

**Health Information and Quality Authority
Residential Services for Older People**

**Provider Self-assessment Questionnaire on
Food and Nutrition**

Centre name:

The Village Residence

Centre ID:

538

**Registered
provider:**

HSE CHO8, Ms Emma Gonoud

**Person in
charge:**

Michael Seamus McCaul

**Number of
current
residents:**

48 plus 3 short stay
beds

Introduction

This self-assessment questionnaire is a resource to help people providing residential services for older people to prepare for inspection, to measure their performance against regulations and standards, and to identify ways in which they can improve their service. The questionnaire includes a series of detailed questions around the provision of food and nutrition to help providers assess their performance, to identify any gaps and drive improvement. Section 8 facilitates an overall self-assessment of compliance and identification of actions, if any, to ensure compliance.

The Provider should complete and return the form to rst@higa.ie. The Health Information and Quality Authority will review the information prior to inspection.

Outcome 15: Food and Nutrition

Each resident is provided with food and drink at times and in quantities adequate for his/her needs. Food is properly prepared, cooked and served, and is wholesome and nutritious. Assistance is offered to residents in a discreet and sensitive manner.

References:

Regulation 20: Food and Nutrition
Standard 19: Meals and Mealtimes

Section 1: Food and Nutrition Policy and Guidelines

Q.1 Is there a food, nutrition and hydration policy in place?

☒ Yes

☐ No

If your answer is 'No', skip to Section 2.

Q.2 In what year was the policy implemented/signed off?

2009

Q.3 Does the policy include monitoring and documentation of residents' fluid intake?

☒ Yes

☐ No

Q.4 Does the policy include monitoring and documentation of residents' nutritional intake?

☒ Yes

☐ No

Q.5 When was the policy last reviewed? *Please select one option*

☐ Never reviewed

☒ Within 12 months

☐ 1-2 years

☐ 2-3 years

☐ More than 3 years ago

Q.6 Is there a system in place to ensure the policy is understood by staff and implemented in practice?

☒ Yes

☐ No

Please provide details:

All policies discussed and drawn up in draft format. Each draft is given to staff. Changes are made to reflect best practice and actual practices on ground. Ongoing staff involvement occurs to improve policy. Monitoring of practices occurs through Audit processes.

Q.7 Does the policy support residents'

a) specific dietary needs

b) ethnic needs

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>

c) religious or cultural practices?

<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Q.8 How well is the policy reflected in care practices that ensure residents receive adequate fluids and food which is nutritious, properly prepared and reflective of their individual needs and wishes? In the rating scale below, the numeral 0 indicates 'Not at all' while 6 indicates 'Fully'.

<i>Not at all</i>						<i>Fully</i>
0	1	2	3	4	5	6
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section 2: Staff

Q.1 Have staff had training to support them to provide care which meets the residents' hydration and nutritional needs as appropriate to their role?

☒ Yes

If 'No', skip to Section 3.

☐ No

If 'Yes', complete the panel on the following page.

Panel to Q.1. Please provide details of staff training to support them to provide care which meets the residents' hydration and nutritional needs as appropriate to their role.

	Type/name of training	Date training provided	Who provided the training?	What were the key topics covered?	How many staff attended the training?			
					NURSES	CARE SUPPORT STAFF	HOUSEHOLD STAFF	OTHER
a)	Food Hygiene	2010/2011 /2012	Bourke College Dublin	Food Hygiene basics, HACCP Controls		5		
b)	Diabetes	2011	Nurse Education Centre Ardee	Principles of diabetes and types of diabetes and food associated with diabetic diet		1		
c)	Nutrition	2007/2011	Nurse Education Centre	Food Basics Monitoring and documentation of nutritional intake		5		
d)	Dysphagia	2012	Speech and Language Therapist		1			

Q.2 Please provide any additional information on the training

Must Training x 2 care assistants in 2012 and two staff nurses 2012. Provided inhouse by Nutricia Dietetic services.

