a daily basis to ensure that adequate protein, calcium and calories are provided:

| <b>List of Suggested Milk Substitutes</b> |                              |
|---|------------------------------|
| 1 slice American cheese                   | = ¾ cup milk                 |
| 1 cup cottage cheese                      | = 1/3 cup milk               |
| 1 cup buttermilk                          | = 1 cup milk                 |
| 1 cup yogurt                              | = 1 cup milk                 |
| 1 cup milkshake, eggnog, malt             | = 1 cup milk                 |
| 1 cup ice cream                           | = 1/3 cup milk               |
| 1 cup soy milk                            | = 1 cup milk (-1 gm protein) |
| 1 cup almond milk                         | = 1 cup milk (-4 gm protein) |

- G. The Registered Dietitian Nutritionist (RDN) evaluates residents who cannot tolerate milk (or milk products) or otherwise accept milk replacements in adequate amounts for the need of calcium, vitamin and mineral supplementation.
- H. The list of specific items added is noted in the Resident Profile (Kardex) Card and on the Tray Card.

# CHAPTER IV

## FOOD PRODUCTION MANAGEMENT

### ALWAYS AVAILABLE MEAL ALTERNATES AND SUBSTITUTES

Dear Resident: We strive to provide you with nutritious and delicious meals that meet your expectations every day. If for any reason one day you do not like our offering, please select from one of the always available menu items. Selecting from these items will guarantee a very short wait. You are welcome to request other items and they will be prepared at the end of meal service. Most items not listed will take between 30 and 45 minutes to prepare.

#### QUICK SERVICE OPTIONS

Soup of the Day

Fresh Deli Cuts Sandwich

Small Chef's Salad

Fruit Plate with Cottage Cheese or Yogurt

#### 30 - 45 MINUTES OPTIONS

Tomato, Mushroom or Vegetable Soup

Grilled Sandwich

Quesadilla

Omelet



# CHAPTER IV

## FOOD PRODUCTION MANAGEMENT

### DIET CENSUS

- A. A current diet census is maintained and posted to ensure that sufficient food is prepared.
- B. A current diet census is maintained and posted in the kitchen for easy reference by dietary staff.
- C. All residents in the facility are included in the diet census.
- D. The diet census is used when ordering food and supplies and to determine the amount of food to be prepared for each diet order daily.

# CHAPTER IV

## FOOD PRODUCTION MANAGEMENT

### FOOD HANDLING

#### POLICY

Foods will be stored, prepared, and served in a safe manner.

#### PROCEDURE

- A. Temperature Control
  - 1. Hot Food Temperatures
    - a. Potentially hazardous foods shall be heated to temperatures of 160°F or greater.
    - b. Temperatures of potentially hazardous foods shall be served at 140°F or greater.
  - 2. Cold Food Temperatures
    - a. Temperatures of potentially hazardous foods shall be maintained at 40°F or less until delivered to resident.
    - b. Potentially hazardous foods will be stored at 40°F or below until ready to use.
- B. Quality Assessment of Meals
  - 1. The Dietary Manager completes the quality assessment of a meal at least weekly for rotating meals.
  - 2. The form may also be used for time/temperature studies, as well as appearance and accuracy studies.
  - 3. The Registered Dietitian requests test trays to perform quality assessment.
  - 4. The Dietary Manager may assign another qualified staff member to perform the quality assessment.

# CHAPTER IV

## FOOD PRODUCTION MANAGEMENT

### C. Food Cooling

1. Any food item cooked or prepared hot and placed in the refrigerator or freezer to cool is monitored to ensure that it reaches an internal temperature of 41°F within four (4) hours.
2. Check temperatures hourly and record on the Food Temperature Cooling Log. At the fourth hour, if the temperature has not reached 41°F, discard the food immediately.
3. In order to ensure that the desired temperature is achieved, cut all meat into small pieces.
4. Store food in shallow pans.
5. Ice baths may be used.
6. When food is in the cooling process, it can be left uncovered to expedite cooling as part of the cooling process. Cover the food when it reaches an internal temperature of 41°F.

