POLICY & PROCEDURE MANUAL FOR
Nutrition and Food Services in Healthcare Facilities
Introduction

At the core of every successful facility is a set of clear policies and procedures. Our team has partnered with Becky Dorner & Associates, Inc., a trusted leader in Long Term Care, to bring you an updated policy and procedure manual. This newly revised manual includes updated language to reflect changes in CMS Requirements of Participation. CMS’ new emphasis on resident/patient/representative input into care planning and focus on individual choice have been incorporated. New information on food code, food safety/sanitation, nutrition/unintended weight loss, person centered dining, and Nutrition Care Process are included. All policies and procedures have been reviewed to assure they are pertinent given the new CMS rules.

We are pleased to have negotiated a lower price for these manuals by purchasing in bulk. We strive to help keep you in compliance while being mindful of shrinking budgets. Any CMS Phase II updates will be uploaded after they are completed, at no additional charge.

Anyone interested in purchasing CPEUs after receiving the manual, can order those directly by purchasing the additional certificate at https://www.beckydorner.com/products/86.
Policy & Procedure Manual
For Food and Nutrition Services in Healthcare Facilities

Becky Dorner, RDN, LD, FAND, President
www.beckydorner.com
info@beckydorner.com
License Agreement and Restrictions

READ THE FOLLOWING TERMS AND CONDITIONS BEFORE USING THIS MANUAL/CD-ROM OR ELECTRONIC VERSIONS. USING THIS MATERIAL INDICATES YOUR ACCEPTANCE OF THESE TERMS AND CONDITIONS.

LICENSE. The materials that are the subject of this Agreement (hereinafter referred to as the "Licensed Materials") shall consist of printed materials, electronic information, audio or video/DVD information or published information in any form by Becky Dorner & Associates, Inc. (hereinafter referred to as BD&A). Licensee and its Authorized Users acknowledge that the copyright and title to the Licensed Materials and any trademarks and service marks relating thereto remain with BD&A. Neither Licensee nor its Authorized Users shall have right, title or interest in the Licensed Materials except as expressly set forth in this agreement. In consideration of payment, BD&A hereby grants Licensee a non-exclusive, non-transferable, and revocable License to make permitted use of the Licensed Materials and to provide the Licensed Materials to Authorized Users in accordance with this Agreement.

USAGE. The Licensee shall ensure that only Authorized Users are permitted access to the Licensed Materials. Licensee may install and/or use Licensed Materials based on the agreed upon number of Authorized Users per terms of the Purchase Agreement, Letter of Agreement or Invoice. Licensee is not permitted to make unauthorized copies, alterations or modifications to the Licensed Materials unless specified in the Users’ Manual or by prior written authorization of BD&A. Other than as specifically permitted in this Agreement, Licensee may not use the Licensed Materials for commercial purposes, including but not limited to the sale of the Licensed Materials or bulk reproduction or distribution of the licensed materials in any form.

MATERIAL CONTENT. The Licensed Materials are provided for your own personal, educational non-commercial use as a resource aid only. If you intend to use this material for the nutritional needs of an aged, sick or injured person or a person who suffers from a chronic disorder or disease, you should first consult that person's physician or physicians and if none, a physician who practices in the applicable field of medicine.

The Licensed Materials are in the nature of general concepts and, therefore, where its use may be appropriate for one person, its use may not be appropriate for another. The Licensed Materials are not intended to be a substitute for professional medical advice. Consequently, BD&A shall not be liable for any loss or damage directly or indirectly to the Licensee or Authorized Users of any material or information contained in the licensed materials.

LIMITATIONS ON WARRANTIES. BD&A shall not be liable to the Licensee for any indirect, special, incidental, punitive or consequential damages, including but not limited to loss of data, business interruption, or loss of profits arising directly or indirectly from or in connection with the license granted under this Agreement. The forgoing applies regardless of whether the claim or damages result or arise under breach of contract, tort, or any other legal theory.

BD&A makes no representation or warranty, and expressly disclaims any liability with respect to the content of any Licensed Materials, including but not limited to errors or omissions contained therein, libel, infringement of rights of publicity, privacy, trademark rights, moral rights, or the disclosure of confidential information. Except for the express warranties stated herein, the Licensed Materials are provided on an “as is” basis, and BD&A disclaims any and all other warranties, conditions, or representations (express, implied, oral or written), relating to the Licensed Materials or any part thereof, including, without limitation, any and all implied warranties of quality, performance, merchantability or fitness for a particular purpose. BD&A makes no warranties respecting any harm that may be caused by the transmission of computer virus, worm, time bomb, logic bomb or other such computer program. BD&A further expressly disclaims any warranty or representation to Authorized Users, or to any third party.

ACKNOWLEDGEMENT. THE LICENSEE AND AUTHORIZED USERS ACKNOWLEDGES THAT THEY HAVE READ THIS LICENSE, UNDERSTAND IT, AND AGREE TO BE BOUND BY ITS TERMS AND CONDITIONS.

Acknowledgements

Thank you to the following professionals for their tireless effort in revising this and past editions:

Author/Editor: Becky Dorner, RDN, LD, FAND is widely-known as one of the nation's leading experts on nutrition, aging, and long-term care. An experienced speaker and extensively published author, Becky is Founder/President of Nutrition Consulting Services, Inc., whose dedicated team of RDNs and NDTRs have served health care facilities in Ohio since 1983 and currently provide food and nutrition services to approximately 100 health care facilities in two states; and Becky Dorner & Associates, Inc., which provides a broad library of credible continuing education (CE) programs and nutrition resources.

Becky's mission to improve nutrition care for older adults has inspired her to present more than 500 programs for national, international and state professional meetings in 5 countries and 50 states; host more than 140 national professional CE webinars and teleseminars since 2004; and to publish more than 300 nationally/internationally recognized health care articles, manuals and CE programs including menus/recipes, clinical manuals, self-study CE programs, inservices, and publications primarily for health professionals working with older adults. Her free email magazine keeps 35,000 health care professionals up to date on the latest news in the field.

