

BEST PRACTICE DINING / MEAL SERVICE TECHNIQUES

Social factors

Evaluate social factors that may detract from the resident's eating experience.

- Is the eating environment comfortable, quiet, calm?
- Does the resident eat alone? Eating with company increases food intake.
- Does noise or other distractions interfere with mealtime?
- Is the visual appeal and temperature of the food optimal?
- Is food served when the resident wants to eat?
- Are residents served simultaneously when seated at the same table?

Individual

Facilitate increased food consumption

- Interview the resident and family members to determine food preferences
- Eliminate dietary restrictions (low salt, low sugar, low fat) that impact taste or palatability in consultation with the physician
- Try different food textures and offer foods that are easier to chew and swallow for residents with chewing and swallowing problems
- Note residents with poor meal intake, who are normally independent, and offer encouragement and assistance

Provide feeding assistance

- Offer finger foods to residents who cannot use eating utensils
- Enlist occupational therapy to help residents improve dexterity and control or provide adaptive devices
- Determine which residents are candidates for feeding assistance including
 - Verbal prompts
 - Physical guidance such as hand-over-hand feeding
 - Feeding residents who cannot eat independently

Enhance the dining experience

- Provide a comfortable *home-like* atmosphere / environment
- Provide fluids while waiting for meal service / serve at least two beverages with meals
- Remove meals from trays and serve residents seated together at the same time
- Serve food with adequate portions, correct textures, and at appropriate temperatures
- Present foods so that they appear and smell appealing (for example bake bread or cookies)
- Vary the menu choices so that they are not monotonous
- Ask the resident for preference of dining companions
- Position residents properly for eating and drinking (i.e. wheelchair arms are under the table) to promote independence, prevent aspiration, and minimize fatigue for frail residents
- Provide prompt, personal, and cheerful assistance when needed
- Feed residents who are dependent while seated at eye level
- Provide oral nutritional supplements between meals or after the meal is eaten
- Avoid medications and treatments in the dining room
- Provide administrative oversight during the meal
- Schedule staff lunch breaks before or after residents' meal service

Family support

- Ask family members about the resident's food preferences
- Encourage family presence at meals
- Ask family to assist the resident with meals as needed
- Request favorite foods brought from home