### D. Leftovers

1. Food that has been cooked and held for meal service on trayline is not frozen and reused.
2. Vegetables may be added to soups. Fruit may be used in gelatin desserts.
3. Leftover dessert items may be used for nourishments.
4. Leftover food is not prepared as a primary food item and is not used for pureed food.
5. Leftover food is tightly covered, labeled with date and item name and used within seventy-two (72) hours.
  - a. Method 1: Thaw meat in open package under potable cold running water at with sufficient velocity to agitate and float off loose food particles with the overflow.
  - b. Method 2: Thaw meat in a microwave oven as part of a continuous cooking process using a conventional cooking method, or when the entire, uninterrupted

# CHAPTER IV

## FOOD PRODUCTION MANAGEMENT

cooking process takes place in the microwave oven. Internal temperature of meats must meet safety standards.

6. Thaw meats in the bottom shelf of the refrigerator in a spill-proof non-porous receptacle to prevent dripping. Cured and pre-cooked meats are thawed separately from raw meats. Red meat, poultry and pork are thawed separately.
7. Do not refreeze thawed meat, fish or fowl.
8. Cook thawed meat prior to freezing again.
9. Thawed fruits and vegetables that were previously refrozen will lose flavor and general appeal; use for soups/stews.
10. Precooked casseroles such as creamed dishes or those using potentially hazardous ingredients cannot be refrozen after defrosting.

### E. Prevention of Contamination Guidelines

1. Wash hands before handling any food or when you are beginning any food preparation procedure. Hands should be washed regularly using the proper procedure for handwashing.
2. Cover, label, date and refrigerate all leftovers as soon as serving is completed. Store food in clean, shallow storage containers.
3. Cool foods in shallow pans in refrigerator, rather than leaving them out to cool at room temperature (See Procedure for Food Cooling Process).
4. Keep hot foods at 140°F or above and do not hold for longer than 20-30 minutes before serving time.
5. Use a clean spoon each time a food item is tasted.
6. Do not remove ingredients for recipes from the refrigerator or storage areas until time to use. Return them to refrigerator or storage areas as soon as you are through with them.
7. Use only clean and dry utensils and equipment to prepare food.

# **CHAPTER IV**

## **FOOD PRODUCTION MANAGEMENT**

8. Store all pre-poured beverages and pre-portioned foods in refrigerator, covered and labeled until ready to serve.
9. Use scoops to obtain ice from ice machine, and bulk staples such as flour and dry cereal from bins. Store scoops in a separate container with lid.
10. Always use a clean, appropriate serving utensil to serve food - never use your hand. If hands must be used (i.e. for sandwiches, cookies, etc.), wear clean, disposable gloves.
11. Wash all fruits and vegetables thoroughly before preparing.
12. Garbage will be placed in a leak-proof, non-absorbent container with liner and then disposed. The containers should be thoroughly cleaned after disposing of the waste.
13. Clean aprons will be worn daily. Aprons are not worn outside the Dietary Department.
14. Freezing, Thawing and Refreezing Food Products

# CHAPTER V

## DINING PROGRAMS

### TYPES OF DINING PROGRAMS

#### POLICY

Dining programs will be provided to promote social interaction, optimum dining atmosphere and improve residents' appetite while meeting the physical capabilities of each resident.

#### PROCEDURE

Residents are evaluated upon admission, and as condition warrants, for dining ability and assigned a program that meets their needs and ability. Residents are always informed of dining location and any changes recommended, and their approval is obtained.

#### DINING PROGRAMS

- A. Dining programs are individualized for each facility.
- B. Dining programs are planned to accommodate resident needs and may require more than one seating and location.
  1. Independent Dining
    - a. For residents requiring no assistance at meal time, minimal supervision in area to ensure resident's safety, and high service level.
    - b. This program may be open dining, with residents attending during hours of operation and choosing their places, or with pre-scheduled service times and assigned seating.
  2. Assisted Dining
    - a. For residents requiring minimal assistance, usually some set-up, opening of cartons or cutting some food, answering more frequent questions or obtaining additional meal replacements or substitutes.

