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3701-17-60 Dietary services; supervision of special diets.

(A) Each residential care facility shall specify in its residential care facility policies and the resident agreements, required by rule 3701-17-57 of the Administrative Code, the amount and types of dietary services it provides. The facility shall elect to provide any of the following:

(1) No meals;

(2) One, two, or three daily meals;

(3) Preparation of ~~simple diets~~ regular and special diets other than complex therapeutic diets; one, two, or three daily meals;

(4) Preparation and supervision of ~~simple diets~~ complex therapeutic diets. Each facility that elects to supervise ~~simple~~ complex therapeutic diets shall provide three daily meals and meet the requirements of this chapter of the Administrative Code for the supervision of ~~special~~ complex therapeutic diets; or

(5) ~~Preparation of calculated diets and supervision of calculated diets. Each facility that elects to provide calculated diets shall supervise the calculated diet, provide three daily meals and meet the requirements of this chapter of the Administrative Code for the supervision of special diets.~~ Each residential care facility that provides meals shall include a variety of food accommodating religious restrictions and ethnic and cultural preferences of residents in accordance with the residential care facility's policy.

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(B) Each residential care facility that agrees to provide three daily meals for a resident shall ~~each day~~ make available at least three nourishing, palatable, attractive and appetizing meals at regular hours. The meals shall provide the ~~recommended dietary allowances~~ Dietary Referenced Intake of the "Food and Nutrition Board" of the "National Academy of Science", be based on a standard meal planning guide from a diet manual published by a dietitian, approved by a dietitian, or both ~~or registered dietitian, or be approved by a dietitian~~. There shall be at least a four-hour scheduled interval available between the breakfast and noon meal and between the noon and evening meal. The hours of meal service ~~may~~ shall take into consideration residents' preferences. The facility shall make ~~a bedtime evening snack~~ snacks available ~~upon request and when needed~~.

~~(C) Each residential care facility that agrees to provide one or two meals a day shall provide meals that are based on a standard meal planning guide published by a~~

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~~dietitian or registered dietitian, are approved by a dietitian, or meet the following minimum meal pattern requirements. To aid in meal planning, purchasing, and preparation, portion size shall be based on a standard meal planning guide from a diet manual published by a dietitian or registered dietitian. Serving size may be adjusted according to resident preference.~~

~~(1) For breakfast:~~

~~(a) No less than one ounce cooked, edible portion of meat or meat alternate;~~

~~(b) One serving of fruit or vegetables;~~

~~(c) Two servings of enriched or whole grain bread or alternate;~~

~~(d) One teaspoon of butter or margarine; and~~

~~(e) One serving of milk or milk alternate.~~

~~(2) For lunch or dinner:~~

~~(a) No less than two ounces cooked, edible portion of meat or meat alternate;~~

~~(b) Two servings of fruits or vegetables;~~

~~(c) One serving of enriched or whole grain bread or alternate;~~

~~(d) One teaspoon of butter or margarine;~~

~~(e) One serving of dessert; and~~

~~(f) One serving of milk or milk alternate.~~

~~Coffee or tea or both may be offered as optional beverages.~~

(C) All meals served shall provide the Dietary Referenced Intake of the "Food and Nutrition Board" of the "National Academy of Science", and be based on a standard meal planning guide from a diet manual published by a dietitian, approved by a dietitian, or both. If the facility provides only one or two meals, the following patterns are to be followed:

(1) The breakfast meal shall include at least:

(a) One and one-half ounce cooked, edible portion of lean meat, eggs or legumes;

(b) One and one-half cups of fruit or vegetables;

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(c) Two servings of enriched or whole grain bread or cereals;

(d) Two teaspoons of butter or margarine as appropriate; and

(e) One cup of milk or milk product.

(2) The lunch or dinner meals shall include at least:

(a) Two ounces cooked, edible portion of lean meat, eggs or legumes;

(b) One and one-half cups of fruit or vegetables;

(c) Two servings of enriched or whole grain bread or alternate;

(d) Two teaspoons of butter or margarine as appropriate; and

(e) One cup of milk or milk product.

