

# FOOD & NUTRITION in Care Homes for Older People

## Section 7

Putting the guidance into practice

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## Putting the guidance into practice

The aim of this section is to help you to review your food and drink provision and nutritional care of your residents, so that you can identify areas of best practice and any actions for improvement.

You can inform and involve staff, residents and relatives in the process and be able to demonstrate to Care Inspectorate Wales and local commissioners how you deliver best practice for food and drink provision. This can include your overall ethos around food and drink and how you will ensure staff have the knowledge and skills to deliver quality nutritional care.

It includes the key food and drinks standards and best practice in all the sections of the guidance.

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Mae'r ddogfen yma hefyd ar gael yn Gymraeg  
This document is also available in Welsh.

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The following example code of practice pulls together all the Best Practice Guidance. You can use and adapt the code of practice and the example policy and include in your statement of purpose. It can also provide an opportunity to inform prospective residents and their families and Care Inspectorate Wales, when initially registering your care home.

## Example Code of Practice for food and drink in care home settings

### 1. We have developed a food and drink policy

To support the health and wellbeing of the residents in our care. It covers all aspects of our approach to food and drink provision and how we engage with residents and relatives about it.

### 2. We plan varied menus and snacks in advance

To ensure variety in taste, texture and colour and taking into account sustainability of food.

### 3. We provide meals, snacks and drinks that meet the national best practice food and drink standards and guidance

To ensure the residents in our care receive the right balance of energy and nutrients to maintain their health, meet any specific dietary needs and prevent malnutrition and dehydration.

### 4. We cater for all residents needs and provide a 'Food First' approach

This includes food fortification, finger foods, texture modified foods, thickened fluids and special diets where appropriate.

### 5. We have a positive dining environment

To encourage and support residents to eat well, in comfortable and social surroundings.

### 6. We follow food safety and hygiene regulations in all aspects of food and drink provision

To ensure the residents in our care are safe from any risks in relation to food.

## Developing a food and drink policy

### A food and drink policy for care home settings:

- is a plan of action to ensure everyone follows best practice and is consistent in their approach to food and drink with residents
- enables everyone to be involved in agreeing the approaches – staff, residents and relatives
- can provide information to new residents and their families
- can be used as evidence to demonstrate your commitment to the health and well-being of residents to prospective residents, local authority, health board and Care Inspectorate Wales.

The information in the policy will vary with the number, and needs of the residents in your care and the type of setting you are. The code of practice can be used to set out the policy.

# Sample food and health policy for care home setting

## Mission statement

Our **care home** is committed to providing residents with nutritious balanced meals, snacks and drinks, which meets the person's individual dietary needs.

We comply with the Welsh Government statutory guidance for provision of food and drink and aim to demonstrate best practice in all our approaches to food, hydration and health.

We provide a social dining environment that supports and encourages residents to eat well and take part in a range of food related activities.

## We plan varied menus and snacks in advance

- Our menus will be on display in advance.
- Recipes will be available upon request.
- Residents and relatives are encouraged to offer menu suggestions or comment on the policy.

## We provide meals, snacks and drinks that meet the national food and nutrition for care home settings – best practice guidance

- All residents will have suitable food choices available depending on their preferences and needs, using the recommended portion sizes.
- All food standards and guidance will be complied with.
- Water will be available at all times.

## We cater for all residents needs and provide a 'Food First' approach

- We offer a range of nutritious snacks, drinks and fortified foods where necessary.
- We provide a range of texture modified meals following the IDDSI guidance for individual residents who require it.
- We provide for cultural, religious needs and special diets
- We have a flexible approach to meal times as far as possible

## We ensure hydration needs are met and provide assistance to residents where required

## We have a positive eating environment

- The dining environment is pleasant and welcoming.
- Carers sit with the residents when they eat and encourage and assist food intakes where necessary.
- Residents will be given plenty of time to eat.
- Residents will be encouraged to eat in the dining areas where able to but will be supported in their choice of where to eat.
- We regularly have events that include food for cultural occasions.

## We follow food safety and hygiene rules in all aspects of food and drink provision

- All food in the setting will be stored, prepared and served following regulated food safety and hygiene practices.
- Staff will have appropriate qualifications in food hygiene and safety.