# CHAPTER V

## DINING PROGRAMS

- b. This program usually works more efficiently when hours of service, attendance and staffing are pre-scheduled.
- c. If space is an issue, this program works well in combination of Dependent Dining.

### 3. Dependent Dining

- a. For residents requiring assistance with most tasks, frequent cueing and reminding, staying in place until finished with meal, and those that must be totally assisted by staff with meals.
- b. This program may include residents exhibiting behavioral or dementia issues that may cause discomfort or undue distractions to others. In this case, residents should be evaluated and a quieter, more private dining environment may be necessary.

### 4. Restorative Dining or Progressive Eating Skills Therapy

- a. A therapeutic dining program recommended by the IDT usually with evaluation and recommendation of the Therapy Department.
- b. Residents in this program are fed by skilled therapists or Restorative Nursing Aides (RNA) as they may require specialized interventions to progress.
- b. This program includes a short-term program initiated by the Speech and Language Therapist or Pathologist (SLT/SLP), who designs the individualized program and manages implementation and progress.

### 5. In-Room Dining

- a. Meal service provided in the resident rooms either due to resident preference and request or because condition warrants.

# CHAPTER V

## DINING PROGRAMS

- b. Dining Committee
- c. The Dining Program Committee may include any of the following:
  - Residents' representative(s).
  - Dietary Manager, Registered Dietitian Nutritionist.
  - At least one nursing representative: Director of Nursing Services, Licensed Nurse, Nursing Aide, Restorative Nursing Aide, Cook or Tray Aide, Activities Director or Designee, Social Services Designee, and appropriate program staff designee.

Note: Each facility determines the best and most efficient Dining Committee Group. The minimum number of departments needing representation are: Dietary, Nursing and Activities. Residents are always included in the choices.

- D. Nursing Documentation
  - 1. Nursing maintains food and beverage intake documentation per facility policy.
  - 2. To improve accuracy and ease recording of intake leaving tray cards at the table or on trays is helpful.
  - 3. When open dining, cafeteria or family style and special events, Nursing staff observe and record percentage of intake as accurately as possible and note observation took place at event.
- E. Each facility develops specific procedures for each of their dining programs.

*(Include your own procedures in this section)*



# CHAPTER VII

## GENERAL SANITATION

### CAN OPENER AND BASE

Proper sanitation and maintenance of the can opener and base is important to sanitary food preparation. Metal shavings and shredding can result from a dull cutting blade or worn out cogwheel.

1. The can opener must be thoroughly cleaned after using.
2. Wash handle portion of the can opener in dish machine.
3. Wash the base with a brush and a detergent solution to keep seam area clean.
4. Unscrew base weekly to clean underneath
5. Make sure the shaft cavity is clean.
  - a. Wash shaft daily and dry thoroughly before replacing.
  - b. Apply food safe oil weekly to shaft cavity to keep from rusting.
  - c. If shaft is rusty remove rust or replace shaft.
6. Return the clean opener to the base.
7. At least once every three (3) months the underside of the base should be cleaned, as well as the area on the table where the base rests.
8. Replace blade as needed. Dull blades may cause metal shards to drop inside the food when can is opened.

# **CHAPTER VIII**

## **DISASTER AND EMERGENCY MANAGEMENT**

### **POLICY**

Emergency food and supplies will be available at all times to provide meals to residents, staff and visitors during an emergency.

The emergency inventory will include sufficient supplies to serve the licensed number of beds, largest shift of the day and estimated number of visitors during peak operating hours.

Alternate methods of procuring, preparing and serving food may be instituted at the discretion of the facility Administrator or Designee and the Dietary Manager during an internal or external disaster or emergency situation.

Operating procedures enabling continued operations during an emergency or disaster will be posted at all times and staff will be trained in their use.