Becky has been an active leader holding more than 20 board positions on national and state professional associations since 1984. Past positions for the Academy of Nutrition and Dietetics include the Board of Directors as Speaker-elect/Speaker/Past Speaker of the House of Delegates, Chair of the Council on Future Practice and Chair of the Dietetics in Health Care Communities DPG. She also served on the National Pressure Ulcer Advisory Panel for 10 years (6 years as a director). Honors include: Academy of Nutrition and Dietetics Medallion Award, Fellow of the Academy of Nutrition and Dietetics, and the Academy Award of Excellence in Business and Consultation.

Devoted to sharing information and teaching the next generation, Becky and her staff have been active clinical preceptors since 1982 hosting students from 6 colleges and universities in Ohio.

Contributing Editor: Liz Friedrich, MPH, RD, CSG, LDN, FAND is a Registered Dietitian and president of Friedrich Nutrition Consulting in Salisbury, NC. The company provides a variety of nutrition consulting services with a focus on gerontological nutrition.

She has co-authored numerous articles in journals and magazines, including the Academy of Nutrition and Dietetics Position Paper titled Individualized Nutrition Approaches for Older Adults in Health Care Communities (2010) and Enteral Nutrition for Older Adults in Nursing Facilities (2011).

Liz was also the Associate Director of Nutrition411.com, a respected website for dietitians, and is an evidence analyst for the Academy of Nutrition and Dietetics’ Evidence Analysis Library. In 2009 Liz became Board Certified as a Specialist in Gerontological Nutrition.

Liz has served as the Delegate for the Nutrition Entrepreneurs dietetic practice group to the Academy of Nutrition and Dietetics House of Delegates, and as a volunteer for the North Carolina Dietetic Association (NCDa) and the Nutrition Entrepreneurs Dietetic Practice Group (NE DPG) in many different board positions. She is the recipient of two North Carolina Dietetic Association awards, the Recognized Young Dietitian of the Year (1991) and the Member of the Year (2000).
Acknowledgements

Reviewers:
Pam Brummit, MA, RD/LD
President/Owner, Brummit & Associates, Inc., Enid, OK

Mary Ellen Posthauer, RD, CD, LD
President, MEP Healthcare Dietary Services, Evansville, IN

Past Contributors and Reviewers:
Mary Abshire, RD, LD
President/Owner, Abshire Dietary Consultants, LLC, El Campo, TX

Anna de Jesus, MBA, RD
President, Nutrition Alliance, LLC, Tempe, AZ

Lesli Doshier, RD
Dietary Directions, Fresno, CA

Sandy Gary, MS, RD, LD
Consulting Dietitian, Nutrition Consulting Services, Inc., Akron, OH

Vicki Redovian, MA, RD, LD
Director of Operations, Nutrition Consulting Services, Inc., Akron, OH

Terri Raymond, MA, RD, LD
President, Dietitian Consulting Services, LLC, Mercer Island, WA

Brenda Richardson, MA, RD, LD, CD
Chief Operations Officer, Dietary Consultants, Inc., Salem, IN

Gretchen Robinson, MS, RD, LD, FADA
Consultant Dietitian, Ada, OH

Marolyn Steffen, RD, CD
Past Owner Steffen & Associates, Inc., Valparaiso, IN

Mary Vester-Toews, RD
President, Dietary Directions, Fresno, CA

Data Processing:
Joni Kelly, Office Manager
Nutrition Consulting Services, Inc., Dunedin, FL

Proof Reader:
Caryn Heller, RDN, LD
Nutrition Consulting Services, Inc., Dunedin, FL
Policy & Procedure Manual for Food and Nutrition Services in Healthcare Facilities

This Manual is Approved for Use In:

________________________________________
(Facility and Address)

________________________________________
Administrator ____________________________ Date

________________________________________
Registered Dietitian Nutritionist ____________ Date

________________________________________
Director of Nursing _______________________ Date

________________________________________
Director of Food and Nutrition ______________ Date

________________________________________
Administrator ____________________________ Date

________________________________________
Registered Dietitian Nutritionist ____________ Date

________________________________________
Director of Nursing _______________________ Date

________________________________________
Director of Food and Nutrition ______________ Date

________________________________________
Administrator ____________________________ Date

________________________________________
Registered Dietitian Nutritionist ____________ Date

________________________________________
Director of Nursing _______________________ Date

________________________________________
Director of Food and Nutrition ______________ Date

Policy & Procedure Manual
# Table of Contents

**Introduction** | ix  
**Purpose and Objectives of the Food and Nutrition Services Department** | x  
**CMS Guidelines** | xi  
**Definitions** | xii  

## Menus and Therapeutic Diets

- **Menu Planning** | 1-1  
- **Sample Menu Shell for Menu Overview** | 1-2  
- **Sample Menu Shell for Diet Extensions** | 1-3  
- **Sample Production Sheet** | 1-4  
- **Selective Menus** | 1-5  
- **Standardized Recipes** | 1-6  
- **Menu Substitutions** | 1-7  
- **Menu Substitution Lists** | 1-8  
- **Sample Menu Substitution Sheet** | 1-10  
- **Diet/Nutrition Care Manual** | 1-11  
- **Transmission of Diet Orders** | 1-12  
- **Therapeutic Diets** | 1-13  
- **Diet Orders and RDN Order Writing** | 1-14  
- **Resident’s Right to Refuse a Diet** | 1-15  
- **Diets Available on the Menu** | 1-16  
- **Sample Diet Order Form** | 1-17  
- **Diet Order Form** | 1-18  
- **Diet Order Audit** | 1-19  
- **Sample Diet Order Audit Form** | 1-20  
- **Sample Nutrition Supplement Audit Form** | 1-21  
- **Sample Weekly Diet Census Sheet** | 1-22  
- **Making Choices That Do Not Meet Guidelines for Diet Order** | 1-23  
- **Use of Salt Substitute** | 1-24  
- **Food Replacement for Individuals with Diabetes** | 1-25  
- **Renal Diets** | 1-26  
- **Texture and Consistency-Modified Diets** | 1-27  
- **Altered Portions** | 1-28  
- **Festivity Foods or Diet Holiday** | 1-29  
- **Food and Beverages for Activities** | 1-30  
- **Clear Liquid and Full Liquid Diet** | 1-31  
- **NPO Diet Orders (Nothing by Mouth)** | 1-32  
- **Resident’s Choice Meals** | 1-33  