## Communication with residents and relatives

- We will display the policy to all residents and visitors and it will be reviewed annually.
- Residents requiring a special diet will be asked to provide as much information as possible about suitable foods.
- As agreed with the resident, their family will be informed on how well they are eating and if any cause for concern.

## General environment

- Residents will be encouraged to go outside every day, weather permitting, to ensure they receive sunlight, as well as providing regular physical activity according to their ability.
- We will monitor the policy regularly and address any areas for improvement.

# Self monitoring

The following action plans cover the 6 areas of the code of practice and can support you to:

- Monitor your progress to implement the guidance.
- Demonstrate how you have taken due regard of the statutory guidance for care and support in regard to nutrition and hydration care.
- Demonstrate the positive changes achieved from putting the guidance into practice.
- Show how you meet best practice in a range of areas such as:
  - a) your provision of food and drink
  - b) related communication and activities that may be linked to food
  - c) food safety and the suitability of the environment.
- Show how you take all aspects of food, residents needs, the dining environment and care and support at meal times into account.

**Note: these action plans cover all aspects of food, drink, individual needs and the dining environment. You may wish to use some or all or adapt to suit your own needs and the range of food you provide.**

These will also contribute to all 4 themes in the CIW inspection framework: well-being; care and development; environment; leadership and management, with a particular focus on care and development, in relation to keeping residents safe and healthy.



Action	Date	
██████████ ██████████ ██████████	1/1/2019	✓
██████████ ██████████ ██████████	1/1/2019	✗
██████████ ██████████ ██████████	1/1/2019	✓

ACTION PLAN: Food and drink policy			
		Date of completion:	Review date:
	Is in place and can be demonstrated by:	Actions needed:	By date:
<p><b>We have a food and drink policy which supports the health and wellbeing of older people in our care and covers all aspects of our approach to meeting their food, nutrition and hydration needs</b></p> <p>The food and drink policy/statement is in place and:</p> <ul style="list-style-type: none"> <li>• reviewed annually as a minimum</li> <li>• shared with staff</li> <li>• shared and discussed with residents and relatives</li> <li>• included in any resources or documents outlining our provision of care.</li> </ul>			
<p><b>We ensure staff have the appropriate knowledge and skills to support our food and drink policy:</b></p> <p>There is a named person (s) with overall responsibility for food and drink across the care home e.g a 'Nutrition Champion'</p> <p>Staff access advice on meal and menu planning from a reputable source<sup>1</sup></p> <p>There is a minimum of one existing staff member<sup>2</sup> that has a recognised qualification/attended nutrition course delivered by a dietitian</p> <p>Staff have knowledge of the fluid requirements of residents and the importance of keeping hydrated</p> <p>All food handlers are suitably trained in food hygiene and safety according to their role</p> <p>We ensure fresh water and suitable drinks are available and accessible to all throughout 24 hours</p>			

ACTION PLAN: Food and drink policy			
		Date of completion:	Review date:
	Is in place and can be demonstrated by:	Actions needed:	By date:
<p><b>We have a food and drink policy which supports the health and wellbeing of older people in our care and covers all aspects of our approach to meeting their food, nutrition and hydration needs</b></p> <p>We provide for cultural, philosophical and religious needs and special dietary requirements (see separate action plans)</p> <p><b>We communicate with residents and families to ensure:</b> Information about menus, meals, snacks and drinks is available to all Residents and relatives are involved in menu planning and providing feedback</p>			

<sup>1</sup> see Table 1 Information on training

<sup>2</sup> if homes are split into distinct units with separate leadership or processes, then there should be one staff per 'unit'

<b>ACTION PLAN: Menu planning and food provision</b>			
	<b>Is in place and can be demonstrated by:</b>	<b>Date of completion:</b>	<b>Review date:</b>
<b>We plan varied menus for meals and snacks in advance that meet the national food and nutrition best practice guidance for older people care homes</b>		<b>Actions needed:</b>	<b>By when:</b>
We have a 3 week menu cycle or more than 3 weeks			
Menus are changed at least twice a year and seasonality is considered			
Menus include details of all meal choices, snacks and drinks that are offered			
Menus are in a user friendly format for all resident's needs (e.g. large print, visual) and are displayed			
Standardised recipes are used to ensure consistent quality and content			
We have a standard menu and a fortified menu, as required			
We develop menus using 'finger foods' as required			
A range of snacks are available to the residents, 24 hours a day			
Intervals between meals do not exceed 5 hours and the interval between the last meal offered and breakfast the following morning is less than 12 hours			
Mealtimes are flexible, including choice and timing to ensure resident needs are met and no one misses a meal			