(3) Coffee, tea, or both may be offered as optional beverages for breakfast, lunch or dinner.

(4) Each meal shall include the choice of appropriate condiments, sauces and dressings.

(5) A residential care facility may choose to provide one serving of dessert or fruit during the lunch and dinner meals.

(D) Each residential care facility that supervises, or prepares special diets, or both shall: - ~~prepare and provide the special diets in accordance with the instructions of a physician or dietitian. The facility shall obtain from the physician or dietitian a written list of permitted and excluded foods and recommended meal patterns and food preparation techniques.~~

(1) Prepare and serve the special diets in accordance with the instructions of a physician or dietitian;

(2) Adjust special diet menus as directed by a dietitian required under paragraph (K) of this rule, or the resident's attending physician, or both; and

(3) Monthly weigh and record the weights of residents on special diets and notify the dietitian required by paragraph (K) of this rule and the resident's attending physician of any unplanned significant weight changes in accordance with policies and procedures developed by the dietitian.

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- (E) Each residential care facility that provides one or more meals and that does not permit residents to have food in their resident units shall make snacks available twenty-four hours a day.
- (F) Each residential care facility that does not provide any meals shall ensure that each resident unit is appropriately and safely equipped with food storage and preparation appliances which the facility maintains in safe operating condition or that each resident has access to an appropriately and safely equipped food storage and preparation area. Each residential care facility that does not provide any meals shall permit residents to store and prepare food in a safe manner in their resident units or in a resident food storage and preparation area.
- (G) Each residential care facility shall have a kitchen and other food service facilities that are adequate for preparing and serving the amount and types of meals the facility agrees to provide.
- (H) If applicable, the residential care facility shall have a food service operation license issued under Chapter 3701-21 of the Administrative Code.
- (I) Each residential care facility that provides meals shall procure, store, prepare, distribute, and serve all food in a manner that protects it against contamination and spoilage.
- (1) Each residential care facility shall assure that the kitchen and dining areas are cleaned after each meal and shall:
- (a) Transport meals in a sanitary manner to prevent contamination;
 - (b) Provide handwashing facilities, including hot and cold water, soap and individual towels in the ~~kitchen and~~ food preparation and service area.
 - (c) Provide and maintain clean and sanitary kitchen and dining areas and a clean, sanitary and adequate supply of eating and drinking utensils, pots, and pans for use in preparing, servicing, and eating appetizing meals and snacks;
 - (d) Place food scraps and trash in garbage cans with tightfitting lids and bag liners and shall empty garbage cans daily, or more often if needed. Nondisposable containers shall be cleaned frequently enough to maintain sanitary conditions. Disposable bags of garbage may be stored outside only in a non-absorbent container with a close-fitting cover. Liquid wastes resulting from compacting shall be disposed of as sewage.
- (2) Residential care facilities may provide ~~homestyle meal service or buffet service, if agreeable to residents participating in the meal service. Facilities providing homestyle meal service or buffet service shall use precautions to prevent contamination of food being served, and develop and follow procedures~~

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~~regarding re-serving of food. For purposes of this paragraph, "homestyle meal service" means a dining experience where small groups of residents sit together for a meal and each resident portions his or her own food onto his or her plate from a serving platter or bowl. The serving platter or bowl is then passed to another resident in the group. "Buffet service" means an informal meal service that is set up in a manner that provides ready access to food by the residents~~ any format of meal service, which otherwise meet the requirements of this rule, with input from residents.

(3) Residential care facilities may provide a dining environment as natural and independent as possible, comparable with eating at home, with choices from a wide variety of food items tailored to the residents' wants and needs, which otherwise meet the requirements of this rule.