## Dining/Meal Service

- **The Dining Experience: Staff Responsibilities** | 2-1  
- **The Dining Experience** | 2-2  
- **The Person Centered Dining Approach** | 2-4  
- **Resource: Traits of Great Person Centered Service** | 2-5  
- **Customer Service** | 2-6  
- **Dining Room Service** | 2-7  
- **Dining Atmosphere** | 2-8  
- **Serving the Meal** | 2-9  
- **Service Staff** | 2-10  
- **Handling Customer Concerns** | 2-11  
- **Sample Dining Satisfaction Form** | 2-12  
- **Sample Dining Satisfaction Meal Evaluation Form** | 2-13
# Table of Contents

Table Setting _____________________________________________________________ 2-14  
Condiments, Food Baskets and Food Items at the Table _____________________________________________________________ 2-15  
Restaurant Style Dining _____________________________________________________ 2-16  
Family Style Dining _________________________________________________________ 2-17  
Buffet Style Dining _________________________________________________________ 2-18  
Open Style Dining _________________________________________________________ 2-20  
In-Room Dining (Room Service) ______________________________________________ 2-22  
24 Hour Dining ____________________________________________________________ 2-23  
Special Occasions – Holiday and Theme Meals __________________________________ 2-24  
Paid Feeding Assistants (Nursing Facilities) _____________________________________ 2-25  
Timely Meal Service ________________________________________________________ 2-27  
Meal Times and Frequency __________________________________________________ 2-28  
Early and Late Meals _______________________________________________________ 2-29  
Select Menus _____________________________________________________________ 2-30  
Meal Identification and Preference Cards/Tickets _____________________________________________ 2-32  
Offering Food Replacements at Meal Times _____________________________________________ 2-33  
Displaying the Menu ______________________________________________________ 2-35  
Accuracy and Quality of Tray Line Service _____________________________________________ 2-36  
Portion Control ___________________________________________________________ 2-37  
Adaptive (Assistive) Eating Devices ____________________________________________ 2-38  
Meal Time Observation _____________________________________________________ 2-39  
Following the Meal Service _________________________________________________ 2-40  
Packed Meals ____________________________________________________________ 2-41  
Pets ____________________________________________________________ 2-42  
Leave of Absence _________________________________________________________ 2-43  
Guest Meals ______________________________________________________________ 2-44  
Food Availability ________________________________________________________ 2-45  
Nourishments and Supplements __________________________________ ____________ 2-46  
Sample Nourishments and Supplements Form ___________________________________ 2-47  

## Food Production and Food Safety

Hours of Operation ____________________________________________________________ 3-1  
Director of Food and Nutrition Services' Responsibilities ____________________________ 3-2  
Inventory and Cost Control ____________________________________________________ 3-3  
HACCP and Food Safety ______________________________________________________ 3-4  
Resource: Foodborne Illnesses – What You Need to Know _____________________________________________ 3-7  
Resource: Pathogenic Microorganisms and Strategies for Their Control ____________ 3-10  
Resource: CCP Decision Tree Table ____________________________________________ 3-11  
HACCP Principles ___________________________________________________________ 3-12  
Resource: Sample HACCP Recipe ______________________________________________ 3-14  
Resource: Flow Chart ______________________________________________________ 3-15  
General HACCP Guidelines for Food Safety ______________________________________ 3-16  
Food Procurement and Facility Gardens _________________________________________ 3-19  
Accepting Food Deliveries ___________________________________________________ 3-20  
Food Storage ____________________________________________________________ 3-21  
Sample Freezer and Refrigerator Temperatures Form 1 _____________________________________________ 3-23  
Sample Freezer and Refrigerator Temperatures Form 2 _____________________________________________ 3-24  
General Food Preparation and Handling _________________________________________ 3-25  
Meat and Vegetable Preparation ______________________________________________ 3-27  
Food Temperatures ________________________________________________________ 3-28  
Resource: Critical Temperatures for Safe Food Handling _____________________________________________ 3-29
Table of Contents

Resource: Taking Accurate Temperatures ................................................. 3-30
Resource: Minimum Cooking, Holding and Reheating Temperatures ................ 3-32
Sample Food Temperatures Form .......................................................... 3-34
Sample Critical Control Point Documentation Form .................................. 3-35
Handling Cold Foods for Trayline .......................................................... 3-36
Taste Tasting ......................................................................................... 3-37
Use of Leftovers ................................................................................. 3-38
Food Allergies .................................................................................... 3-39
Ice ....................................................................................................... 3-42
Resource: Food Safety for Your Loved One ............................................ 3-43
Providing Food and Supplies for Other Departments ............................... 3-44
Sample Special Events Food/Meal Form ............................................... 3-45
Floor Stock ......................................................................................... 3-46
Sample Floor Stock Supply Form .......................................................... 3-47
Food and Nutrition Services Problems/Referral to the Director of Food and Nutrition Services ................................................................. 3-48
Reporting a Foodborne Illness (FBI) ....................................................... 3-49
Food Safety: Preventing Burns ............................................................... 3-51

Sanitation And Infection Control
Food Safety and Sanitation ................................................................. 4-1
Food Safety – Director of Food and Nutrition Service’s Responsibility .......... 4-3
Employee Sanitary Practices .................................................................. 4-4
Authorized Personnel in Food Service Department ................................... 4-5
General Sanitation of Kitchen ............................................................... 4-6
Hand Washing ...................................................................................... 4-7
Hand Antiseptic .................................................................................. 4-8
Bare Hand Contact with Food and Use of Plastic Gloves ............................ 4-9
Cleaning Dishes/Dish Machine .............................................................. 4-10
Resource: Sanitation of Dishes/Dish Machine ......................................... 4-11
Dish Machine Temperature Log ............................................................ 4-12
Sample Dish Machine Temperature and Sanitizer Log Form .................... 4-13
Resource: Dish Machine Problems and Solutions ................................... 4-14
Maintenance of Dish Machine ............................................................... 4-15
Cleaning Dishes - Manual Dishwashing .................................................. 4-16
Resource: Sanitation of Dishes/Manual Washing ....................................... 4-17
Handling Clean Equipment and Utensils ................................................. 4-18
Bedside Water Containers ...................................................................... 4-19
Dry Storage Areas ................................................................................ 4-20
Production, Storage and Dispensing of Ice ............................................ 4-21
Isolation Meals .................................................................................... 4-22
Clean-up Procedures for Vomit/Fecal Accidents ....................................... 4-24
Kitchen Cloths ..................................................................................... 4-26
Waste Disposal .................................................................................... 4-27
Pest Control ......................................................................................... 4-28