### **PROCEDURES**

Dietary Department disaster and emergency procedures include:

- Disaster Policy and Procedure
- Resident Meal Service
- Sanitation
- Guidelines for Use of Food on Hand
- Special Diet Recommendations
- Emergency Water Plan and Purification of Tap Water
- Emergency Water Supply Location
- Serving Sizes to Provide two (2) oz Protein

# CHAPTER VIII

## DISASTER AND EMERGENCY MANAGEMENT

### EMERGENCY FOOD DELIVERY LIST

In the event of a natural disaster, please list your requirements to maintain sufficient food/supply stocks in your facility. Please list quantities needed per day and description of item and attach additional sheets, if needed. Attach a copy of your disaster plan and disaster menu.

| Item                       | Description | Specifications | Amount Needed |
|----------------------------|-------------|----------------|---------------|
| Orange juice               |             | 10/46 oz cans  |               |
| Pineapple-grapefruit juice |             | 10/46 oz cans  |               |
| Apple juice                |             | 10/46 oz cans  |               |
| Other juice                |             | 18/46 oz cans  |               |
| Canned fruit               |             | 4/#10 cans     |               |
| Green beans                |             | 4/#10 cans     |               |
| Beets                      |             | 4/#10 cans     |               |
| Tomatoes or tomato sauce   |             | 4/#10 cans     |               |
| Other vegetables           |             | 4/#10 cans     |               |
|                            |             |                |               |
|                            |             |                |               |
| Soups- varieties           |             | 13/46 oz cans  |               |
|                            |             |                |               |
|                            |             |                |               |
| Baked beans                |             | 3/#10 cans     |               |
| Other beans                |             |                |               |
| Corned beef hash           |             | 6/#10 cans     |               |
| Tuna                       |             | 3/#5 cans      |               |
| Ravioli                    |             | 6/#10 cans     |               |
| Peanut butter              |             | 2/#10 cans     |               |
| Jelly – diet jelly         |             | 1/#10 can      |               |
| Pureed meat                |             | 12/12 oz cans  |               |
| Pureed vegetable           |             | 12/12 oz cans  |               |
| Applesauce                 |             | 4/#10 cans     |               |
| Canned pudding             |             | 6/#10 cans     |               |
| Bottled dressings          |             |                |               |
| Individual portions        |             |                |               |
|                            |             |                |               |
|                            |             |                |               |
|                            |             |                |               |

# CHAPTER VIII

## DISASTER AND EMERGENCY MANAGEMENT

| Item                      | Description | Specifications        | Amount Needed |
|---------------------------|-------------|-----------------------|---------------|
| <b>DRY ITEMS</b>          |             |                       |               |
| Dehydrated milk           |             | 50 pounds             |               |
| Dehydrated potatoes       |             | 5 pounds              |               |
| Instant cereal            |             | 15 pounds total       |               |
| Cocoa                     |             | 1 pound               |               |
| Sugar                     |             | 10 pounds             |               |
| Soda crackers             |             | 2 cases               |               |
| Graham crackers           |             | 2 cases               |               |
| Cookies or vanilla wafers |             | 2 cases               |               |
| <b>WATER</b>              |             | 1 or 5 gallon bottles |               |
| <b>DISPOSABLE ITEMS</b>   |             |                       |               |
| 8" dinner plates          |             | 900                   |               |
| 6 oz hot cups             |             | 1,000                 |               |
| 10 to 12 oz soup bowls    |             | 400                   |               |
| 6 oz cold drink cups      |             | 1,600                 |               |
| 5 oz dessert dishes       |             | 400                   |               |
| Trays                     |             | 900                   |               |
| Knives                    |             | 900                   |               |
| Forks                     |             | 900                   |               |
| Teaspoons                 |             | 900                   |               |
| Napkins                   |             | 1,050                 |               |
| Black trash bags          |             |                       |               |
| <b>CLEANING</b>           |             |                       |               |
| Cleaning supplies         |             |                       |               |
|                           |             |                       |               |
|                           |             |                       |               |
| Warewashing detergent     |             |                       |               |
| Warewashing sanitizer     |             |                       |               |
| Quaternary sanitizer      |             |                       |               |
| Sanitizer test strips     |             |                       |               |
| Chlorine bleach           |             |                       |               |
| White vinegar             |             |                       |               |

