

The Activity-Dining Connection

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“Food is our common ground, a universal experience.”

-James Beard

Honoring choice in how consumers live their lives is critical to raising the bar for quality long-term care. Nursing homes are challenged to put culture change in motion through policies and practices that reflect true choice in dining and honoring consumers’ wishes through participation in care planning. The Advancing Excellence in America's Nursing Homes Campaign has added person-centered care as a priority goal for nursing homes seeking to honor choice; (http://www.nhqualitycampaign.org/star_index.aspx?controls=personcenteredcareexploregol).

For many seniors living in healthcare communities, mealtimes are centered on socializing, positive interactions, and visitation with other residents and family members. We, as Activity Professionals, are accustomed to leaving the menu and dining experience with the Dietary Team; however, it is equally important that recreational healthcare professionals know and honor residents’ dietary needs and preferences during activity programming and special events.

“As Americans, we enjoy the privilege of defining Quality of Life from our own personal perspectives. For most, if not all of us, freedom and choice are central values in defining a good life. Similarly, we each prioritize our constitutional rights a bit differently, but with common themes and emphasis. The rights of freedom and autonomy, including the right to choose and to

refuse and to make good and bad decisions, top the list of importance for most of us. These rights are defined in our Constitution, enforced in most every aspect of our lives, and supported and respected by the general public and the legal system alike. Prior to OBRA '87, the rights of residents in our nursing homes were often seriously compromised by the institutional nature of their lives that prioritized quality medical care over all other considerations. OBRA '87 clearly recognizes the importance of individualization, home, community and even daily pleasures in defining a good life. The writers of OBRA '87 repeatedly reaffirm resident rights and dignity throughout the document, including the rights to self-determination, (as well as the right to refuse treatment), autonomy, and the dignity of risk and choice. Our personal preferences in food are unique and individualized presenting the opportunity for each of us to be experts in defining the role of food in our Quality of Life. It is not happenstance that, while our tastes are inconsistent from one person to another, there are common themes in the definition of a good life as it relates to food.” (Linda Bump, MPH, RD: *The Deep Seated Issue of Choice*, February 2010).

We have all experienced ‘high-maintenance’ and ‘hard to deal with’ residents. Even though it may seem a daunting and sometimes impossible task to the Activity Team when planning residents’ social celebrations, hosting Quality of Life programs with appropriate food and drink is a critical job performance skill in our portfolio. Residents are both cognizant and knowledgeable of various food allergies and dietary restrictions; many whom want to take ownership and responsibility for their health as long as possible. In addition, today’s seniors frequently hear and read about living a healthy lifestyle, which includes eating the ‘right’ foods and following dietitians’ orders for optimal success. Key food allergies and dietary preferences that Recreation/Activity Professionals must recognize and look for in each resident’s assessment

includes: dairy-free, gluten-free, sugar-free, soy-free, peanut-free, nut-free, vegetarian, vegan, low-fat, low-sodium, etc. and the list continues.

The following steps are presented as a sample action plan toward creating and delivering successful food-activity programs for all residents:

- A). Calendar and ‘talk-up’ a whole-group activity-food program for residents to attend. Discuss themes and menu options. Specifically, ask residents for their personal preferences and any favorite brands they wish to see on the table. You would be amazed at your residents’ ‘dietary savvy’ with regards to brands and alternative foods they enjoy eating.
- B). Review residents’ dietary assessments and needs. When reviewing resident folders, ‘red flag’ and denote any concerns or questions that stand out to you. Trust your instincts, and as always keep your residents’ health and safety first and foremost in all your actions.
- C). Set up a meeting with the healthcare community’s dietitian and dietary manager. Most dietitians and/or dietary managers order all residents’ food and drink from an established corporate-designated company. During the meeting, provide residents’ input and suggestions regarding ordering of food and drink for the special activity program. Additionally, come prepared with specific notes and comments/suggestions. Remember, as the Recreation/Activity Professional, you have an equally vested interest and concern for each resident’s Quality of Life.
- D). Read the federal policies and procedures. Specifically, become both familiar and knowledgeable with FTags that address food-related issues; proper food storage, food handling, sanitary procedures, food allergies and illnesses, etc.

E). Finally, conduct a thorough ‘walk-through’ with regards to the food-activity program; start to finish. Each Activity Team member must know residents’ diet restrictions and other food-related concerns. There is no alternative to exact, precise planning and delivery.

An important federal policy that all Recreation/Activity Professionals must know and practice comes from the following resource: Resident Choice in Meal Times: The Interpretive Guidelines. This interpretive guideline is issued by the Center for Medicare/Medicaid Services (CMS) which obliges healthcare communities to respect residents' rights to self-determination and participation in choosing schedules and making choices about aspects of Quality of Life in the community that are significant to the resident. More importantly, the guidelines oblige the community to gather information about residents' choices over schedules that are important to them, including eating schedules and food choice. With careful, diligent and detailed considerations and planning of each food-activity program, residents will feel extremely well-taken care of and know that they are indeed a vital and respected member of the community.

“One cannot think well, live well, sleep well, if one has not dined well.”

~ Virginia Wolf, A Room Of One’s Own