Cleaning Instructions
Cleaning and Sanitation of Dining and Food Service Areas ..................... 5-1
Sample Cleaning Schedule ..................................................................... 5-2
Sample Daily Cleaning Schedule Form .................................................. 5-3
Sample Weekly Cleaning Schedule Form ................................................. 5-4
Sample Monthly Cleaning Schedule Form .............................................. 5-5
# Table of Contents

**Resource: Infection Control Cleaning Agents** .......................... 5-6  
**Material Safety Data Sheets** .................................................. 5-7  
**Cleaning Instructions**  
- Broilers .............................................................................. 5-8  
- Cabinets and Drawers ..................................................... 5-9  
- Can Opener ........................................................................... 5-10  
- Cleaning Cloths, Pads, Mops and Buckets ......................... 5-11  
- Coffee, Beverage, Juice, Frozen Yogurt or Ice Cream Machines................................. 5-12  
- Counter Space .................................................................... 5-13  
- Cutting Boards .................................................................... 5-14  
- Floors, Tables and Chairs .................................................. 5-15  
- Food Carts ........................................................................... 5-16  
- Food Preparation Appliances ........................................... 5-17  
- Freezers .............................................................................. 5-18  
- Fryers .................................................................................. 5-19  
- Garbage Disposals ............................................................ 5-20  
- Hoods and Filters ............................................................. 5-21  
- Ice Machine and Equipment ............................................. 5-22  
- Microwave Oven ............................................................. 5-23  
- Ovens ................................................................................. 5-24  
- Ranges ............................................................................... 5-25  
- Refrigerators ....................................................................... 5-26  
- Slicers .................................................................................. 5-27  
- Steam Tables ....................................................................... 5-28  
- Toasters ............................................................................... 5-29  

**Safety**  
- Safety Guidelines ................................................................ 6-1  
- Safe Water Temperatures .................................................. 6-2  
- Safety in Food Preparation ............................................... 6-3  
- Equipment Safety ............................................................ 6-4  
- Knife Safety ....................................................................... 6-5  
- Dishware and Glassware Safety .......................................... 6-6  
- Dish Clearing and Cleaning Safety ...................................... 6-7  
- Receiving and Storage Safety ............................................ 6-8  
- Lifting Techniques ............................................................ 6-9  
- Floor Safety ........................................................................... 6-10  
- Fire Prevention ................................................................... 6-11  
- Fire Plan for Food and Nutrition Services Department .......... 6-12  
- Resource: How to Contain Food and Nutrition Services Department Fires ...................... 6-13  
- Resource: Helpful Fire Safety Information ......................... 6-14  
- Facility Specific Policy and Procedure for Fires .................... 6-16  
- Resource: Emergency First Aid .......................................... 6-17  
- Emergency Eye Wash ........................................................ 6-18  
- Accident/Incident Report .................................................. 6-20  
- Malfunctions and Repairs .................................................. 6-22  

**Personnel/Training**  
- Personnel - General ........................................................ 7-1  
- Director of Food and Nutrition Services .......................... 7-2  
- Line of Authority .............................................................. 7-3  
- Staffing the Food and Nutrition Services Department .......... 7-4  

*Policy & Procedure Manual*  
# Table of Contents

Facility Personnel Forms/Policies .................................................. 7-5  
Sample Interview Questions .......................................................... 7-6  
Training/Orientation ....................................................................... 7-7  
Nursing Homes: Resident's Rights Training ............................................... 7-9  
Facility-Wide Inservice Training ....................................................... 7-10  
Hospitals: Patient's Rights Training .................................................... 7-11  
Sample Training/Orientation Form .................................................... 7-12  
Health Insurance Portability and Accountability Act of 1996 (HIPAA) ............ 7-13  
Sample Personal Hygiene Training Policy ............................................... 7-14  
Inservice Training ......................................................................... 7-15  
Resource: Inservice Training ............................................................ 7-16  
Sample Inservice Training Report Form ............................................. 7-17  
Sample Inservice Sign In Form .......................................................... 7-18  
Evaluating Food and Nutrition Services and Clinical Nutrition Personnel ............. 7-19  
Employee Evaluation Forms ............................................................. 7-20  
Sample Vacation/Leave Request Form ............................................... 7-21  
Sample Employee Request for Leave Form ........................................... 7-22  
Employee Request for Leave Form .................................................... 7-23  
Resource: Facilitating Adult Learning .................................................. 7-24  

## Clinical Documentation

Right to Deviate from Clinical Policy and Procedure ................................. 8-1  
Philosophy and Standards of Clinical Care ............................................. 8-2  
Documenting in the Medical Record .................................................... 8-3  
Diet History ................................................................................. 8-4  
Sample Food Preferences Form .......................................................... 8-5  
Alternates for Food Dislikes ............................................................... 8-6  
System for Recording Food Preferences .............................................. 8-7  
Food Preference Form and/or Meal Identification Card ............................. 8-8  
Recording Percent of Meal Consumed ................................................. 8-9  
Alternate Meal Recording System ....................................................... 8-10  
Sample Food Intake Record/Total Meal Percentage Form ......................... 8-11  
Sample Food Intake Record/Point System Form ..................................... 8-12  
Food Intake Record ........................................................................ 8-13  
Nutrient Intake Study ..................................................................... 8-14  
Sample Food Intake Study Form ....................................................... 8-15  
Individuals Who Do Not Drink Milk ................................................... 8-16  
Nutrition Screening for Referrals to the Registered Dietitian Nutritionist ........... 8-17  
Referrals to the Registered Dietitian Nutritionist ....................................... 8-19  
Sample Referrals for Registered Dietitian Nutritionist Form (1) ...................... 8-21  
Sample Referrals for Registered Dietitian Nutritionist Form (2) ................. 8-22  
Mini Nutritional Assessment MNA® .................................................... 8-23  
Self-MNA® Mini Nutritional Assessment .............................................. 8-24  
Sample Letter to Physician ............................................................... 8-26  
Sample Physician Communication Mini Nutritional Assessment® Report for Malnutrition 8-27  
Medical Nutrition Therapy Documentation ........................................... 8-28  
Resource: Role Delineation (Division of Responsibility for Documentation) ........ 8-30  
Comprehensive Medical Nutrition Therapy Assessment ......................... 8-32  
Resource: Medical Nutrition Therapy Assessment: Components of a Comprehensive Assessment .......................................................... 8-35  
Resource: Nutrition-Focused Physical Assessment .................................... 8-38  
Comprehensive Care Plan .................................................................. 8-41
Table of Contents

