Liberalized Diets
&
The Dining Experience

TexasQualityMatters.org
The Challenge

Ensure that individuals maintain weight and nutritional status

Provide food that looks, smells, and tastes good
Risk Factors for Weight Loss

- M-medications
- E-emotional problems
- A-anorexia
- L-late-life paranoia
- S-swallowing disorders

- O-oral Problems
- N-nosocomial infections

- W-wandering
- H-hyperthyroidism
- E-enteric problems
- E-eating problems
- L-low salt, low cholesterol diets
- S-social problems
What Restrictive Diets Do

- Limit familiar foods
- Eliminate or modify seasonings in food
- Contribute to:
  - Poor appetite
  - Decreased food intake
  - Risk of illness and weight loss
Diabetic Diets

A regular diet is appropriate for most geriatric individuals who have diabetes

- Consistent meal times
- Consistent calories, carbohydrates, and protein
- Standardized portion sizes
- Improves quality of life
Cardiac/Cholesterol Diets

- Medications for heart disease can suppress appetite

- The importance of cholesterol in reducing mortality rates after age 65 is questionable

- The risk of causing malnutrition is a greater risk after age 65
Low Sodium Diets

- People who are elderly do not tolerate low sodium diets well

- Contribute to:
  - Loss of appetite
  - Hyponatremia
  - Increased confusion
Renal Diets

- individuals with renal failure are especially susceptible to malnutrition

- Preventing malnutrition may require liberalizing diet restrictions
Prevention of Weight Loss

- Individual Interventions
  - Facilitate increased food consumption
  - Provide feeding assistance
Prevention of Weight Loss

Dining

Enhance the dining experience

- Favorite food, comfort food, ethnic food
- Accessibility: when hungry or longing for specific foods
- Food first, then supplements
Prevention of Weight Loss

- Family support

- Nutritional therapy
  - Fortified foods, Snacks, Finger Foods
  - Liquid nutritional supplements
The Culture Change Movement

The culture change movement aims to take the ‘institution’ out of the home.

It involves transforming nursing homes from a traditional model to a person-centered and person-directed model.

Culture Change

Menus and Nutritional Adequacy:

- Use resident council meetings to discuss menus and meal service
- Who makes up the “community” culturally?
- Use regional menus and include ethnic favorites
Culture Change

- **Food Preparation and Meal Service**
  - Respect individual preferences and habits regarding meal consumption
  - Train staff on cooking methods that enhance appearance and palatability
  - Observe meal service:
    - Environment
    - Assistance
    - Meal Frequency
    - Different styles of meal service
Dining Alternatives

- Five meal plan vs. 3 meals plus snack
- Restaurant-style dining
- Buffet-style dining
- Family dining
- Select menu
- Extended hours
Hydration

- Honor individuals preferences and habits regarding fluid consumption
- Document person’s fluid preferences in care plans
- Provide a variety of beverages with meals and snacks
- Provide beverage stations with easy access or hydration carts
- Soups, smoothies, lemonade, popsicles, watermelon
- Room pitchers within reach
Culture Change & Regulations

- No significant barriers have been identified by Regulatory Services for implementing culture change.
- Nursing homes can actually reduce their deficiencies by:
  - Seeking positive person-centered outcomes.
  - Care planning according to a person’s wishes.
- Food and dining requirements are core components of quality of life and quality of care.
What it means…

❖ Care provided is consistent with the comprehensive assessment
❖ Diet is determined by individual’s informed choices and preferences
❖ Goals and prognosis refer to personal and clinical outcomes
Impact to Providers

- Changes in meal time and impact on nursing and caregiving schedules
- Changes in attitudes about textures and diet liberalization
- Costs
- Increased occupancy
DADS Culture Change Initiative

For help regarding:

- Questions on Culture Change topics
- Stories on Culture Change successes in Texas nursing homes
- Questions for DADS experts

Contact:
DADS Center for Policy and Innovation
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Providing Positive Partnerships w/ Providers

Regional Staff:
- Includes dietitians, nurses and pharmacists
- Serve as a resource to develop and communicate evidence-based best practices and innovations for improvement of outcomes
- Available for in-services on a variety of topics.