



**Developing an
Interdisciplinary Resident Dining Program
for Nursing Homes**

How-To Guide

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Developing an Interdisciplinary Resident Dining Program for Nursing Homes

1. What is it?

Inadequate assistance at meal time has been identified repeatedly in literature, and by administrators and clinicians, as the most important issue in preventing malnutrition and dehydration in Nursing Homes. This guide uses an interdisciplinary approach for planning an effective dining program that assures adequate assistance at meal time for every resident.

2. Preparation

Suggested amount of time required to complete this component is 6 - 8 hours per 50 residents

◆ Identify Dining Coordinator

The *Dining Coordinator* is responsible for overall organization, implementation and ongoing evaluation of the dining program. He/she determines staffing needs and distribution, based upon residents' eating self-performance, and trains *Dining Facilitators*. A good candidate is a high level manager with strong interpersonal skills and a vested interest in maintaining an effective dining program such as: the Administrator, Director of Nursing, Registered Dietitian, Director of Food Services, Director of Rehabilitation Services or Director of Restorative Nursing Program.

◆ Determine Roles of Interdisciplinary Team Members

Dining Facilitator - Oversees dining areas to assure that each resident receives adequate assistance at meal time and assigns dining placement for newly admitted residents. He/she documents and reports problems/concerns to the *Dining Coordinator*, and assists in resolution process. Good candidates are: Diet Technicians, Nurse Supervisors, Therapists.

Hands-on Staff - Provide assistance for residents to consume meals. Candidates are: Licensed Nurses, Certified Nursing Assistants (including private duty staff), Speech and Occupational Therapists.

Support Staff - Provide support to *Hands-on Staff* by assisting residents to dining areas, and serving/setting up meals. Good candidates are: Activities, Social Services, Business Office and Environmental Services staff, Volunteers and Students.

Interdisciplinary Dining Team

Dining Coordinator

Administrator, Registered Dietitian,
Director of Nursing, Food Services, or
Rehabilitation Departments

Dining Facilitators

Nurse Supervisors, Diet Technicians,
Therapists, and other Managers

Hands-on Staff

Licensed Nurses, Certified Nursing Assistants,
Speech and Occupational Therapists

Support Staff

Activities, Social Services, Business Office and Environmental
Staff, Volunteers, Family Members, and Students

◆ Introduce Program to Team

The Administrator meets with staff to explain the purpose of the program and the need for an interdisciplinary approach. He/she reviews the responsibilities of each interdisciplinary team member, introduces the *Dining Coordinator* and presents the time line for implementation of Dining Program.

3. **Determine ADL Eating Self-Performance Levels of Residents**

**Suggested amount of time required to complete this component is
6 - 10 hours per 50 residents**

◆ Retrieve Minimum Data Set (MDS) Information and Sort by Dining Areas

Use MDS computer program to obtain cross section report for G1h(A) eating self- performance (i.e. independent, supervision, limited assistance, extensive assistance, total dependence) from most recent MDS assessment. If unable to obtain eating self-performance coding from MDS program, manually retrieve this information from most current MDS in each medical record.

◆ Use Adjustment Factors

Omit residents who do not receive meals (i.e. tube fed, TPN).
Determine actual eating self-performance skill for newly admitted residents who do not appear on the MDS cross section report.

- use Sample Worksheet #1

Sample Worksheet #1

ANALYSIS OF EATING SELF- PERFORMANCE

NUMBER OF RESIDENTS	independent MDS code (0)	supervision MDS code (1)	limited assistance MDS code (2)	extensive assistance MDS code (3)	total dependence MDS code (4)
Dining Area #1 (floor, unit, wing, or dining room)					
Dining Area #2 (floor, unit, wing, or dining room)					
Dining Area #3 (floor, unit, wing, or dining room)					
Total					

Instructions:

1. Obtain coding for each resident's eating self-performance G1h (A) from MDS Cross Section Report.
2. Omit residents who do not receive meals (i.e. tube fed, TPN).
3. Add newly admitted residents who do not appear on cross section report.

4. **Use Ratio to Determine Staffing Needs**

**Suggested amount of time required to complete this component is
10 - 12 hours per 50 residents**

◆ **Determine Staffing Need Based on Facility Profile**

For each dining area, divide residents into two categories based on eating self-performance:

Category A independent, supervision, and limited assistance

Category B extensive assistance and total dependence.

Use the following ratio to determine staffing need for each area:

Category A one staff member per eight residents

Category B one staff member per two residents

◆ **Assign *Hands-on* and *Support Staff* for Each Day/Meal/Area**

Use dining planner to assign adequate number/level of staff seven days a week, three meals a day, to each dining area (floor, unit, dining room, etc.).

◆ **Assign *Dining Facilitator* for Each Day/Meal/Area**



Use dining planner to assign *Dining Facilitator* seven days a week, three meals a day, to each dining area (floor, unit, dining room, etc.).