Resource: Weight-Related Nutrition Interventions _________________________________ 8-43
Medical Nutrition Therapy Documentation Forms ________________________________ 8-46
Medical Nutrition Therapy Recommendations _________________________________ 8-47
Sample Nutrition Recommendations Form __________________________________ 8-48
Communication of Nutritional Concerns ______________________________________ 8-49

Anthropometrics
Obtaining Accurate Heights ___________________________________________________ 9-1
Resource: How to Obtain Accurate Heights ______________________________________ 9-2
Obtaining Accurate Weights __________________________________________________ 9-3
Resource: How to Obtain Accurate Weights ______________________________________ 9-4
Adjusting Weights for Amputees ______________________________________________ 9-6
Measurements for Those Who Can’t be Weighed ________________________________ 9-7
Sample Measurements Tracking for Individuals Who Cannot be Weighed Form _______ 9-9
Resource: Height/Weight Tables for Determining Body Weight Ranges ______________ 9-10
Determining Body Mass Index ________________________________________________ 9-11
Resource: Body Mass Index Tables ____________________________________________ 9-11
Resource: Significant Weight Change __________________________________________ 9-13
Tracking Weight Changes ____________________________________________________ 9-14
Sample Monthly Weight Record Form __________________________________________ 9-15
Sample Individual Weight Chart Form _________________________________________ 9-16
Sample Weekly Weight Record Form ___________________________________________ 9-17
Sample Significant Weight Changes Form ______________________________________ 9-18
Sample Weight Change Notification and Recommendations Form _________________ 9-19
Sample Significant Weight Loss Form __________________________________________ 9-20
Immediate Temporary Interventions for Unplanned Significant Weight Loss ____________ 9-21
Significant Weight Loss _____________________________________________________ 9-22
Significant Weight Gain _____________________________________________________ 9-25

Nutrition Interventions
Nutrition at Risk Committee (or Weight Intervention and Nutrition Support Committee) ___ 10-1
Interventions for Unintended Weight Loss ______________________________________ 10-2
Resource: Potential Interventions for Unintended Weight Loss ________________ 10-3
Resource: Calorie Boosters/Fortified Foods ___________________________________ 10-5
Resource: Protein Boosters _________________________________________________ 10-6
High Calorie/High Protein Supplements ______________________________________ 10-7
Supplement Formulary ______________________________________________________ 10-8
Dehydration ______________________________________________________________ 10-9
Resource: Additional Recommendations for Promoting Adequate Hydration ________ 10-11
Fluids at the Bedside ________________________________________________________ 10-12
Encourage Fluids Order _____________________________________________________ 10-13
Fluid Restrictions and Sample Distribution of Fluids ____________________________ 10-14
Pressure Injuries ___________________________________________________________ 10-15
Resource: Risk Factors for Pressure Injury Development ________________________ 10-18
Resource: Nutritional Needs for Prevention and Treatment of Pressure Injuries _____ 10-19
Individuals on Unsupplemented Clear Liquids or NPO ____________________________ 10-21
Dysphagia ________________________________________________________________ 10-22
Resource: Dysphagia Warning Signs _________________________________________ 10-23
EAT-10 Swallowing Screening Tool ____________________________________________ 10-24
Resource: Positioning Tips to Increase Independence and Reduce Risk of Aspiration or Choking ___________________________________________________________ 10-25
Thickened Liquids _________________________________________________________ 10-26
Table of Contents

End of Life Decisions ................................................................. 10-28
Sample Decline of Life-Prolonging Procedures and Treatments Form ...................... 10-29
Guidelines for Enteral Feeding Eligibility .............................................. 10-30
Enteral Nutrition Care ...................................................................... 10-31
Basic Guidelines for Enteral Feeding .................................................. 10-32
Documentation for Enteral Feeding ..................................................... 10-33
Enteral Formulas ............................................................................. 10-34
Transitioning From Enteral Feedings to Oral Feedings .................................... 10-35
Enteral Feedings .............................................................................. 10-36
Total or Peripheral Parenteral Nutrition ................................................... 10-37
Food-Medication Interactions ............................................................... 10-39
Education for Food-Medication Interactions ........................................... 10-40

Quality Assurance and Performance Improvement
Quality Assurance and Performance Improvement (QAPI) ................................... 11-1
Sample Quality Assurance and Performance Improvement Goal Worksheet ............... 11-2
Sample Facility Goals Form ................................................................ 11-3
Sample Monthly QAPI Reports Form .................................................... 11-4
Sanitation Audit .............................................................................. 11-6
Sample Sanitation Audit Form 1 ........................................................... 11-7
Sanitation Audit Sample Form 2 ............................................................ 11-9
Sanitation Audit Form ...................................................................... 11-13
Meal Preparation and Service Audit ....................................................... 11-14
Sample Meal Preparation and Service Audit Form ........................................ 11-15
Tray Line Audit .............................................................................. 11-17
Sample Tray Line Audit Form ................................................................ 11-18
Meal Round Audit ............................................................................ 11-19
Sample Meal Round Audit Form .......................................................... 11-20
Food Satisfaction Audit .................................................................... 11-22
Sample Food Satisfaction Questionnaire Form .......................................... 11-23
Test Meal/Tray Audit ....................................................................... 11-24
Sample Test Meal/Tray Audit Form ......................................................... 11-25
Medical Record and Documentation Audit ................................................ 11-26
Sample Chart Audit Form ................................................................... 11-28
Sample Diet Order Audit Form ............................................................. 11-29
Sample Supplements/Nourishments Audit Form ......................................... 11-30
Sample In-Depth Documentation Audit Form ......................................... 11-31
Oral Nutritional Supplement (ONS)/Snack Audit ........................................... 11-32
Sample Oral Nutritional Supplement/Snack Audit Form ............................... 11-33
Sample Oral Nutrition Supplement/Snack Pass Audit Form ............................ 11-34
Sample Meal Quality Survey Form ......................................................... 11-35
Resource: Audit to Assess Quality of Care Provided and to Prepare for Surveys ......... 11-36
Guide to Developing Facility’s Annual QAPI Plan ............................................ 11-39
Sample QAPI Plan for Unintended Weight Loss (UWL) ..................................... 11-40