Completed by: \_\_\_\_\_

Date: \_\_\_\_\_

Received by: \_\_\_\_\_

Date: \_\_\_\_\_

*(Update the information in this form at least every 6 months)*

# CHAPTER VIII

## DISASTER AND EMERGENCY MANAGEMENT

### EXPLOSION - INTERNAL OR EXTERNAL

When an explosion takes place within the facility:

1. Evacuate residents and staff in immediate area of danger.
2. Evacuate the area of all staff.
3. Sound the Alarm:
  - a. Alarm code is \_\_\_\_\_.
4. Notify the Fire Department:
  - a. Fire Department number is \_\_\_\_\_.
5. Notify the Police Department:
  - a. Police Department number is \_\_\_\_\_.
6. Administer first aid as needed until help arrives.
7. Fight and contain fires if fire is small enough to manage; otherwise, wait for Fire Department.
8. Notify Administrator or Director of Nursing and Dietary Manager.
9. Shut off utilities affected.

# Cassens Associates – DNMS

## DINING SERVICES EDUCATION AND TRAINING

### SANITIZING BUCKET – RED BUCKET

| Instructor:   |  | Location:  |  |
|---|--|--|--|
| Time:   |  | Written by Digna Cassens, MHA, RDN   |  |
| Behavioral Objectives   | Course Content   | Teaching Method  | Competency Evaluation  |
| <p>At the conclusion of the presentation, the participants will be able to:</p> <ol style="list-style-type: none"> <li>1. Verbalize how to prepare sanitizing buckets per policy and procedure.</li> <li>2. Verbalize how to utilize sanitizing cloth and buckets.</li> <li>3. State the difference between a <b>red</b> and a <b>green</b> bucket.</li> <li>4. State alternate methods to maintaining cleaning cloths sanitary if a red bucket is not used.</li> </ol> | <ul style="list-style-type: none"> <li>• Review the policy and procedure for sanitizing bucket preparation and usage.</li> <li>• Demonstrate how to prepare a sanitizing bucket and how to correctly use the cloth. <ul style="list-style-type: none"> <li>○ Prepare warm (110°F water).</li> <li>○ Do not use sanitizing water to clean; use food-safe sanitizer either in a green bucket or a spray bottle mixed to the correct proportions.</li> </ul> </li> <li>• Demonstrate how to test the PPM using the correct manufacturer test strip. <ul style="list-style-type: none"> <li>○ Remove ½ cup water from bucket and allow to cool to room temperature.</li> </ul> </li> </ul> | <ul style="list-style-type: none"> <li>• Lecture.</li> <li>• Discussion.</li> <li>• Sanitizing bucket.</li> <li>• Wiping cloth.</li> <li>• Sanitizing strips.</li> </ul> | <p><b>Question and Answer Session</b></p> <p><b>Q: What is the acceptable PPM for a prepared sanitizing bucket?</b><br/> <b>A: 200 PPM.</b></p> <p><b>Q: What cloth do you use for the sanitizing bucket?</b><br/> <b>A: Quat safe clean reusable or disposable wiping cloth</b></p> <p><b>Q: How often do you change the water for the sanitizing bucket?</b><br/> <b>A: Every 4 hours, or when it appears to be dirty.</b></p> <p><b>Q: How do you use the sanitizing cloth?</b><br/> <b>A: When surfaces need cleaning using a food-safe spray or soap and water; rinse cloth thoroughly, squeeze excess water and place back in bucket until next use.</b></p> |

