

Nutrition Bytes

A bulletin to assist those in the residential care field to meet regulation requirements as it pertains to food and nutrition services.

This bulletin only suggests some ways to meet Regulation and is not all inclusive

The Role of the Food Services Manager and the Dietitian in Community Care Facilities (over 24 beds) Part 1

1. What does the Regulation say?

Nutrition Plan

- 83** (2) A licensee of a community care facility with more than 24 persons in care must develop, with the assistance of a dietitian, a nutrition plan for each person in care.
- (3) A licensee must review the nutrition plan of a person in care with a dietitian on a regular basis and if requested or required by
- (a) a health care provider who provides care to the person in care,
 - (b) a medical health officer, or
 - (c) a funding program.

Food services employees

- 44** (2) A licensee who accommodates 50 or more persons in care in a community care facility must have, to supervise the preparation and delivery of food, a food services manager who is
- (a) a nutrition manager with membership in the Canadian Society of Nutrition Management,
 - (b) a person who is eligible to be a member of the Canadian Society of Nutrition Management, or
 - (c) a dietitian

2. Why do I need to know this?

You need to know that the Regulation outlines WHEN you would need a Foodservice Manager and Dietitian. The intent is to also outline the responsibilities of the Foodservices Manager and Dietitian.

3. How do you know you are in compliance with the Regulations?

For facilities with over 24 persons in care

There should be documentary evidence that the nutrition plan was developed for each person in care with the assistance of a Dietitian. Examples of the Dietitian's involvement in the nutrition plan could include:

- Nutrition assessment records, chart notes, communication log books and the dietitian's participation in care conferences and food committee meetings.

Components which can be included in a nutrition plan are:

- Diet type (regular, diabetic).
- Diet texture (regular, minced or pureed).
- Portion size (such as small, medium or large).
- Special instructions such as food preference/allergies/special supplements.
- The in between meal snack (if applicable).
- The use of a supplement (type, frequency and amount).

For facilities with 50 or more persons in care

- There should be documentary evidence to support that the Food Services Manager supervises the preparation and delivery of food to the persons in care.
- A registered Dietitian is also a qualified Foodservices Manager. When there is no registered Dietitian, the Foodservices Manager must be a member or eligible to be a member of the Canadian Society of Nutrition Managers (CSNM). Licensees are encouraged to refer to www.csnm.ca for more information regarding membership eligibility.
- Both the Registered Dietitian and the Nutrition Manager are expected to have current memberships in their respective regulatory bodies.

Examples of duties include having the following in place:

- Recipes, to ensure the quantity of food, as well as preparation to maintain food quality and safety.
- Inventory, and production sheets to ensure required food is available to follow the established menu with minimal shortages.
- Training documents to support that foodservice staff are trained in the proper use of all kitchen equipment to produce food of the correct texture, temperature, portion and taste.
- Accurate diet and serving lists to ensure the correct diet is served to the correct person in care.
- A system for communicating how foodservice staff are expected to handle diet change requests, documentation of matters that require follow-up by the Food Services Manager and/or the Dietitian (e.g. refusal to eat or poor appetite).
- Food services and nutrition quality monitoring plans such as those identified in the 'Audits and More' manual.
- Policies and procedures available for foodservices and nutrition which guide foodservice staff in their roles and responsibilities.

Review of the Nutrition Plan

The nutrition plan must be documented, current and there must be evidence that it was reviewed by a Dietitian and may include:

- Dietitian assessment and review schedule which correlates with the completed nutrition reviews
- As per the Residential Care Regulation, Order in Council #039 dated January 15, 2010, there is a requirement that the nutrition plans are reviewed 'regularly'.
- Section 81 (4)(ii) of the Residential Care Regulation (RCR) provides the timeline for regular review as:
 - At least once each year when there is no substantial change in the person in care.

Example of a Licensee meeting the Regulation Requirements

Sunshine Hill Care home is a 51 bed long term care facility.

Each person in care (PIC) has a nutrition care plan developed and reviewed by a Registered Dietitian (RD).

There is also a qualified Foodservices/Nutrition Manager who is a member of the Canadian Society of Nutrition Managers who supervises and oversees the food production and dietary staff.

Staff have noticed that one of the PICs who is a diabetic and on a minced diet has been more confused lately; as a result he has not been eating well and this in turn has resulted in weight loss and poorly controlled blood glucose levels.

To help assess this PIC's nutrition needs, the nursing staff have completed a referral form to the dietitian.

The referral resulted in food/fluid recommendations made by the RD to help address these nutritional issues. The RD worked closely with the Food/Nutrition Manager to ensure that the dietary staff provided the correct diet and fluids to the PIC.

The RD monitored the PICs monthly weights and 3 months later reviewed the nutrition plan and found that there were no changes necessary for now as the PIC had regained weight and blood glucose was normalized.

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