Disaster Planning
Emergency and Disaster Planning ................................................................ 12-1
Back-ups for Electronic Files ................................................................... 12-3
Employee Training ............................................................................. 12-4
Resource: Food and Nutrition Service Disaster Plan ........................................ 12-6
Coordination of Emergency and Disaster Plan ............................................. 12-8
Sample Disaster Responsibilities and Assignments Form .................................. 12-9
## Table of Contents

- Sample Letter of Intent for Provision of Emergency Supplies ........................................ 12-10
- Emergency Contact Information .................................................................................. 12-11
- Emergency Contacts .................................................................................................... 12-12
- Sample Medical Nutrition Therapy Information Form .............................................. 12-13
- Sample Location of Needed Items and Information During a Disaster Form ................ 12-14
- Water Requirements .................................................................................................... 12-15
- Sources of Water During an Emergency .................................................................... 12-17
- Water Purification ....................................................................................................... 12-18
- Resource: Non-Perishable Foods List for Emergency Supply .................................... 12-20
- Resource: Emergency Menu and Supplies .................................................................. 12-22
- Resource: Emergency Plan Special Diets Conversion Table ..................................... 12-23
- Sample Menu Shell ..................................................................................................... 12-24
- Suggested Emergency Menu Pattern ......................................................................... 12-25
- Suggested Serving Sizes for Starch Portions for Diabetic Diets ................................. 12-26
- Day 1 Emergency Meal Plan – Assumes No Utilities ................................................ 12-27
- Day 2 Emergency Meal Plan – Assumes No Utilities ................................................ 12-28
- Day 3 Emergency Meal Plan – Assumes No Utilities ................................................ 12-29
- Hand Washing During a Disaster .................................................................................. 12-30
- Dishwashing Without Electricity .................................................................................. 12-31
- Resource: General Disaster Supplies .......................................................................... 12-32
- Internal Policies ............................................................................................................ 12-34
- Resource: Fire Prevention Plan ..................................................................................... 12-35
- Disaster Resources ...................................................................................................... 12-36

General References and Resources .............................................................................. 13-1
Introduction

This policy and procedure manual can be used by hospitals, skilled nursing facilities, and other post-acute care facilities. Much of the language in the manual is based on Medicare and Medicaid Programs; Reform of Requirements for Long-Term Care Facilities: A Rule by the Centers for Medicare & Medicaid Services (CMS) released on 10/04/2016. However, the policies, procedures, and resources can apply to a variety of acute and post-acute care facilities. When using the policies and procedures, also follow guidelines outlined by federal, state, and local authorities, including the Joint Commission and/or CMS.

The October 2016 rules issued by CMS add new language including language that:

- Designates dietary departments as “food and nutrition services” departments. This term will be used throughout this manual.
- Refers to nutrition care professionals as “qualified dietitians” (as defined below). For the purposes of this manual, the term Registered Dietitian Nutritionist (RDN) will be used most often with qualified dietitian used where appropriate.
- Allows a resident’s attending physician to delegate the task of writing dietary orders, to a qualified dietitian or other clinically qualified nutrition professional who is acting within the scope of practice as defined by State law; and is under the supervision of a physician (1). It is incumbent on each qualified dietitian that is employed in or consults in a CMS-certified facility to check with state licensure or certification laws and work within facility policies and procedures before implementing order-writing as designated by a physician. While many of the policies and procedures in this manual mention orders written by a physician or designee, it is recognized that each facility may have adopted order-writing by the qualified dietitian, as delegated by the physician and in accordance with state law.
- Refers to “residents/patients” to describe the patient population unless the information is specific to nursing homes, and then the term “resident” will be used. For purposes of this manual, the terms “individual”, “resident” and “patient” may be used interchangeably.

This manual will address policies and procedures for most aspects of the food and nutrition services department operation. Other policies and procedures (such as abuse and neglect policies, personnel policies, emergency policies, and others), are available in each facility’s general policy and procedure manual and may be inserted into this food and nutrition services policy and procedure manual as appropriate. Policies and procedures included in this manual include the following subject areas:

1. Menus and Therapeutic Diets
2. Dining/Meal Service
3. Food Production and Food Safety
4. Sanitation and Infection Control
5. Cleaning Instructions
6. Safety
7. Personnel/Training
8. Clinical Documentation
9. Anthropometrics
10. Nutrition Interventions
11. Quality Assurance and Performance Improvement
12. Disaster Planning
The purpose of the food and nutrition services department is to provide high quality, nutritious, palatable and attractive meals in a safe, sanitary manner. Food will be prepared in a form to accommodate resident/patient allergies, intolerances, and personal, religious, and cultural preferences, based on reasonable efforts. Therapeutic diets will be served as prescribed by the attending physicians or their designee.

The department will follow policies and procedures developed in accordance with local, state and federal regulations and will plan, organize, and evaluate all aspects of food and nutrition services.

Objectives of the food and nutrition services department are:
1. To provide food and drink that is nutritious, palatable, attractive, and at a safe and appetizing temperature to meet individual needs.
2. To promote optimal nutritional status of each individual through medical nutrition therapy (MNT), in accordance with written orders for nutrition care and consistent with each individual's physical, cultural, and religious needs and personal preferences.
3. To provide the highest quality food possible at a cost consistent with the facility’s budget guidelines.
4. To establish standards for planning menus, preparing and serving food, and controlling food costs.
5. To periodically evaluate the work of the department for the purpose of quality assurance and performance improvement.
6. To provide the services of a RDN or designee to participate in the interdisciplinary care planning team and assure that the nutritional needs of individuals living in the facility are met.

