



Preventing Dietary Safety Events

Developing systematic, effective processes to prevent dietary-related adverse events

Background:

As part of Safe Care, we started a process for collaborative learning and sharing called “Safe Tables.” A Safe Table is a safe space to come together and explore a targeted safety issue by conducting a deep dive into the key factors contributing to the safety events and developing and sharing prevention strategies and tools.

Based on review of Minnesota OHFC substantiated report and immediate jeopardy data, we identified a need to understand and address the factors that contribute to instances of residents receiving foods that they were allergic to or foods that were the incorrect texture for those residents on a modified texture diet.

Safe Table Advisory Group Members:

Thank you to the Safe Table Advisory Group Members for committing their time and sharing their experiences and expertise in the development of these important recommendations and resources to address and prevent these types of dietary-related adverse events.

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Using the Recommendations:

You can use the recommendations below to assess the practices currently present in your organization by clicking on the checkbox next to each practice that is effectively in place within your organization.

Based on the findings of your assessment, you can use the Action Planning Document (or another action planning tool) to create a plan to address one or more of the practices identified as an area of initial focus.

Toolkit items, and implementation tips, are included in each section to provide examples that you can use as a reference or to customize for your program.

Disclaimer: Information shared in this document and tools are intended for purposes of sharing, learning and improvement only. The practices outlined in this document should not be interpreted as setting a standard of care.

Documenting and Communicating Diet Modifications

Practice	Toolkit Items
<p>Documentation</p> <ul style="list-style-type: none"> <input type="checkbox"/> A consistent and accessible place in the resident’s medical record is established to document diet modifications. <input type="checkbox"/> Critical/essential diet modifications, such as food allergies, texture modifications, are flagged. <p><i>A consistent and accessible place/method is established to visually make critical/essential diet modification information available to staff when:</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Preparing meals during mealtimes (i.e., kitchen staff) <input type="checkbox"/> Ordering meals during mealtimes (i.e., nursing staff) <input type="checkbox"/> Dishing up meals during mealtimes (i.e., kitchen staff) <input type="checkbox"/> Serving meals during mealtimes (i.e., nursing; kitchen staff) <input type="checkbox"/> Preparing or serving snacks/food outside of mealtimes (e.g., CNAs, activities staff) <input type="checkbox"/> An on-going process (e.g., daily, before each meal) is in place to audit and update diet modifications in writing, including documenting new orders, ensuring updates are made to all sources where modifications are documented. 	<p>Tools:</p> <ul style="list-style-type: none"> -Documentation Example <p>Implementation Tips:</p> <ul style="list-style-type: none"> -Explore software solutions to manage and communicate diet modifications; this may be an add-on to your current system -Involve staff who will be accessing diet modification information to identify barriers to accessing dietary information and develop solutions -Effective audits include clearly assigned accountability for conducting audits, back-up if auditor(s) is not available, and a consistent schedule for completing audits
<p>Communication</p> <ul style="list-style-type: none"> <input type="checkbox"/> A process is in place to conduct a pre-meal service huddle to review resident diet changes. <input type="checkbox"/> A process is in place to identify and communicate to staff back-ups for lead staff during absences/unavailability. <input type="checkbox"/> A process is in place for Speech/Language providers to communicate any significant changes in diet requirements (i.e., modified textures) to the appropriate person in a timely manner and for the change to be implemented in time for the next meal service if possible. <input type="checkbox"/> For new resident admissions, a process is in place to communicate any significant diet requirements (i.e., allergies, modified texture) to the appropriate person in a 	<p>Tools:</p> <ul style="list-style-type: none"> -Huddle Template -Meal Time Huddle Example -Change Order Tool Examples -Staff Communication Examples -Sample Communication Board <p>Implementation Tips:</p> <p>Whiteboard in kitchen can be used to visually share key information, such as: Preferences, Modified Textures, Allergies (make sure to assign accountability for updating information)</p>

timely manner and for the change to be implemented in time for the next meal service if possible.

- An easy to access process is in place for staff to report any dietary-related concerns/safety issues, including steps to follow if concerns are not addressed and how the organization will respond to concerns.
- A process is in place to respond to resident/family requests to not follow high-risk diet modifications.