# Cassens Associates – DNMS DINING SERVICES EDUCATION AND TRAINING

## SANITIZING BUCKET – RED BUCKET

| Instructor:           |   | Location:                          |                       |
|-----------------------|---|------------------------------------|-----------------------|
| Time:                 |   | Written by Digna Cassens, MHA, RDN |                       |
| Behavioral Objectives | Course Content  | Teaching Method                    | Competency Evaluation |
|                       | <ul style="list-style-type: none"> <li>○ After using a clean cloth to clean, rinse cloth thoroughly and store inside the sanitizing bucket to keep it sanitary until next use.</li> <li>● Green buckets are used to prepare soapy water or food-safe sanitizing solution for cleaning food-contact surfaces and equipment. Green buckets are not used to store the cleaning cloths between uses.</li> <li>● If a red bucket with sanitizer is not used, then cleaning cloths are used one time then discarded to the laundry basket kept in the kitchen for that purpose only.</li> </ul> |                                    |                       |

# CHAPTER VI

## NUTRITIONAL CARE MANAGEMENT

### FREE FLUIDS RESTRICTION

#### POLICY

Residents on fluid restrictions will be provided the fluid volume specified in the physician order in a twenty-four (24) hour period to be provided at meals and with medication.

#### PROCEDURE

- A. Nursing provides Dietary with a diet communication form stating the total number of fluids per day (24 hour period).
- B. The distribution of fluids is determined by the DM using the chart provided by the RDN (Refer to fluid restriction chart.)
- C. The DM enters the new order in the resident profile information and diet card, including the number of cc's to be provided per meal and changing any liquid snacks, nourishments or supplements.
- D. Food that is liquid at room or body temperature is not allowed and is listed as a food to avoid on the diet card.
- E. The DM makes a care plan entry and includes the number of cc's per meal and for each medication pass.
- F. Residents on fluid restrictions are referred to the RDN for assessment.
- G. All but very strict, low fluid restrictions include small amounts to be allowed to quench thirst or when attending activities and other events as this assists with hydration during the day as well as compliance.
- H. Water pitchers are not provided at bedside, or if they are, only the water allowed in each eight (8) hour period is provided.
- I. The DM provides resident and family education regarding fluid restrictions.



# CHAPTER VI

## NUTRITIONAL CARE MANAGEMENT

J. Fluid restriction sample chart:

| <b>Total cc</b> | <b>Dietary</b> | <b>Breakfast</b> | <b>Lunch</b> | <b>Dinner</b> | <b>Nursing</b> | <b>Per shift</b> |
|-----------------|----------------|------------------|--------------|---------------|----------------|------------------|
| 1000cc          | 700cc          | 360cc            | 180cc        | 160cc         | 300cc          | 100cc            |
| 1200cc          | 900cc          | 420cc            | 240cc        | 240cc         | 300cc          | 100cc            |
| 1500cc          | 1200cc         | 620cc            | 290cc        | 290cc         | 300cc          | 300cc            |