The Director of Food and Nutrition Services:
- Directs the food and nutrition services department.
- Is ultimately responsible for assuring safe, wholesome, high quality food and resident/patient satisfaction.
- Participates in resident care planning and assists with clinical documentation in the medical record.
- Works under the supervision of the qualified dietitian.

Note: Support staff work under the supervision of the registered dietitian nutritionist (RDN). Support staff include nutrition and dietetic technicians registered (NDTR), certified dietary managers (CDM), directors of food and nutrition services, etc. The RDN may delegate certain tasks based on the scope of practice and competency level of each member of the nutrition team.
The Centers for Medicare and Medicaid Services (CMS) Requires the Following Guidelines for Staffing in the Department of Food and Nutrition Services in Skilled Nursing Facilities:

**Qualified Dietitian:** The CMS State Operations Manual requires that the facility must employ a qualified dietitian either full time, part time, or on a consultant basis. This includes:

1. A qualified dietitian or other clinically qualified nutrition professional either full-time, part-time, or on a consultant basis. A qualified dietitian or other clinically qualified nutrition professional is one who:
   - (i) Holds a bachelor’s or higher degree granted by a regionally accredited college or university in the United States (or an equivalent foreign degree) with completion of the academic requirements of a program in nutrition or dietetics accredited by an appropriate national accreditation organization recognized for this purpose.
   - (ii) Has completed at least 900 hours of supervised dietetics practice under the supervision of a registered dietitian or nutrition professional.
   - (iii) Is licensed or certified as a dietitian or nutrition professional by the State in which the services are performed. In a State that does not provide for licensure or certification, the individual will be deemed to have met this requirement if he or she is recognized as a “registered dietitian” by the Commission on Dietetic Registration or its successor organization, or meets the requirements of paragraphs (a)(1)(i) and (ii) of this section.
   - (iv) For dietitians hired or contracted with prior to November 28, 2016, meets these requirements no later than 5 years after November 28, 2016 or as required by state law.

If a qualified dietitian or other clinically qualified nutrition professional is not employed full-time, the facility must designate a person to serve as the director of food and nutrition services who receives frequently scheduled consultation from a qualified dietitian.

The CMS State Operations Manual states:

The Food and Nutrition Services Director must meet educational requirements as follows: For designations prior to November 28, 2016, meets the following requirements no later than 5 years after November 28, 2016, or no later than 1 year after November 28, 2016 for designations after November 28, 2016, is:

(A) A certified dietary manager; or
(B) A certified food service manager; or
(C) Has similar national certification for food service management and safety from a national certifying body; or
(D) Has an associate’s or higher degree in food service management or in hospitality, if the course study includes food service or restaurant management, from an accredited institution of higher learning; and

(i) In States that have established standards for food service managers or dietary managers, meets State requirements for food service managers or dietary managers, and

(ii) Receives frequently scheduled consultations from a qualified dietitian or other clinically qualified nutrition professional. Source: Advanced Copy - Revisions to State Operations Manual.

The facility must employ sufficient staff with the appropriate competencies and skills sets to carry out the functions of the food and nutrition service, taking into consideration resident assessments, individual plans of care and the number, acuity and diagnoses of the facility’s resident population in accordance with the facility assessment required at §483.70(e) [As linked to Facility Assessment, §483.70(e), will be implemented beginning November 28, 2017 (Phase 2)].

Definitions

Registered Dietitian (RD) or Registered Dietitian Nutritionist (RDN): Registered by the Commission on Dietetic Registration (CDR) of the Academy of Nutrition and Dietetics (minimum of bachelor degree in dietetics and/or nutrition with approved internship, and has passed registration exam). CDR defines registered dietitian nutritionist (RDN) as “individuals who have:

- completed the minimum of a Baccalaureate degree granted by a U.S. regionally accredited college or university, or foreign equivalent;
- met current minimum academic requirements (Didactic Program in Dietetics) as approved by the Accreditation Council for Education in Nutrition and Dietetics (ACEND) of the Academy of Nutrition and Dietetics;
- completed a supervised practice program accredited by the Accreditation Council for Education in Nutrition and Dietetics (ACEND) of the Academy of Nutrition and Dietetics;
- successfully completed the Registration Examination for Dietitians;
- remitted the annual registration fee;
- complied with the CDR Professional Development Portfolio (PDP) recertification requirements”

Source: Who is a Registered Dietitian (RD) or Registered Dietitian Nutritionist (RDN) Commission on Dietetic Registration Web Site: https://www.cdrnet.org/about/who-is-a-registered-dietitian-rd. (2)

Note: The term Registered Dietitian (RD) may be used interchangeably with the term Registered Dietitian Nutritionist (RDN).

Licensed Dietitian (LD) or Licensed Dietitian Nutritionist (LDN): Licensed by the state if the state has dietetic licensure. Each state has different requirements for licensure however, most include minimum qualifications of the RDN as noted above.

Certified Dietitian (CD): Four-year degree in nutrition/dietetics or food and nutrition. Certified by the state. Each state has different requirements for certification however, most include minimum qualifications of the RDN as noted above.

Nutrition Support Staff: May include nutrition and dietetic technicians, registered (NDTR), nutrition associates (four year degree in nutrition/dietetics), certified dietary managers (CDM), directors of food and nutrition services, or other support staff.

Nutrition and Dietetics Technician, Registered (NDTR): Minimum completion of an associate degree in nutrition/dietetics. May be registered by the Commission on Dietetic Registration of the Academy of Nutrition and Dietetics (nutrition and dietetic technician, registered or NDTR – has completed a qualified internship and passed the CDR registration exam). Works under the supervision of the RDN and/or LD.

“Nutrition and Dietetics Technicians, Registered (NDTR)* or a Dietetic Technicians, Registered (DTR)* are individuals who have: completed a minimum of an Associate degree granted by a U.S. regionally accredited college or university, or foreign equivalent:

- completed a minimum of 450 supervised practice hours through a Dietetic Technician Program as accredited by the Accreditation Council for Education in Nutrition and Dietetics (ACEND) of the Academy of Nutrition and Dietetics;
- successfully completed the Registration Examination for Dietetic Technicians; and
- remitted the annual registration maintenance fee; and
- complied with the Professional Development Portfolio (PDP) recertification
Definitions

- completed the minimum of a baccalaureate degree granted by a U.S. regionally accredited college or university, or foreign equivalent;
- met current academic requirements (Didactic Program in Dietetics) as accredited by the Accreditation Council for Education in Nutrition and Dietetics (ACEND) of the Academy of Nutrition and Dietetics;
- successfully completed the Registration Examination for Dietetic Technicians;
- remitted the annual registration maintenance fee; and complied with the Professional Development Portfolio (PDP) recertification requirements."