ACTION PLAN: Food drink and meal standards				Date of Completion:	Review date:
We provide meals, snacks and drinks that meet the best practice guidance	Is in place and can be demonstrated by:	Actions needed:	By date:		
<b>Fruit and vegetables</b>					
<p><b>For a full days menu we provide:</b></p> <p>A choice of '5' a day from a range of vegetables, salads and fruit, served with breakfast, main meals, and as snacks. Correct portion sizes (80g is one portion)</p> <p>Fruit based desserts are offered as one of '5' a day</p> <p>A glass of fruit juice is offered with one meal time to help meet the Vitamin C intakes</p> <p>Fresh fruit is available and ready to eat for those who require it e.g. fresh fruit salad in containers</p>					
<b>Potatoes, bread, rice, pasta and other starchy carbohydrates</b>	Is in place and can be demonstrated by	Actions needed	By date		
<p><b>For a full days menu we provide:</b></p> <p>6 portions of foods from this group daily</p> <p>A variety each day and include wholegrain and high fibre options</p> <p>Bread and bread products with lower salt content</p> <p>Correct portion sizes</p> <p><b>We do not add bran</b> to cereals or foods</p>					

ACTION PLAN: Food drink and meal standards			
	Date of Completion:	Review date:	
<p><b>Beans, pulses, fish, eggs and meat and other proteins</b></p> <p><b>For a full days menu we provide:</b></p> <p>One portion of beans, pulses, fish, eggs, meat or other proteins <b>at least 2 of 3 meals per day (breakfast, main meal and lighter meal)</b></p> <p>A variety across the week</p> <p>Oily fish once a week</p> <p>Correct portion sizes</p> <p>For vegetarians – 2-3 portions of beans, pulses, eggs, or other meat alternative across the day</p>	Is in place and can be demonstrated by	Actions needed	By date
<p><b>Dairy and alternatives</b></p> <p><b>For a full days menu we provide:</b></p> <p>3 portions of dairy and alternatives each day from the following:</p> <p>200ml (1/3 pt) milk</p> <p>30g (1oz) cheese</p> <p>150g (1 med. pot) yoghurt</p> <p>200g (1 large pot/1/2 can) custard, milk pudding</p> <p>Each item is one portion</p> <p>A choice of whole milk and semi skimmed milk</p> <p>Skimmed milk and alternative milks are provided where appropriate</p>	Is in place and can be demonstrated by	Actions needed	By date

<b>ACTION PLAN: Hydration and drinks</b>			
		<b>Date of Completion:</b>	<b>Review date:</b>
<b>We ensure hydration needs are met and provide assistance to residents where required</b>	<b>Is in place and can be demonstrated by:</b>	<b>Actions needed:</b>	<b>By date:</b>
We have a clear plan* to promote water and fluid intake amongst our residents			
We offer at least 6-8 drinks per day for each resident			
We have clear procedures for recording whether residents drink enough			
A variety of hot and cold drinks are available every day during and after mealtimes (Including tea, coffee and decaffeinated, water, milk, squash, herbal/fruit tea, sugar free varieties)			
Residents requiring a thickener to be added are identified Recommendations and instructions have been provided by a speech and language therapist			
We have a system in place to ensure correct cleaning of cups, glasses, jugs etc			
Residents can ask for and access the toilet facilities when they need them			

\*this can be part of a food and drink policy or a specific hydration action plan and can include what training staff have on hydration, how they promote the importance of drinking regularly and support residents to drink, when needed