Section 3: Care Planning

Q. 1 Are each resident's food, nutrition and hydration needs assessed/screened at admission? ☒ Yes

☐ No

Q.2 Is there a process for the ongoing assessment of the food, nutrition and hydration needs of each resident? ☒ Yes

☐ No

Q.3 If 'Yes' to Question 2, please outline the process for the ongoing assessment of the hydration and nutritional needs of residents:

Residents are weighed on admission. Also assessed using Body Mass Index and MUST Assessment tool. Preferences are recorded with relative involvement. Ongoing daily assessment of nutritional and fluid intake by all staff

Q.4 Does assessment include oral health assessment?

a) at admission

b) on an ongoing basis?

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>

Q.5 Are each resident's eating habits, daily routines and preferences elicited as part of the assessment process and used to inform the care plan? ☐ Yes

☒ No

Q.6 Where a resident can no longer provide information due to absence of capacity is his/her representative consulted to inform the care plan? ☒ Yes

☐ No

Q.7 Are residents' assessed nutritional needs documented in a written care plan? ☒ Yes

☐ No

Q.8 How often is the nutritional care plan formally reviewed?

Three monthly or more often as required. Sometimes on daily basis

Q.9 What processes are in place to ensure residents' food and fluid intake is monitored and recorded and leads to action when it is a cause for concern? Please provide details:

Where a concern arises with regards to food and fluid intake, a strict intake and output chart is commenced and recorded in full at end of 24 hours. Further action is planned based on fluid intake. In relation to nutritional intake of foods, if intake is seen as low, then a food diary is kept for three days. At the end of this period, the person is again weighed. Referral is then made to speech and language therapy, Person in Charge and Dietician.

Q.10 In the rating scale below, please rate how well residents' care plans are implemented. Tick a number between 0 ('Not at all') and 6 ('Fully').

Not at all

Fully

0	1	2	3	4	5	6
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q.11 How many current residents are on special diets?

	Type of diet/description	No. of residents
a)	Diabetic diet	6
b)		
c)		
d)		

Q.12 How many current residents are on supplements?

	Type of supplement	No. of residents
a)	Fresubin 5 cal	4
b)	Fresubin 2 cal	2
c)	Fortecreme	3
d)	Calshake	2

Q.13 How many current residents are on fortified diets?

	Type of fortification	No. of residents
a)	Normal Diet	10
b)	Minced	2
c)	Pureed	13
d)	PEG	1

Section 4: Specialist Care

Q. 1 Are the following specialist services available?

	Name of service	In-house	Off-site	Not available
a)	Dietician	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b)	Speech and language therapist	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c)	Occupational therapist	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d)	Diagnostic services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
e)	Dental services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
f)	Diabetic services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Q.2 How are referrals made to the following specialist services?

	Name of service	Mode of referral
a)	Dietician	EMAIL
b)	Speech and language therapist	Referral form
c)	Occupational therapist	Referral Form
d)	Diagnostic services	Referral by G/P
e)	Dental services	Referral form
f)	Diabetic services	G/P Referral

Q.3 Please rate access to specialist services for all residents who require the services:

	Name of service	Always	Usually	About half the time	Seldom	Never
a)	Dietician	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b)	Speech and language therapist	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c)	Occupational therapist	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d)	Diagnostic services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e)	Dental services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f)	Diabetic services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q.4 How timely is access to the specialist services?

	Name of service	Very good	Good	Fair	Poor	Very poor	Not applicable
a)	Dietician	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b)	Speech and language therapist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c)	Occupational therapist	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d)	Diagnostic services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e)	Dental services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f)	Diabetic services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q.5 To what extent does the service meet the residents' needs?