Identifying Potential Allergen Ingredients in Foods

Practice	Toolkit Items
<p><input type="checkbox"/> A process is in place to identify the ingredients in foods to be served/made available to residents by the facility, including:</p> <ul style="list-style-type: none"> ▪ Scratch-made food items ▪ Processed food items ▪ Foods available in common areas <p><input type="checkbox"/> A process is in place to make information on potential food allergen ingredients (e.g., peanut butter, strawberries) available to staff (preparation, dishing up, serving) during the process of verifying resident meals/snacks against diet cards/orders.</p> <p><input type="checkbox"/> A process is in place for safely managing food brought in by families and other external sources.</p>	<p>Tools: -Identifying Allergens Example</p> <p>Tips/Ideas:</p> <ol style="list-style-type: none"> 1) Explore software vendors offering ingredient identification solutions 2) Create a process flow for how ingredient information is shared/available to staff <ul style="list-style-type: none"> -Food made in-house* -Pre-packaged foods* -Food brought in by families (have a clear policy and process for safely managing food brought in by others) <p><i>*Clearly identify where allergens can be found within your vendor system and on food labels</i></p>

Verifying Diet Modifications are Followed

Practice	Toolkit Items
<ul style="list-style-type: none"><input type="checkbox"/> A process is in place to verify food to be served against documented diet modifications/preferences within each step of the process<ul style="list-style-type: none">• Food Preparation• Preparing plates• Serving food<input type="checkbox"/> For residents with flagged diet cards/lists, a Dietary Safety Pause is performed between the kitchen staff and serving staff to verify food allergens are not present and/or food is correct texture.	<p>Tools:</p> <ul style="list-style-type: none">-Verification Examples- Dietary Safety Pause Poster – 8.5 x 11 (letter size)- Dietary Safety Pause Poster – 8.5 x 14 (legal size) <p>Tips/Ideas:</p> <ul style="list-style-type: none">-Although time saving, refrain from pre-setting fruit and other possible texture/allergen items on the table.

Training & Auditing

Practice	Toolkit Items
<ul style="list-style-type: none"> <input type="checkbox"/> Training on dietary safety is provided to all staff to reinforce the culture that Safety is everyone's job. <input type="checkbox"/> A process is in place to ensure staff filling in for regular staff when short-handed are trained and understand key dietary safety processes. <input type="checkbox"/> Modified texture training is based on best practice standard International Dysphagia Diet Standardization (IDDSI). <input type="checkbox"/> A process is in place for department leaders to regularly conduct rounds to gather information and seek input from staff. <input type="checkbox"/> A process is in place to conduct regular observational auditing of the key process steps, e.g., accurate and timely documentation, verification process. <input type="checkbox"/> A process is in place to understand the factors contributing to issues identified during the rounding and auditing processes and to take action to address identified process issues. 	<p>Tools:</p> <ul style="list-style-type: none"> -Safe Care Pledge -Leadership Rounding Toolkit -Meal Time Huddle Example -Competency Example <p>Tip:</p> <ul style="list-style-type: none"> -Can use a Meal Time Huddle Tool as Auditing Tool to identify opportunities for improvement

Responding to an Adverse Dietary Event

Practice	Toolkit Items
<ul style="list-style-type: none"><input type="checkbox"/> A process is in place for any staff to call for assistance in an urgent/emergent situation (e.g., resident choking incident).<input type="checkbox"/> Training is provided to staff in responding to choking/allergic reactions.<input type="checkbox"/> Choking/allergic reaction case scenarios are included in rapid response drills.<input type="checkbox"/> A process is in place to conduct a root causes analysis following an urgent/emergent dietary situation to identify contributing factors/root cause(s) and create an action plan to prevent future similar events.	<ul style="list-style-type: none">-Rapid Evaluation Team Roadmap-RET Drill Choking Case Example-5 Whys-Action Plan (see below)

Action Plan

Action #:

Category: Documenting/Communicating Diet Modifications Identifying Potential Allergen Ingredients in Foods
 Verifying Diet Modifications are Followed Training & Auditing Responding to an Adverse Dietary Event

Practice:

Action(s)	Target Date	Person Responsible	Notes