Dining and Meal Service
Evidence-Based Best Practices

Food and Menu Quality: Key Elements

- The menu cycle includes balanced nutrient content, colorful foods, cultural foods, and a variety of options that complement each other.

- The person residing in the facility and/or their representative are involved in the creation of the menu.

- Food served matches the menu cycle approved by the Registered Dietitian.
- Meal tickets match the diet orders and are disposed of in a manner that protects privacy (HIPPA).

- Food preferences are obtained and honored for meals and snacks.

- Meal alternate options are available and nutritionally equivalent to the regular meal served.

- Fortified/nutrient dense food options are offered for those who need it.

- Facility has recipes for the fortified food options offered.

- Finger food options are offered for people to feed themselves.

- Food served is well-seasoned, appetizing, and tasty.

- Hot food is served hot and cold food is served cold.

- The facility follows the International Dysphagia Diet Standardization Initiative (IDDSI) when preparing texture modified diets.

- Texture modified diets are served the same menu items provided on the regular diet whenever possible.

- Pureed meals are served have a smooth and pudding-like texture and are nutritionally equivalent to the regular diet texture.

- Menus, alternates, and mealtimes are posted in an area(s) accessible to all.

- Meals are served no greater than 14 hours between dinner and breakfast, or no more 16 hours with a substantial evening snack.

- Staff are aware of the meal alternate available for the day and offer the alternate for those with suboptimal intake or who refuse the regular meal served.

- Dietary intake is recorded accurately following meal service

For more information on food and menu quality:

- [Nutrition Care Manual® (NCM®)](#) (available online for purchase)

- Fortified Foods and Oral Nutritional Supplements available on the QMP Meal and Dining Service [Evidence-based Best Practices webpage](#).

- [International Dysphagia Diet Standardization Initiative](#)
  - ‣ [IDDSI Testing Methods](#) (Videos)
  - ‣ [Complete IDDSI Framework 2.0 2019](#)
  - ‣ [IDDSI Food and Drink Classification and Testing](#) (Poster)
  - ‣ [What is IDDSI?](#) (Poster)
  - ‣ [IDDSI Implementation Guide: Cross Sector Master Guide](#)

- [Dietary Intake Guide](#)

Eating Assistance: Key Elements

People who reside in LTC facilities should be encouraged to maintain their independence and feed themselves whenever possible. However, physical problems (i.e. being unable to hold a fork, tremors that prevent getting spoon to mouth, etc.) or cognitive problems (i.e. just forgetting how to eat) can result in a need for feeding assistance. Eating assistance may include proper positioning, cueing, or prompting, the offering of finger foods, various hand feeding methods and/or adaptive equipment.

Best practices include, but are not limited to:

- Adequate staff available to assist with meal set-up and feeding.

- Completion of 16 hours of state-approved training for non-nursing feeding assistants.

- Supervision of all non-nursing feeding assistants by a nurse.

- Appropriate positioning during meals including for those in wheelchairs.

- Assistance provided for people needing help with eating, cueing, and/or meal set-up.

- Feeding assistance provided at eye-level.

- Using assisted hand feeding techniques when needed.

- Providing adaptive equipment as ordered, such as plate guards or utensils.

- Supervision by a licensed nurse in the dining room(s) during mealtimes.

- Posting choking signs in clearly visible places within the dining areas.

For more information on eating assistance:

- Available on the QMP Meal and Dining Service [Evidence-based Best Practices webpage](#):
    ‣ Feeding Strategies for Behaviors Associated with Dementia
    ‣ Hand Feeding Tips and Techniques for Persons with Dementia
    ‣ Finger Foods Preparation – Tips and Examples

- [Nurses Optimizing Supportive Handfeeding (NOSH)](#) by Melissa Batchelor PhD

Overall Atmosphere: Key Elements

A homelike atmosphere supports both staff and those living in the facility to thrive by increasing social interaction, reducing agitation, increasing intake, improving nutritional status, and maintaining a sense of personal control.

Best practices include, but are not limited to:

- Providing a quiet, homelike atmosphere for dining.

- Furnishing dining areas to meet physical and social needs of all.

- Keeping dining areas free of offensive odors.

- Staff emphasize interaction with the people during meal service instead of focusing on other tasks like clean up or charting.

- Meals are served to each table restaurant style/ people sitting together receive their food at the same time.

- Sufficient liquids are provided with assistance and encouragement.

- Medications and treatments are provided away from the dining area.

- People's wishes are considered when using clothing protectors.

- Preferences are obtained on where a person desires to eat their meals

- Flexible dining and meal service options and times are offered.

Infection Control: Key Elements

Infection control in dining and meal service is important to prevent the spread of infectious diseases to vulnerable people living in LTC facilities.

Best practices include, but are not limited to:

- Food, beverages, and utensils covered properly when outside the dining area.
- Plates prevented from contact with staff clothing.
- Cups/glasses handled on the outside of the container.
- Knives, forks, and spoons handled by the handles.
- Avoiding contact with hair/face when handling food or assisting with feeding.
- Hand hygiene offered for those dining prior to eating.
- Hand hygiene performed prior to and during meal service by facility staff.
- Feeding assistance staff follow infection control guidelines.
- Dirty meal trays, dinnerware, and utensils returned promptly to the kitchen and not left in the dining room(s) or personal rooms.
- Dining areas cleaned including table surfaces after each meal.
- Avoiding direct contact with people when staff are ill or have open wounds.

For more information on infection prevention and control practices:

- Texas Food Establishment Rules (TFER) [Note: often more stringent than federal regulations or the FDA food code]
- FDA Food Code
- CDC Infection Control Guidelines and Guidance Library

Additional Resources from CMS:

- CMS LTC Survey Pathways for Dining, Kitchen, and Infection Control in the Surveyor Resources folder