(J) Each residential care facility that supervises ~~special~~ complex therapeutic diets shall, at minimum:

(1) Provide dietary services in accordance with ~~paragraph (B)~~ paragraphs (A) and (D) of this rule;

(2) Assure that ~~special~~ complex therapeutic diets are prepared and offered as ordered;

(3) Monitor and document resident acceptance of ~~special~~ complex therapeutic diets;

(4) Monthly weigh and record the weights of residents on ~~special~~ complex therapeutic diets and notify the resident's attending physician and the dietitian required by paragraph (K) of this rule of any unplanned significant weight changes in accordance with policies and procedures developed by the dietitian;

~~(5) For residents on special diets, notify the resident's attending physician and the dietitian required by paragraph (K) of this rule of any unplanned significant weight changes in accordance with policies and procedures developed by the dietitian; and~~

~~(6)~~(5) Adjust ~~special~~ diet menus as directed by the licensed dietitian required by paragraph (K) of this rule or the resident's attending physician.

(K) Each residential care facility which supervises ~~special~~ complex therapeutic diets shall provide or arrange for a dietitian to plan, oversee, and assist in implementing dietary services that meet the residents' needs and comply with the requirements of this rule. The dietitian shall, at a minimum, consult quarterly with the food service staff. Each residential care facility shall ensure the dietitian performs the following functions for residents on complex therapeutic diets:

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- (1) ~~Develop policies and procedures which assure that special diets are prepared and offered as ordered and that food service personnel maintain sanitary conditions in procurement, storage, preparation, distribution and serving of food~~Plan, oversee and assist in the implementation of nutrition services that meet the needs of the residents;
 - (2) ~~At least quarterly, unless the dietitian requires otherwise, monitor staff that prepares or serves the food and monitor residents on special diets to meet the needs of the residents~~Evaluate the residents' acceptance of meal service and response to nutrition related interventions at least quarterly;
 - (3) Within one month after the facility begins supervising a new ~~special~~ complex therapeutic diet, monitor staff that prepares or serves a new ~~special~~ complex therapeutic diet and monitor the resident receiving a new ~~special~~ complex therapeutic diet. The facility shall notify the dietitian upon receipt of a physician's order for a new ~~special~~ complex therapeutic diet. For the purposes of this provision, "new ~~special~~ complex therapeutic diet" means either a ~~special~~ complex therapeutic diet that the residential care facility has never before supervised or a ~~special~~ complex therapeutic diet that has been prescribed for a resident for the first time; and
 - (4) ~~Train staff in the monitoring, supervision and preparation of special diets~~Oversees and assists in the training of food service staff in the preparation and serving of foods including any special dietary interventions.
- (L) Each residential care facility that provides meals shall maintain at all times for residents a one-week supply of staple foods and a two-day supply of perishable foods. The amount of such supplies shall be based on the number of meals the facility, through its admission policies and resident agreements, has decided to provide daily.
- (M) Each residential care facility that provides meals shall plan all menus for meals at least one week in advance. Food shall vary in texture, color and seasonal foods. Residential care facilities shall maintain records of dated menus, including ~~special~~ complex therapeutic diets, as served for a period of at least one year. The records shall be made available to the director upon request. The records shall indicate any substitutions made to the menus except that alternate items offered to individual residents because of food intolerances or preferences do not need to be recorded unless the resident is on a ~~special~~ complex therapeutic diet. All foods substituted shall be of similar nutritive value.
- (N) Each residential care facility that provides meals shall observe, supervise, and assist a resident in consuming meals if the resident needs observation, supervision, or assistance. The residential care facility shall ensure that food texture is appropriate to the individual needs of each resident, except that residential care facility staff shall not perform syringe feedings.

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- (O) Residential care facilities shall not administer parenteral nutrition. A residential care facility may administer enteral tube feedings on a part-time intermittent basis in accordance with rule 3701-17-59.1 of the Administrative Code.
- (P) All residential care facilities shall provide safe drinking water which shall be accessible to residents at all times.
- (Q) A hospice patient's diet shall be planned by a dietitian, the hospice program, or both, as appropriate for that individual.