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Chapter 411@ DEPARTMENT OF HUMAN SERVICES, AGING AND PEOPLE WITH DISABILITIES AND DEVELOPMENTAL DISABILITIES

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Division 86@ NURSING FACILITIES/LICENSING - ADMINISTRATION AND SERVICES

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Section 411-086-0250@ Dietary Services

411-086-0250 Dietary Services

(1)

DIETARY SERVICES DEPARTMENT. The facility shall have a dietary services department which complies with the Food Sanitation Rules, OAR chapter 333, division 150. (a) Admittance to the kitchen shall be restricted to those who must enter to perform their duties, to government inspectors, or for peer review. (b) Written procedures for cleaning equipment and work areas shall be prepared and enforced. (c) Foods shall be protected from contamination during transportation. (d) There shall be a minimum of one week supply of staple foods and two-day supply of perishable foods on the premises.

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(2)

DIETARY SERVICES DIRECTOR. (a) Qualifications. Overall supervision of the dietary service shall be assigned to a full-time dietary service director who is a registered dietitian, or: (A) Is a graduate of a dietetic technician training program (correspondence or classroom) approved by the American Dietetic Association or dietary management training approved by the American Dietary Manager Association; and (B) Has on-site consultation provided at least monthly. (i) The consultant shall be a registered dietitian or a person with a baccalaureate degree or higher with major studies in food, nutrition, diet therapy, or food service management. (ii) The consultant shall have at least one year of supervisory experience in an institutional dietary service and shall participate in continuing education annually. (iii) The visits of the consultant shall be of sufficient duration to review dietary systems and assure quality food to the resident. (b) Responsibilities. The dietary services director has responsibility, with guidance from the consultant if the director is not a registered dietitian, for: (A) Orientation, work assignments, supervision of work, and food handling technique for dietary service staff. The director shall assure that employees who have or exhibit signs of a communicable disease do not remain on duty; (B) Participation in regularly scheduled conferences with the administrator and department heads and in the development of dietary policy (OAR 411-085-0210), procedures, and staff development programs; and (C) Menu planning, recommending and/or ordering food and supplies to be purchased, and record-keeping.

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(C)

Menu planning, recommending and/or ordering food and supplies to be purchased, and record-keeping.

(3)

STAFFING. The facility shall employ supportive personnel to carry out functions of the dietary service. There shall be food service personnel on duty at least 12 consecutive hours each day.

(4)

DIETS AND MENUS. (a) Diets shall be prescribed by the attending physician. Therapeutic menus shall be prepared and served as ordered. (b) A diet manual, approved by a dietitian, shall be readily available to the attending physician, nursing and dietary service personnel. The manual shall be reviewed at least annually by the dietitian. (A) Menus for regular and routine therapeutic diets shall be planned in writing at least three weeks in advance. (B) The current week's menu shall be posted in the dietary department and in a location accessible and conspicuous to residents. (C) A different menu shall be followed for each day for a minimum of twenty-one days (this does not apply to facilities using selective menus). (D) Menus shall include fresh fruits and vegetables in season. (E) Records of menus, as served, shall be retained for sixty days (this does not apply to facilities using selective menus). (c) Menus shall be planned and followed to meet nutritional needs of the resident in accordance with physician orders and, to the extent medically possible, in accordance with the recommended dietary allowances in the facility diet manual (see subsection (4)(b) of this rule).

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(5)

FOOD PREPARATION AND SERVICE. (a) Foods shall be prepared by methods which conserve nutritive value, flavor, and appearance. A file of recipes adjusted to appropriate yield shall be maintained. (b) Foods shall be attractively served in a

form cut, chopped, ground, or pureed to meet individual needs and delivered to residents at customarily acceptable temperatures. (c) Residents requiring assistance with feeding shall receive timely assistance while food is at customarily acceptable temperatures. (d) An identification system shall be established to ensure that each resident receives diet as ordered. (e) At least three meals or their equivalent shall be served daily at regular hours with not more than a 14 hour span between the beginning of the substantial evening meal and the beginning of breakfast. A substantial evening meal is an offering of three or more menu items at one time, one of which includes a high quality protein such as meat, fish, eggs, or cheese. The meal represents no less than 25 percent of the day's total nutritional requirements. (f) Bedtime snacks of nourishing quality shall be offered routinely to residents who desire one and for whom it is not medically prohibited. Snacks of nourishing quality are those which provide substantive nutrients in addition to carbohydrates and calories, e.g., milk and milk drinks and fruit juice. (g) If a resident refuses a food served, substitute foods of necessary nutritional food elements shall be offered.

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(6)

DOCUMENTATION. Resident's response to diet shall be recorded in the clinical record when there are significant dietary problems.

(7)

DINING ASSISTANT. Facilities may use dining assistants to assist residents with feeding and hydration. "Dining Assistant" means a person 16 years of age or older who has successfully completed a Department-approved Dining Assistant training course and competency evaluation. Dining assistants include volunteers participating in facility volunteer programs who feed residents. (a) Resident