Source: Who is a Nutrition and Dietetics Technician, Registered (NDTR), or a Dietetics Technician, Registered (DTR)? Commission on Dietetics Registration Website. https://www.cdrnet.org/about/who-is-a-dietetic-technician-registered-dtr. (3)

Note: The term Dietetic Technician, Registered (DTR) may be used interchangeable with the term Nutrition and Dietetic Technician, Registered (NDTR).

Medical Nutrition Therapy (MNT): The Academy defines MNT as “an evidence-based application of the Nutrition Care Process that may include one or more of the following: nutrition assessment/reassessment, nutrition diagnosis, nutrition intervention and nutrition monitoring and evaluation that typically results in the prevention, delay or management of diseases and/or conditions”.


Nutrition Care Process: A systematic approach to providing high quality nutrition care. Use of a care process provides a framework for the RDN to individualize care, taking into account the patient/client’s needs and values and using the best evidence available to make decisions. There are four steps in the process:

- Nutrition Assessment
- Nutrition Diagnosis
- Nutrition Intervention
- Nutrition Monitoring and Evaluation (4)

Therapeutic Diet: “A therapeutic diet is a diet intervention prescribed by a physician or other authorized non-physician practitioner that provides food or nutrients via oral, enteral and parenteral routes as part of treatment of disease or clinical conditions to modify, eliminate, decrease, or increase identified micro- and macro-nutrients in the diet”.


The term therapeutic diet is used by CMS in its Resident Assessment Instrument Minimum Data Set (MDS) 3.0 for Long Term Care/Nursing Homes. CMS includes interpretive recommendations for clarifying a “supplement” and mechanically altered diets for coding purposes on the MDS:

- Therapeutic diets are not defined by the content of what is provided or when it is served, but why the diet is required. Therapeutic diets provide the corresponding treatment that addresses a particular disease or clinical condition, which is manifesting an altered nutritional status by providing the specific nutritional requirements to remedy the
Definitions

- A nutritional supplement (house supplement or packaged) given as part of the treatment for a disease or clinical condition manifesting an altered nutrition status, does not constitute a therapeutic diet, but may be part of a therapeutic diet. Therefore, supplements (whether given with, in-between, or instead of meals) are only coded in K0500D, Therapeutic Diet when they are being administered as part of a therapeutic diet to manage problematic health conditions (e.g. supplement for protein-calorie malnutrition).

- A mechanically altered diet should not automatically be considered a therapeutic diet.

Scope of Practice:
The Academy of Nutrition and Dietetics (Academy) has adopted the statutory scope of practice definition from The Center for the Health Professions, University of California, San Francisco as follows:

“Legal scopes of practice for the health care professions establish which professionals may provide which health care services, in which settings, and under which guidelines or parameters. With few exceptions, determining scopes of practice is a state based activity. State legislatures consider and pass the practice acts, which become state statute or code. State regulatory agencies, such as medical and other health professions’ boards, implement the laws by writing and enforcing rules and regulations detailing the acts.”


References:
Menu Planning

Policy:

Nutritional needs of individuals will be provided in accordance with the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences (adjusted for age, gender, activity level and disability), through nourishing, well-balanced diets, unless contraindicated by medical needs. Based on a facility’s reasonable efforts, menus should reflect the religious, cultural, and ethnic needs of the patient/resident population, as well as input received from residents and resident groups.

Procedure:

1. Menu planning will be completed by the facility at least 2 weeks in advance of service and menus kept on file for a minimum of 90 days (check individual state regulations for exceptions to this procedure). All current menus will be posted in the kitchen area during the appropriate time period. Regular and therapeutic menus will be written to provide a variety of foods served on different days of the week, adjusted for seasonal changes, and in adequate amounts at each meal to satisfy recommended daily allowances. If menus are written in cycles, they are rotated. Menu cycles should cover a 4 to 5 week period of time for long term care settings. If select menus are in place, rotations can be as little as 1 to 7 days depending on the number of selections, and the average length of stay for patients/residents. (See Sample Menu Shells later in this chapter.)

2. Menus will be written using an accepted, standard meal planning guide, such as the USDA Choose MyPlate. Menus will include at least three meals daily at regular times, in amounts consistent with nutritional needs. A substantial evening meal consisting of three or more menu items will be offered, one of which includes high quality protein. The meal will contain no less than 20% of the day’s total nutritional requirements. If there are more than 14 hours between the evening meal and breakfast the following day, a nourishing snack will be offered at bedtime. A nourishing snack is defined as a verbal offering of items, single or in combination, from the basic food groups. In order for the nourishing snack to be considered adequate, individual patients/residents should participate in the selection of the snack, and verbalize satisfaction with the snack.

3. Regular and therapeutic menus will be written by the facility’s food and nutrition professional in accordance with the facility’s approved diet manual, or purchased from an approved vendor. The registered dietitian nutritionist (RDN) or designee will approve all menus.

4. Menus will be posted in areas, and at heights where all individuals can easily view them.

5. Temporary changes in the menu will be noted on the menu substitution sheets and posted for the staff’s benefit. (See Sample Menu Substitution Sheet later in this chapter.) The RDN or designee will approve all permanent menu changes.

6. Significant information and/or response to each individual’s diet will be recorded in the medical record and/or care plan. For example: “Mr. Jones refuses breakfast but will eat a sandwich and juice at 10 a.m.”

Note: Support staff work under the supervision of the registered dietitian nutritionist (RDN). Support staff include nutrition and dietetic technicians, registered (NDTR), nutrition associates (four year degree in nutrition/dietetics), certified dietary managers (CDM), directors of food and nutrition services, etc. The RDN may delegate certain tasks based on the scope of practice and competency levels of each member of the nutrition team.