ACTION PLAN: 'Food first' and fortified foods			
	Is in place and can be demonstrated by:	Date of Completion:	Review date:
		Actions needed:	By date:
<p>We offer a <b>'food first'</b> approach and aim to meet individual resident's needs through:</p> <ul style="list-style-type: none"> <li>• provision of smaller meals more often</li> <li>• regular nutritious snacks and drinks</li> <li>• use of fortified milk</li> <li>• food fortification as appropriate.</li> </ul>			
<p>Food is fortified only for those residents who require it</p>			
<p>Family/friends of the resident are involved where necessary to identify any known favourite meals/foods/drinks</p>			
<p><b>Finger food</b> is available between and for meals for those residents that will benefit</p>			
<p>When relevant, and to meet a residents assessed need, food is easily identifiable on the plate by using plain, contrasting crockery</p>			
<p><b>For residents prescribed oral nutritional supplements:</b></p> <p>A process is in place to monitor compliance</p> <p>Different methods are used to encourage uptake e.g decanting the supplement into a glass or beaker, providing smaller amounts regularly throughout the day e.g. 40mls three times a day, (tds) serving at the preferred temperature</p> <p>Specific instructions, if provided by a healthcare professional are followed</p>			

Note: Residents with Dementia - a number of the actions for nutrition care will apply to meeting the range of needs of people with dementia. Refer to section 2B and ensure personal plans are in place if required.

Note: Fortified food is used here to describe an overall approach. See section 2C on food fortification for specific examples.

<b>ACTION PLAN: Texture modified diets</b>			
	<b>Is in place and can be demonstrated by</b>	<b>Date of Completion:</b>	<b>Review date:</b>
		<b>Actions needed</b>	<b>By date</b>
All residents that require a texture modified diet have been assessed by a health professional			
Individual requirements for food texture modification are recorded and communicated to all staff supporting the resident with eating and drinking			
Individual prescription for thickening agent is recorded and communicated to all staff supporting the resident with eating and drinking			
We follow the IDDSI definitions and guidance for different textures, as prescribed			
Minced and moist, pureed and liquidised meals are presented in their separate components			
Residents requiring texture modified diets are offered a choice			

The following two action plans focus on food service and the dining environment. They are very comprehensive and may help you to audit your services in this area to identify any areas for improvement and acknowledge best practice. They can be amended and individualised to suit your requirements. See resources

e.g you could use it to carry out an internal audit and ensure that staff have the appropriate skills and competencies and can identify any training needs as well as compliment and reward good practice.

**ACTION PLAN: Food service – preparation and presentation**

	Is in place and can be demonstrated by:	Date of Completion:	Review date:
		Actions needed:	By date:
<p><b>Cleanliness and hygiene</b></p> <p>Team members:</p> <ul style="list-style-type: none"> <li>• wash their hands prior to food service</li> <li>• wear clean linen or disposable aprons when serving meals</li> <li>• have long hair tied back.</li> </ul>			
<p><b>Presentation of food</b></p> <p>Food is served individually (not pre-plated)</p> <p>Portion sizes are varied depending on choice and appetite</p> <p>Food includes a variety of colours and textures and is attractively presented</p> <p>Sandwiches are served attractively e.g. in triangles with a salad and crisp garnish on a large plate</p> <p>Salads are served with a carbohydrate option e.g. potato, bread, rice or pasta</p> <p>Desserts are not served before the main meal is finished</p>			

**ACTION PLAN: Food service – preparation and presentation**

		Date of Completion:	Review date:
		Actions needed:	By date:
	Is in place and can be demonstrated by:		
<p><b>Temperature of food:</b>                      Food is served at the correct temperature to the table                      Hot food is never allowed to sit to go cold while the resident is preparing to eat or be assisted to eat                      Cold food is not left to go warm</p>			
<p><b>Quality of food</b>                      Meat is tender and easy to chew                      Vegetables retain their form and are not “soggy”                      Salads are fresh and include a variety of items</p>			

**ACTION PLAN: Food service – dining environment and communication**

		Date of Completion:	Review date:
	Is in place and can be demonstrated by:	Actions needed:	By date:
Dining areas are communal with choice of location/seating			
The dining room is clean, light, and tidy			
A team member has been appointed to lead the dining room service (where applicable)			
Residents are involved in food related activities such as table preparation, food preparation, clearing away, where they can and want to be			
Residents are greeted on arrival and offered a suitable appetiser and a choice of drink served from a jug			
Staff sit with residents and encourage social interaction			
Food choice is determined at point of service, as far as possible			
Staff ask residents what they would like to eat in a dignified and respectful way			
Staff are aware of individual dietary requirements and can assist resident to make a suitable choice			
<p><b>Residents that require assistance:</b></p> <p>Residents are assisted, if required, to wash their hands (or use a cleansing wipe) prior to and after their meal</p> <p>Residents are assisted to sit in the best position to eat safely and carers sit alongside</p> <p>Staff use appropriate and sensitive language when assisting residents with food choices and eating e.g. do not use the term 'feeders'</p>			