selection criteria: (A) The facility must ensure that a dining assistant feeds and hydrates only residents who have no complicated feeding problems including, but not limited to, difficulty swallowing, recurrent lung aspirations and tube or parenteral/IV feedings. (B) The facility Director of Nursing Services, RN Care Manager or RN Charge Nurse must assess and document resident selection for dining assistance. The resident assessment must be based on, but is not limited to: (i) The resident's appropriateness for dining assistance; (ii) The resident's feeding and hydration needs; (iii) The resident's communication, behavior and interpersonal skills; (iv) Risk factors including nausea (acute and ongoing), difficulty swallowing, seizure disorders, acute gastrointestinal issues, vomiting; and (v) The resident's latest MDS assessment and plan of care. (C) The documented assessment must be updated promptly after any significant change of condition and reviewed quarterly. (b) Scope of Duties: (A) Permitted Duties: (i) Assist residents with eating and drinking; (ii) Transport residents to and from dining area; (iii) Distribute meal trays; (iv) Ensure accurate meal delivery by verification with accompanying meal card; (v) Provide assistance in preparing residents for meals including, but not limited to, placement of eye glasses, washing hands and face and placement of clothing protector; (vi) Assist with insertion of dentures for residents that can self direct care; (vii) Set up meal tray for residents including, but not limited to, opening food packets, positioning and cutting the food; (viii) Provide minimal assistance with positioning, as needed, for feeding and hydration and; (ix) Measure and record food and fluid intake. (B) Prohibited Duties: (i) Transfer residents; (ii) Assist with tube feeding or IV nutrition; (iii) Assist with insertion of dentures for residents unable to self direct care; (iv) Provide standby assistance with ambulation or activities requiring gait belt; (v) Assist with food containing medication; (vi) Turn, lift or extensively reposition residents; and (vii) Other CNA

tasks including oral care. (c) Training. A Department-approved facility Dining Assistant training course must include, at a minimum, 16 hours of training and evaluation in the following topics and subject matters and as identified in Exhibit 86-2, which is attached to and made a part of these rules (A) Training Topics: (i) Scope of authorized duties and prohibited tasks. (ii) Feeding and hydration techniques. (iii) Skills for assisting with feeding and hydration. (iv) Communication and interpersonal skills. (v) Appropriate responses to resident behavior. (vi) Recognizing changes in residents that are inconsistent with their normal behavior and the reporting of those changes to the registered nurse (RN) or licensed practical nurse (LPN). (vii) Safety and emergency procedures including the abdominal thrust. (viii) Infection control. (ix) Assisting residents with dementia. (x) Resident rights. (xi) Abuse prevention and reporting. (B) Instructors of the Department-approved facility Dining Assistant training course must be licensed/certified in one of the following disciplines: registered nurse, registered dietitian, occupational therapist or speech language pathologist. (C) "Successful completion" means a passing score on a written exam for a Department-approved facility Dining Assistant training course and satisfactory completion of competency evaluation as determined by the instructor. A Department-approved certificate will be issued to each dining assistant upon successful completion. (D) The Department will evaluate, select and approve at least one Dining Assistant training course curriculum which includes the topic and subject matters contained in Exhibit 86-2. The Department will periodically re-evaluate its selection and approval. (d) Supervision of dining assistants (A) Dining assistants must work under the supervision of a registered nurse or licensed practical nurse. A registered nurse or licensed practical nurse must be readily available to respond to urgent or emergent resident needs. (B) In an emergency, dining assistants must

immediately obtain appropriate staff assistance including the use of the resident call system. (e) Facilities must ensure that dining assistants perform only those tasks for which they are trained and permitted to perform. (f) It is the responsibility of the facility Director of Nursing Services, RN Care Manager or licensed Charge Nurse to ensure that dining assistants are oriented to the specific residents to whom they are assigned prior to providing dining assistance (g) Maintenance of records. Facilities must maintain a record of all facility dining assistants. The record must contain a copy of each dining assistant's certificate for successful completion of a Department-approved Dining Assistant training course. Upon request, a facility will share copies of dining assistant training certificates with other facilities

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The resident's appropriateness for dining assistance;

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(b)

Scope of Duties: (A) Permitted Duties: (i) Assist residents with eating and drinking; (ii)

Transport residents to and from dining area; (iii) Distribute meal trays; (iv) Ensure accurate meal delivery by verification with accompanying meal card; (v) Provide assistance in preparing residents for meals including, but not limited to, placement of eye glasses, washing hands and face and placement of clothing protector; (vi) Assist with insertion of dentures for residents that can self direct care; (vii) Set up meal tray for residents including, but not limited to, opening food packets, positioning and cutting the food; (viii) Provide minimal assistance with positioning, as needed, for feeding and hydration and; (ix) Measure and record food and fluid intake. (B) Prohibited Duties: (i) Transfer residents; (ii) Assist with tube feeding or IV nutrition; (iii) Assist with insertion of dentures for residents unable to self direct care; (iv) Provide standby assistance with ambulation or activities requiring gait belt; (v) Assist with food containing medication; (vi) Turn, lift or extensively reposition residents; and (vii) Other CNA tasks including oral care.

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(c)

Training. A Department-approved facility Dining Assistant training course must include, at a minimum, 16 hours of training and evaluation in the following topics and subject matters and as identified in Exhibit 86-2, which is attached to and made a part of these rules (A) Training Topics: (i) Scope of authorized duties and prohibited tasks. (ii) Feeding and hydration techniques. (iii) Skills for assisting with feeding and hydration. (iv) Communication and interpersonal skills. (v) Appropriate responses to resident behavior. (vi) Recognizing changes in residents that are inconsistent with their normal behavior and the reporting of those changes to the registered nurse (RN) or licensed practical nurse (LPN). (vii) Safety and emergency procedures including the abdominal thrust. (viii) Infection control. (ix) Assisting residents with dementia. (x) Resident rights. (xi) Abuse prevention and reporting. (B) Instructors of the Department-approved facility Dining Assistant training course must be licensed/certified in one of the following disciplines: registered nurse, registered dietitian, occupational therapist or speech language pathologist. (C) "Successful completion" means a passing score on a written exam for a Department-approved facility Dining Assistant training course and

satisfactory completion of competency evaluation as determined by the instructor. A Department-approved certificate will be issued to each dining assistant upon successful completion. (D) The Department will evaluate, select and approve at least one Dining Assistant training course curriculum which includes the topic and subject matters contained in Exhibit 86-2. The Department will periodically re-evaluate its selection and approval.

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