	Name of service	Very well	Well	Somewhat	Poorly	Very poorly	Not applicable
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a)	Dietician	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b)	Speech and language therapist	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c)	Occupational therapist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d)	Diagnostic services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e)	Dental services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f)	Diabetic services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section 5: Support and Supervision

Q.1 On an average day, how many staff and residents are present in the dining room at mealtimes?

a) Number of staff present at mealtimes

9

STAFF

b) Number of residents present at mealtimes.

26

RESIDENTS

Q.2 Please provide a breakdown of the staff, identified in Question 1 (a), by type.

Nurses	Care support staff	Household staff	Other	Total staff present (Note: Should match answer to 1 a)
3-4	4		1 catering	9

Q.3 What staff grade has overall responsibility for supervision of mealtimes?

Nursing

Q.4 Is there a protected mealtime policy in place?

☒

Yes

☐

No

Please provide details:

Visitors are welcome at mealtimes if they wish to assist a resident to eat and drink. If not, then they are asked to remain in sitting area. Doors are closed to reduce distraction of residents

- Q.5 Are there sufficient staff present when meals are served to supervise meals and offer appropriate assistance to residents who require such assistance with eating and drinking? ☒ Yes ☐ No

Please provide details below:

Maximum number of staff are rostered for all major mealtimes. Staff breaks do not take place until after residents meals.

- Q.6 How are residents supported to eat and drink independently?

Please provide details

As a dementia care facility, each resident is supported to eat and drink independently for as long as possible. Thickened drinks are used for residents who may have assistance swallowing. Boyne View House breaks mealtimes into areas for those who require assistance and for those who do not.

- Q.7 Identify the measures in place to monitor the resident's hydration status to ensure that the resident is not unnecessarily transferred to an acute setting for hydration or nutritional treatments.

Please provide details:

If a resident is viewed as having poor oral intake of fluid, they are commenced on an intake and output chart. Drinks are offered at regular intervals. Supplies of minerals are available if they help the resident to drink. Doctor notified if fluid intake poor. Depending on stage of end of life, resident may have a trial of subcutaneous fluids.

Section 6: Facilities

Q.1 What times are meals served at?

	Name of meal	Time (AM or PM)	Place where the meal is served
a)	Breakfast	08.30 am	Dining room bedroom
b)	Lunch	12.15	Dining room, day room or bedroom
c)	Tea	16.15 pm	Dining room, day room bedroom
d)	Supper	19.30 pm	Day room, dining room, bedroom, day room

Q.2 Outline the arrangements in place for residents who may miss a mealtime on occasion, for example, they might be out at an appointment or have a social engagement etc..

All residents will be noted as to who is having an appointment. Meals are kept for residents who miss meals

Q.3 Outline the arrangements in place for residents with dementia or other conditions who may not eat at prescribed mealtimes.

Meals will be kept for residents with dementia who may not eat at prescribed times. Food is available even for night time and can be accessed by all staff. Regular snacks are available

Q.4 Outline the arrangements in place to allow flexible mealtimes for all residents.

Floor staff will inform catering staff of occasions when it does not suit the resident to eat. Nursing staff will ensure that a resident receives a full meal at a time that suits the resident

Q.5 How many people in total can the dining room/s accommodate at the one time?

16

Q.6 Are all residents provided with a choice of where to take their meals?

☐ Yes

☒ No

- Q.7 Are there facilities for residents to make tea and coffee? ☐ Yes
☒ No
- Q.8 Are residents offered/provided with snacks during the day and night? ☐ Yes
☐ No
- Q.9 Are there cooking facilities for residents? ☐ Yes
☐ No
- Q.10 Are residents' relatives and friends facilitated to assist him/her at mealtimes with due regard to the privacy of other residents? ☒ Yes
☐ No

Please provide details:

All residents are encouraged to visit at mealtimes if they wish. This is included in Contract, Residents guide and within Statement of Purpose

- Q.11 Are there opportunities provided for a resident's family and friends to dine with him/her on special occasions? ☒ Yes
☐ No

Please provide details:

Relatives are invited to dine with the resident anytime they wish. They will be offered anything that is on menu if they wish

- Q.12 Are there effective communication systems in place to ensure that residents' nutritional needs – and any care needs while he/she is eating or drinking – are known to all staff? ☒ Yes
☐ No

Section 7: Menus

- Q.1 Is the menu on display in a suitable format and in an appropriate location so that the resident or his/her representative knows what is available at each mealtime? ☒ Yes
☒ No

Q.2 How do you ensure that the menu provides a nutritious varied diet?

