**Dining Assistance Techniques and Adaptive Equipment**

**Competency**

Suggested Implementation Checklist

**Suggested Implementation Checklist:**

**Dining Assistance Techniques and Adaptive Equipment**

| **Regulation** | **Recommended Actions** |
| --- | --- |
| **F676: Activities of Daily Living (ADLs)/Maintain Abilities:**  “Based on the comprehensive assessment of a resident and consistent with the resident’s needs and choices, the facility must provide the necessary care and services to ensure that a resident's abilities in activities of daily living do not diminish unless circumstances of the individual's clinical condition demonstrate that such diminution was unavoidable.”[[1]](#footnote-1) | * Review, revise and institute policy and procedures with elements for compliance with dining-eating, including meals and snacks to include interventions, adaptive devices and techniques, individualized to the resident to keep resident at their highest level of functioning * Update staff education materials for orientation, annual education, agency staff orientation, and as needed. |
| **F677: ADL Care Provided for Dependent Residents:**  “A resident who is unable to carry out activities of daily living receives the necessary services to maintain good nutrition, grooming, and personal and oral hygiene”[[2]](#footnote-2) | * Review, revise and institute policy and procedures with elements for compliance with F677 specific to good nutrition * Update staff education materials for orientation, annual education, agency staff orientation, and as needed. |
| **F800: Provided Diet Meets Needs of Each Resident**  “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.”  “INTENT §483.60 - To ensure that facility staff support the nutritional well-being of the residents while respecting an individual’s right to make choices about his or her diet.”[[3]](#footnote-3) | * Review, revise and institute policy and procedures that promote compliance with F800 * Include resident preference and choice * Ensure facility staff support the nutritional well-being of the resident |
| **F810: Assistive Devices – Eating Equipment/Utensils**  “The facility must provide special eating equipment and utensils for residents who need them and appropriate assistance to ensure that the resident can use the assistive devices when consuming meals and snacks.”[[4]](#footnote-4) | * Provide staff training on dining assistive devices and techniques. * Update training for orientation, annual, agency staff, as needed. * Follow discharge plan from therapy. * Monitor resident maintenance, progress or decline. * Consider Restorative Eating Program individualized for resident needs |
| **F811: Paid Feeding Assistants**  §483.60(h)(1) State approved training course.  “A facility may use a paid feeding assistant, as defined in § 488.301 of this chapter, if—   1. The feeding assistant has successfully completed a State-approved training course that meets the requirements of §483.160 before feeding residents; and 2. (ii) The use of feeding assistants is consistent with State law.”[[5]](#footnote-5) | * Review records that feeding assistant has successfully completed a State-approved training course * Check that training course meets requirements of §483.160 * Provide comprehensive training to Paid Feeding Assistants for facility policies and procedures * Audit compliance with Paid Feeding Assistant Techniques and skills |
| **F801 Qualified Dietary Staff**  “The facility must employ sufficient staff with the appropriate competencies and skills sets to carry out the functions of the food and nutrition service, taking into consideration resident assessments, individual plans of care and the number, acuity and diagnoses of the facility’s resident population in accordance with the facility assessment”[[6]](#footnote-6) | Review, revise and institute policy and procedures regarding education and evidence of competency evaluations for food and nutrition service personnel  Review and revise facility assessment for sufficient and competent dietary staff per resident population needs as assessed |
| **F552 Right to be informed and make treatment decisions**  **“§**483.10(c) Planning and Implementing Care. The resident has the right to be informed of, and participate in, his or her treatment, including:  §483.10(c)(1) The right to be fully informed in language that he or she can understand of his or her total health status, including but not limited to, his or her medical condition.  §483.10(c)(4) The right to be informed, in advance, of the care to be furnished and the type of care giver or professional that will furnish care.  §483.10(c)(5) The right to be informed in advance, by the physician or other practitioner or professional, of the risks and benefits of proposed care, of treatment and treatment alternatives or treatment options and to choose the alternative or option he or she prefers”[[7]](#footnote-7) | Provide resident with information of assistive devices and feeding assistance.  Include resident/resident representative in the care planning process to include choices and preferences for care plan implementation |
| **F805 Food in Form to Meet Needs**  **F808 Therapeutic Diet Ordered** | * Policies and Procedures with education on: * Preparation according to care plan and orders * Observations of resident for chewing or swallowing difficulties * Food is cut, chopped or mechanically altered to meet the resident’s individualized plan of care needs and as ordered by physician |
| **F692 Nutrition and Hydration** | * Collaborate with IDT, resident and resident representative on diet and hydration needs, restrictions and orders |
| **F880 Infection Control**  “The facility must establish and maintain an infection prevention and control program designed to provide a safe, sanitary and comfortable environment and to help prevent the development and transmission of communicable diseases and infections.”[[8]](#footnote-8) | Nurse, CNA and Feeding Assistants training on Infection Control to include:   * Standard Precautions * Transmission-Based Precautions * PPE * Hand Hygiene * Blood Borne Pathogens * Cleaning and disinfection of adaptive eating utensils/equipment |
| **F842 Medical Records** | Documentation in the Medical Record to include:   * Resident care and services * Change of condition and follow up * Communication form between Shifts * Care Plan and revisions * Physician orders * All pertinent charting |

**References**

Centers for Medicare & Medicaid Services State Operations Manual, Appendix PP – Guidance to Surveyors for Long Term Care Facilities (Rev. 173, 11-22-17): <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf>

1. 1,2 Centers for Medicare & Medicaid Services State Operations Manual, Appendix PP – Guidance to Surveyors for Long Term Care Facilities (Rev. 173, 11-22-17): <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf> [↑](#footnote-ref-1)
2. [↑](#footnote-ref-2)
3. [↑](#footnote-ref-3)
4. [↑](#footnote-ref-4)
5. 3,4,5,6 Centers for Medicare & Medicaid Services State Operations Manual, Appendix PP – Guidance to Surveyors for Long Term Care Facilities (Rev. 173, 11-22-17): <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf> [↑](#footnote-ref-5)
6. [↑](#footnote-ref-6)
7. Centers for Medicare & Medicaid Services State Operations Manual, Appendix PP – Guidance to Surveyors for Long Term Care Facilities (Rev. 173, 11-22-17): <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf> [↑](#footnote-ref-7)
8. Centers for Medicare & Medicaid Services State Operations Manual, Appendix PP – Guidance to Surveyors for Long Term Care Facilities (Rev. 173, 11-22-17): <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf> [↑](#footnote-ref-8)