# Cassens Associates – DNMS

## DINING SERVICES EDUCATION AND TRAINING

### HOW TO PREPARE AND SERVE THICKENED LIQUIDS

| <b>Instructor:</b>  |  | <b>Location:</b>  |   |
|---|--|---|---|
| <b>Time:</b> 60 minutes   |  | Written by Digna Cassens, MHA, RDN  |   |
| Behavioral Objectives   | Course Content   | Teaching Method   | Competency Evaluation   |
| <p>At the conclusion of the presentation, the participants will be able to:</p> <ol style="list-style-type: none"> <li>1. Define the 4 types of liquid viscosity (AKA consistency or types.)</li> <li>2. Distinguish between the different types of thickened liquid viscosity.</li> <li>3. Be able to thicken liquids to the correct viscosity.</li> <li>4. Be able to identify foods that appear solid but turn into liquid.</li> </ol> | <ul style="list-style-type: none"> <li>• Review the food thickener usage guideline chart &amp; variety of liquid types and how temperatures affect them.</li> <li>• Demonstrate thickening 5 different types of liquids: hot broth, hot coffee or tea, milk, house supplement or fortified milk, orange juice, water.</li> <li>• 5–6 ice cubes in a clear measuring cup (place next to thickened water and let it melt).</li> <li>• Honey-thickened water chilled from refrigerator (let it sit until time to talk/discuss).</li> <li>• Nectar-thickened water.</li> <li>• Honey-thickened water with 5–6 ice cubes in it (let it sit during the session until ready to discuss).</li> <li>• Gelatin, ice cream: let them melt at room temperature during the inservice, or have participants taste a spoonful and experience them melting in</li> </ul> | <ul style="list-style-type: none"> <li>• Lecture.</li> <li>• Discussion.</li> <li>• Handouts.</li> <li>• Demonstration.</li> <li>• Return demonstration using: <ul style="list-style-type: none"> <li>- Measuring utensils.</li> <li>- Serving tumblers, cups, mugs, and bowls used to serve liquids.</li> <li>- Bowls and pitchers in which to mix.</li> <li>- Wire whisk, fork, mixing bottles with tight lids (some are provided by thickener company).</li> </ul> </li> </ul> | <p><b>Question and Answer Session</b></p> <p><b>Q: What is a regular or thin liquid?</b><br/> <b>A:</b> Examples are all the liquids used in the demonstration.</p> <p><b>Q: For a 4 oz of water, how much thickener would you add for nectar-thick viscosity?</b><br/> <b>A:</b> Correct answer must be read from manufacturer's instruction sheet as it varies by manufacturer and type of product (powder or gel) and by liquid used.</p> <p><b>Q: What other ways are there of thickening liquids?</b><br/> <b>A:</b> a) With real food thickeners, such as cornstarch or flour, as when making a thin pudding or roux.<br/> b) By pureeing with ingredients such as vegetables, potatoes, pasta as part of the dish – i.e. soups.</p> <p><b>Q: Can you serve ice cream or gelatin-based dishes on the thickened liquid diets? – Why? Or why not?</b></p> |

# Cassens Associates – DNMS

## DINING SERVICES EDUCATION AND TRAINING

### HOW TO PREPARE AND SERVE THICKENED LIQUIDS

| Instructor:           |   | Location:                          |  |
|-----------------------|---|------------------------------------|--|
| Time: 60 minutes      |   | Written by Digna Cassens, MHA, RDN |  |
| Behavioral Objectives | Course Content  | Teaching Method                    | Competency Evaluation  |
|                       | <p>mouth, then explain thickening process or purchasing only commercially thickened products.</p> <ul style="list-style-type: none"> <li>• At the conclusion of the session stir the honey-thickened water and ice cubes. Compare viscosity with honey-thickened water without ice cubes and with nectar-thickened water without ice cubes. Also measure the melted ice cubes to demonstrate the volume of water added.</li> <li>• Now discuss the reasons for never adding ice cubes to any thickened beverage.</li> </ul> |                                    | <p><b>A:</b> Not unless they are thickened because they become liquid at body temperature so they would melt in the mouth.</p> <p><b>Q:</b> <b>Discuss the reasons for not adding ice cubes to thickened beverages. Give alternatives for maintaining thickened beverages cold so they are palatable.</b></p> <p><b>A:</b> The answers are the final discussion.</p> |

# CHAPTER X

## QUALITY ASSESSEMENT & PROCESS MPROVEMENT (QAPI)

### QUALITY ASSESSMENT OF A MEAL: ACCEPTANCE AND FOOD INTAKE

|                                |   |
|--------------------------------|---|
| Function                       | Residents' nutritional, therapeutic, psychosocial, and special dietary needs are met.   |
| Indicator                      | Resident Tray Accuracy  |
| Monitor                        | Quarterly   |
| Threshold for Evaluation (TFE) | One hundred (100) percent for each criterion. The sample size is 10 charts (residents) per study.   |
| Criteria                       | <ol style="list-style-type: none"><li>1. Adequate portions are served to meet the RDAs for resident.</li><li>2. All residents in the dining room are served and assisted, if needed, within 15 minutes of the designated serving time.</li><li>3. Assistive devices, as appropriate, are available, and residents are trained in their use.</li><li>4. Residents eating less than 75 percent of a meal are so documented in the CNA flow sheets.</li><li>5. A food substitute of similar nutritional value is offered when a resident refuses food.</li><li>6. Efforts to intervene or counsel residents refusing meals are documented.</li><li>7. A nursing plan for feeding assistance at mealtimes as necessary is in effect.</li><li>8. Between-meal and bedtime snacks are provided for all residents who need or desire them.</li></ol> |