- use Sample Worksheets # 2 and # 3



Sample Worksheet #2

STAFFING NEEDS RATIO FOR DINING



Dining Area #1

Number of Residents - ____ Category A (independent, supervision, and limited assistance)		Number of Support Staff Needed ____ (1 staff per 8 residents)
Number of Residents - ____ Category B (extensive assistance and total dependence)		Number of Hands-on Staff Needed ____ (1 staff per 2 residents)

Dining Area #2

Number of Residents - ____ Category A (independent, supervision and limited assistance)		Number of Support Staff Needed ____ (1 staff per 8 residents)
Number of Residents - ____ Category B (extensive assistance and total dependence)		Number of Hands-on Staff Needed ____ (1 staff per 2 residents)

Dining Area #3

Number of Residents - ____ Category A (independent, supervision and limited assistance)		Number of Support Staff Needed ____ (1 staff per 8 residents)
Number of Residents - ____ Category B (extensive assistance and total dependence)		Number of Hand-on Staff Needed ____ (1 staff per 2 residents)

Sample Worksheet # 3
Dining Planner
 Breakfast Lunch Dinner

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Dining Area:	Hands-on Staff:	Hands-on Staff:	Hands-on Staff:	Hands-on Staff:	Hands-on Staff:	Hands-on Staff:	Hands-on Staff:
	CNAs	CNAs	CNAs	CNAs	CNAs	CNAs	CNAs
	Nurses	Nurses	Nurses	Nurses	Nurses	Nurses	Nurses
Number of staff needed:	Other	Other	Other	Other	Other	Other	Other
Hands-on:							
	Support Staff:	Support Staff:	Support Staff:	Support Staff:	Support Staff:	Support Staff:	Support Staff:
Support:							
	Facilitator:	Facilitator:	Facilitator:	Facilitator:	Facilitator:	Facilitator:	Facilitator:

5. Implementation

**Suggested amount of time required to complete this component is
4 - 6 hours per 50 residents**

◆ Train Facilitators

The *Dining Coordinator* organizes training sessions for *Dining Facilitators* to assure that each facilitator understands his/her responsibilities.

Therapists are scheduled to provide training which addresses proper positioning at meal time, indications of swallowing problems and proper use of adaptive eating utensils.

◆ Use Dining Checklist

Areas of needed attention at meal time are included in the Dining Checklist which is completed by the *Dining Facilitator*. Frequency for completion is determined by the *Dining Coordinator*.

- use Sample Worksheets # 4 and # 5

Sample Worksheet # 4
Training Points for Dining Facilitator

1. Make sure all assigned staff are present and participating during meal service.
2. Determine if residents are in their assigned places prior to arrival of meals, so that meal distribution goes smoothly. If residents are not in their assigned place, find out why not.
3. Observe if dining area is at a comfortable temperature, has adequate lighting and a low noise level.
4. Direct staff in serving meals. Observe if meals arrive in order consistent with resident placement.
5. Observe if residents in the same room, or at the same table, are served consecutively.
6. Determine if residents are receiving adequate assistance with eating in your assigned dining areas. If your area includes residents who eat in their rooms, visit those rooms and determine if those residents are receiving adequate assistance.
7. Observe residents for proper positioning, indications of swallowing problems, and proper use of adaptive eating utensils.
8. Direct staff to remain seated when feeding residents.
9. Observe if staff are treating residents with dignity during meal time and allowing adequate time for residents to consume their meals.
10. Determine if residents requesting meal time alternates receive the items within 15 minutes of their request.
11. Determine if staff complete food and fluid consumption documentation immediately following the meal.
12. Use *Dining Checklist* to note problems/concerns and submit to Dining Coordinator.

**Sample Worksheet # 5
Dining Checklist**

Breakfast **Lunch** **Dinner**

<i>What to look for:</i>	Yes	No	N/A
1. Residents are escorted to their assigned places prior to meal service.			
2. Newly admitted residents have assigned dining placements.			
3. All assigned staff are present and participating during meal service.			
4. Order of meal delivery is consistent with seating plan.			
5. Staff serve meals in proper order as food arrives.			
6. Residents in the same room or at the same table are served consecutively.			
7. Residents are properly positioned.			
8. Each resident receives adequate assistance with eating.			
9. Alternates are provided within 15 minutes of request.			
10. Residents who are observed coughing, gagging or pocketing their food when eating or drinking are referred to the licensed nurse.			

Dining Area: _____

Comments:

Dining Facilitator: _____ ***Date:*** _____

6. Maintenance of Dining Program

Suggested amount of time required to complete this component and maintain program is 6 - 8 hours per month per 50 residents

- ◆ Review Dining Checklist
The *Dining Coordinator* reviews the completed Dining Checklists and meets with *Dining Facilitators* to resolve problems.
- ◆ Adjust Assignments as Needed
Problem resolution may include adjustments in staffing assignments to better meet facility's specific needs and staff's abilities.
- ◆ Reevaluate ADL Eating Self-Performance Levels and Adjust Staffing
The *Dining Coordinator* reassesses ADL eating self-performance levels of residents every three to six months. The appropriate time frame for reassessment varies for each facility depending on the number of admissions to the facility, facility's practice of reassigning dining placements and degree of changes in residents' eating self-performance skills.

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