Please provide details:

There is always a choice of two hot meals and a cold choice if the resident wishes. Same is provided at tea time

Q.3 Do residents have a choice at all mealtimes?

Please provide details:

Yes. Over time staff do get a thorough knowledge of what residents preferences are. The choice is available but sometimes this may be at the time of serving the meal

Q.4 Are systems in place to facilitate residents to provide feedback which informs improvements to the menu and the mealtime experience?

☐

Yes

☒

No

Please provide details:

Was in place. Now needs to be reestablished

Overall Self-assessment of compliance with Regulation 20: Food and Nutrition and Standard 19: Meals and Mealtimes.

Please tick the box that best represents the level of compliance of your service.

Resident's outcome

Each resident is provided with food and drink at times and in quantities adequate for his/her needs.

Compliance demonstrated ☐

- There is a comprehensive policy for the monitoring and documentation of nutritional intake which is implemented in practice.
- Processes are in place to ensure residents do not experience poor nutrition and hydration.
- There is access to fresh drinking water at all times.
- Residents are offered appropriate assistance in a discrete and sensitive manner and enabled to eat and drink when necessary.
- Special dietary requirements of each resident are addressed.
- Where reasonable and practicable safe facilities are available for residents to prepare their own food.
- Food is nutritious, varied and available in sufficient quantities.
- Food is properly prepared, cooked and served, and is wholesome and nutritious.
- Food is available at times suitable to residents.
- Snacks are available throughout the day.

Minor non-compliance ☒

- While there are policies, procedures and practices in place, some gaps are evident in the maintenance of the documentation and care provided.
- Care plans do not fully direct the care to be delivered.
- Food is nutritious, varied and available in sufficient quantities but there is no choice at mealtime.

Moderate non-compliance ☐

- There is a policy for the monitoring and documentation of nutritional intake but staff are not sufficiently knowledgeable about it.
- Processes are in place to ensure residents experience good nutrition and hydration but they are not always adhered to.
- Residents are not provided with appropriate assistance.
- Modified consistency meals are not presented in an appetising and appropriate manner.
- Residents have no access to snacks outside regular mealtimes.

Major non-compliance



- There is no policy for the monitoring and documentation of nutritional intake.
- There are no processes in place to ensure residents do not experience poor nutrition and hydration.
- Water and drinks are not freely available or easily accessible to residents.
- Residents' dietary requirements are not communicated to kitchen staff.
- Residents on specialised diets do not have their specific needs met.
- There are no systems in place to ensure that residents receive specialised or modified consistency diets as prescribed.
- Portion sizes are not in accordance with residents' assessed needs.
- Food is not nutritious.

Please outline specific, measureable, realistic and time-bound actions to ensure compliance with Regulation 20: Food and Nutrition and Standard 19: Meals and Mealtimes.

1. Feedback on meals provided. Commence by 01/03/2014
 2. Specific Training on Nutrition for Staff. Too sporadic. Commence by 01/05/2014
 3. Nutritional training for Nurses to include use of MUST tool
 3. Examine choice of meal times. Commence by 17/03/2014
- Ensure that there are good care plans in relation to nutrition. Commence by 10/03/2014

Please outline any further areas for improvement which have been identified

We will ensure that any revisions required to Nutritional Policies are in place, communicated to all staff and that any feedback sought from Residents and relatives will be actioned upon.

This self-assessment form was completed by

Name:

Michael McCaul

Role:

PIC

Date:

17/02/2014

Contact No:

0876987429