JULY 1, 2018

THE NETWORK NEWSLETTER

Connecting Consultants of S & S Nutrition Network Inc.



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Welcome to the Network Newsletter

Hello and welcome! We are excited to roll out Volume 1 of the Network Newsletter. Newsletters will be sent out to S & S Nutrition Network Inc consultants each quarter.

The Network Newsletter will share information for, by and about our own consultants. We will also share topics being discussed throughout our footprint, as well as bring you the most up to date information in our industry.

We hope that you will share in our excitement and let us know if you would like to be a contributor or if you have a topic that you would like more information on.

S&S Nutrition Network, Inc - 2018 Summer Meeting Sneak Peak

Here is a brief introduction to a few of the topics that will be discussed next week at the 2018 Summer Meeting. Have your questions ready for these as well as your other presenters to make the most of this learning opportunity.



Hot Beverage Service and Burn Prevention - Camile Michaelson

I'll be presenting on hot liquids. What our policies look like. What temperature should we be brewing and serving hot drinks? Do we need to do safety assessments first? What if a resident complains about their drink not being hot enough? Hopefully we will answer these and other questions regarding your hot drink policy with your facilities.



Norovirus & C. Diff - What Every Food Service Department Needs to Know - Wendy Rice

"Norovirus No-No's & Best Practices" I will be speaking with April Mason, CDM, the Nutrition Services' Director at Aspen Transitional Rehab in Meridian Idaho. We will be discussing a recent outbreak of Norovirus in the Valley with lessons learned & a discussion of best practices for skilled nursing.



Member Spotlight: Do You Know Who This Is?









I became interested in food and nutrition in junior high school. A student teacher in my health education class reviewed a food label and taught the class how to determine the percentage of calories from carbohydrates, fat, and protein. I was hooked... I wanted to know more!

Some of the most rewarding experiences I have had working as a dietitian include helping a dietary manager with successful outcomes, especially improving food quality. Food makes such a difference for residents in long term care facilities. I like to be a part of that. I feel good when facilities have successful survey outcomes. Helping clients better understand therapeutic diets, whether it's a renal diet or a diabetic diet, teaching them how they can enjoy foods they like on the therapeutic diet. That's a win-win for the client and myself.

Fun Fact About Me:

(1)I won a hoola hooping contest at a Streets for People festival in Boise when I was 12. I hoola hooped for 49 minutes and 12 seconds.

(2)The summer between my sophomore and junior year in college, I worked as a park ranger at Harriman State Park.

(3)My aunt and grandma were both dietitians.



A big WELCOME to our newest Consultants!

Jenny Griggs St George, Utah May 2018

Lindsey Callihan Treasure Valley, Idaho July 2018

Kendra Rovello Overland Park, Kansas July 2018

Popcorn for breakfast! Why not? It's a grain. It's like, like, grits, but with high self-esteem.

James Patterson



F-Tags in Review: F800 Food and Nutrition Services

June 28, 2018 Healthcare Consulting By Emile LeDoux, Senior Consultant https://www.lw-consult.com/resources/f-tags-in-review-f800-food-and-nutrition

F-Tag 800 states: "The facility must provide each resident with a nourishing, palatable, well-balanced diet that meets his or her daily nutritional and special dietary needs, taking into consideration the preferences of each resident."

The facility must present residents with a nutritional meal that meets individual dietary requirements. The purpose is to maintain the resident's weight or to increase/reduce their weight to retain a healthy lifestyle. Residents have the right to make choices regarding their diet. Compliance auditors look for the following items:

- Does the Plan of Care reflect specific requirements for the resident's diet?
- Do the residents have a choice of alternate meals?
- Do the alternate meals meet the nutritional requirements for the resident?
- Does the documentation in the meal plan reflect what the resident is given to eat each meal?
- Are the residents served the correct portion sizes to meet the established nutritional plan?
- Are the dietary staff following a recipe?
- Is the food prepared, served and presented in an appetizing manner?
- Is food served at the proper temperatures?

- Does the facility take into consideration the resident's concerns about food frequency, quality, variety, timeliness, etc.?

The interpretive guidelines in Appendix PP states: "Also, cite this Tag if there are overall systems issues relating to how the facility manages and executes its food and nutritional services." This comment expands the scope of the deficiency to include all programs, procedures, and practices within the dining department.

The following are F-Tag 800 violations taken from annual state surveys and complaint surveys from 11/28/17–1/26/18.

- The facility was completing a one-month menu rotation, with two seasonal menus. The residents voiced concerns about the repetitive menu, the facility was aware but did not make any changes.

- Portions sizes for one resident were too small and did not reflect the expectations from the care plan.

- French fries were not stored on the steam table and were served to the residents' cold.

- Dining Employee did not follow the recipe for pureed food, added ingredient and did not cool properly.

- The facility lacked a written policy for resident food preferences. CNAs were expected to know the resident's likes/dislikes and allergies. The meal tickets lacked personal information.

- Portion sizes do not match the serving sizes to meet a nutritional meal. Residents had voiced concerns and the facility did not follow-up.

- Resident did not have preferences documented and was served the same meals consistently which the resident would not eat.

- The facility failed to act on resident's request to re-evaluate diet texture.

- Cold food held at elevated temperatures. Hot food dropping 86°F from the hot hold to resident service.

- Infection control concerns with glove usage and failure to wash hands when replacing gloves.

- Leftovers not cooled properly. Vegetables cooked in water reducing nutritional value.

- Facility served foods that were not to be eaten with resident's medication. Lack of communication between departments.

- Pureed meal did not match recipe. Facility failed to provide meat on two meal service trays.
- Failure to ensure resident received correct diet per physician orders.

- Resident was served food daily that she did not like or eat. Dining Department was notified, but there were no changes made.

- Cold and hot hold temperatures were outside of required temperatures. Improper sanitizing of equipment in 3-compartment sink.

- Failure to provide food trays in a timely manner.

Note, deficiencies vary in subject matter, and could easily fall under other deficiencies in the regulations.

Be sure to watch for future articles in our F-Tag series, and make sure to check out our website and social media for additional critical updates. For a full list of commonly cited deficiencies, download our latest F-Tags In Review report.

Is your facility in compliance with the new F-Tag requirements? Let LW Consulting, Inc. conduct an operational review to assess your risk of non-compliance. We also provide education, in-service training and mentoring for housekeeping and maintenance personnel.