**ACTION PLAN: Food service – dining environment and communication**

	Is in place and can be demonstrated by:	Date of Completion:	Review date:
		Actions needed:	By date:
Staff give information about the food or drink being provided throughout the meal			
Staff use appropriate aids to assist with eating e.g. adapted cutlery			
Team members are only assisting one resident at a time			
Residents are provided with appropriate and dignified napkins/dining aprons			
Residents are given sufficient time to complete their meals			
Residents' wishes to dine alone are respected, with appropriate seating/table provided to aid comfort and positioning, and assistance where required			
Residents' families and friends are offered the opportunity to dine with the resident in private or in the communal dining areas. This will be clearly defined in the residents personal plan			
Where residents are struggling to eat, this is identified and discussed with the appropriate team member to identify any actions required			
If residents are asleep or unavoidably miss meals then an alternative is offered			

Acknowledgement: Adapted, with kind permission, from dining audit, Greenhill Manor Care Home

ACTION PLAN: Nutritional assessment and monitoring			
	Is in place and can be demonstrated by:	Date of Completion:	Review date:
		Actions needed:	By date:
We have systems in place and staff trained to undertake nutritional screening using the MUST tool for risk of malnutrition, if applicable			
We follow local referral procedures to refer to a dietitian, where further dietary assessment is required			
<p><b>Where identified:</b></p> <p>Individual residents have a personal plan for nutrition care in place and this is monitored (e.g appetite, food and fluid intakes, weight change)</p>			

## Information on Training support

<p>Food Hygiene courses</p>	<p><b>See FSA Safe Food Better Business</b>  <a href="https://www.food.gov.uk/business-guidance/safer-food-better-business">https://www.food.gov.uk/business-guidance/safer-food-better-business</a>  <b>Contact Local Environmental Health Department and/or local workforce development team</b></p>
<p>NVQ level training available in colleges for catering and food preparation skills.</p>	<p><b>See local college prospectus for courses e.g.</b>            Level 1 NVQ Food preparation and cooking            Level 2 City and Guilds Diploma NVQ Food Production and cooking            CIEH L2 Award in Allergen Awareness</p>
<div data-bbox="252 629 555 790" data-label="Image"> </div> <p>Nutrition skills for life            Course on food and nutrition skills for older people care</p>	<p><b>Public Health Dietitians in health boards</b>            The following link has contact details for your health board  <a href="https://www.publichealthnetwork.cymru/en/topics/nutrition/nutrition-skills/">https://www.publichealthnetwork.cymru/en/topics/nutrition/nutrition-skills/</a>  <b>Bespoke training from health board dietitians working with care homes.</b>  <b>Catering for texture modification</b>            Ask the Health Board, Speech and language therapist or dietitian about training for IDDSI textures</p>

## Role of relevant Health Care Professionals in food and nutrition care

	What they do in relation to food and diet requirements
<p>Speech and Language Therapist</p>	<p>Will carry out assessment and therapy for residents with difficulties in swallowing and communication            The speech and language therapist will work together with the patient and the care staff in creating shared communication, eating and drinking goals            They will recommend appropriate texture of foods and fluid for safe swallow where necessary</p>
<p>Occupational Therapist</p>	<p>Improve the environmental design and advise on how to support residents to improve their quality of life            Maximise potential to engage in daily activities which include meal times. Support resident to access food and drink in a dignified way through recommending suitable aids and adaptations</p>
<p>Dietitian</p>	<p>Will formally assess dietary intakes and discuss and agree with resident and/or carer, recommended changes to diet and fluid intakes or prescribe a special diet to meet specific needs            Deliver training to care staff on nutrition and hydration in order to provide the correct nutritional support to residents</p>

Note: access to services for the above health professions may vary, you will need to refer to your local policies and procedures