# CHAPTER X

## QUALITY ASSESSEMENT & PROCESS MPROVEMENT

### (QAPI)

9. Nourishments, if indicated, are documented in terms of percentage consumed.

#### Evaluation

1. Once each quarter, the food intake of residents will be evaluated. Tally the results on the QAPI Study Data Collection Form.
2. If the TFE is not met, document the Problem, Conclusion, Recommendation/Action Taken, and Follow-up on the Quality Improvement/Control Status Record Cover Sheet.

#### Instructions

Randomly select 10 charts (residents) observe a meal tray for each resident. Check each criterion on the QAA Study Data Collection Form. Review the results at the Quality Assurance meeting.

# CHAPTER X

## QUALITY ASSURANCE & PROCESS IMPROVEMENT (QAPI)

### NOURISHMENT DISTRIBUTION

|                                |   |
|--------------------------------|---|
| Function                       | Between meal and bed time nourishments are offered to resident.   |
| Indicator                      | Resident Nourishment  |
| Monitor                        | Monthly   |
| Threshold for Evaluation (TFE) | One hundred (100) percent for each criteria on nourishment served as planned on the QAPI Study Data Collection Form. Sample size is 10 residents per study.   |
| Criteria                       | <ol style="list-style-type: none"> <li>1. Each resident receives nourishment(s) within 15 minutes.</li> <li>2. Residents receive assistance in consuming their nourishment(s).</li> <li>3. The individual nourishment request is in compliance with the diet order.</li> <li>4. Residents are offered H.S. snack.</li> </ol>  |
| Evaluation                     | <ol style="list-style-type: none"> <li>1. Once each quarter, the accuracy and timeliness of nourishment is evaluated. Tally the results on QAA Study Data Collection Form (RSOf-37A*).</li> <li>2. If the TFE is not met, document the Problem, Conclusion, Recommendation/Action Taken, and Follow-up on the Quality Improvement/Control Status Record Cover Sheet.</li> </ol> |
| Instructions                   | Select date, time and nursing station to observe nourishment. Watch the residents. Evaluate using the QAPI Study Data Collection Form   |

# CHAPTER X

## QUALITY ASSURANCE & PROCESS IMPROVEMENT

### POINT OF SERVICE TRAY LINE COOKS CHECKLIST

COMMUNITY: \_\_\_\_\_

DATE: \_\_\_\_\_

EVALUATOR: \_\_\_\_\_

MEAL: \_\_\_\_\_

| AREAS REVIEWED   | YES | NO | COMMENTS |
|--|-----|----|----------|
| <b>F-Tag 363, 364 365, 368</b>   |     |    |          |
| 1. All foods are accurate based on spreadsheet (None missing or changed)   |     |    |          |
| 2. Recipe used for fortified food (as per spreadsheet) – Ask staff where it is.  |     |    |          |
| 3. Fortified milk prepared correctly? 1 gallon milk, 5 cups dry milk powder).  |     |    |          |
| 4. Thickened liquids prepared correctly.   |     |    |          |
| 5. Appropriate alternate items provided when gelatin/ ice cream or sherbet are on the menu.                              |     |    |          |
| 6. All hot items are on a heat source (Can be steam table, steam bath, oven).  |     |    |          |
| 7. Cold foods and beverages are set up to maintain temperature of < 41°F at point of service.                            |     |    |          |
| 8. All correct scoops and ladles are used based on spreadsheet (check all consistencies and small/large portions).       |     |    |          |
| 9. Temperatures are obtained and recorded for all hot and cold menu items prior to meal service & meet standard.         |     |    |          |
| 10. Meal service begins at the posted times and if there is a necessary delay nursing and residents are notified timely. |     |    |          |

#### Additional comments and recommendations for improvement

|  |
|--|
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |