

This Inspection Guide provides **guidance** to the inspector during the initial planning of an inspection. Not all sections will be applicable in every situation and the inspector may need to adjust the inspection based on information collected.

PROFILE FOR RESIDENT

- Name, room number, home area
- Date of birth, date of admission, date of discharge (if applicable)
- Diagnoses
- Other resident information, as applicable: Physician, SDM, Advanced Directives, Activities of Daily Living, and RAI-MDS Outcome Scores, e.g., CPS

CLINICAL RECORD REVIEW (ELECTRONIC AND HARD COPY)

ASSESSMENTS

- RAI-MDS - Section K (Nutrition), Section M (Skin), and Section J (Health Conditions)
- Nutrition and Hydration assessment(s)
- Documentation of care (flow sheets, tasks)
- Assessments are consistent and complement each other
- External consultations, as available, e.g., occupational health and speech language pathologist
- Food and fluid intake, as required
- Body weight record

PLAN OF CARE

- Plan of care is based on assessments
- Goals for care and risks related to nutrition and hydration are identified
- Interventions are in place to mitigate and manage nutrition and hydration risks identified
- Restorative care is integrated as needed

MEDICATION ADMINISTRATION RECORD (MAR)

- Medications prescribed to mitigate and manage nutrition and hydration risks identified (oral glyceic, insulin)
- Medications prescribed with side effects that may contribute to nutrition and hydration risks (loss of appetite/taste/smell, alterations in salivation, gastrointestinal affects, drug-nutrient interactions)
- Nutritional supplements (meal replacements, vitamins/minerals), enteral/parenteral feeding

LAB WORK

- Results related to disease process that may affect nutrition and hydration risk, e.g., blood glucose, electrolytes, liver enzymes, creatinine, serum protein.

PROGRESS NOTES

- Notes specific to the incident and/or care item being inspected
- Interventions used and the effectiveness of these interventions to mitigate and manage nutrition and hydration risks identified
- Assessment and/or re-assessment of interventions, as needed
- Notes from external consultations, e. g., occupational health and speech language pathologist

OBSERVATIONS

FOOD PRODUCTION

- Sufficient food supply and storage, as required
- Institutional food service equipment with capacity to produce and serve the menu
- Institutional food service equipment with capacity to clean and sanitize, as required
- Menus are available for all diets and textures with choices available as required
- Menus are available for both meals and snacks
- Production sheets and recipes are available to support menu production

- Menu items are prepared in accordance with the planned menu
- Food items in storage areas are dated and within expiry or best before dates
- Food items are stored at the appropriate temperatures

PLATING OF FOOD

- Planned menu items are offered to residents
- Menu items are plated and portioned in accordance with the planned menu
- Communication of the resident's nutrition and hydration needs (diet list, rosters)
- Implementation of the resident's plan of care

MEAL SERVICE

- Assistive devices, appropriate furnishings and equipment
- Proper feeding techniques: safe positioning for eating and drinking
- Monitoring of residents eating and drinking
- Congregate meal setting, course by course service, e.g., soup, then main meal, then dessert, sufficient time for eating and drinking
- Communication of resident nutrition and hydration needs, e.g., diet list, rosters
- Implementation of the resident's plan of care
- Staff to resident interactions are conducted with respect and dignity
- Safe food handling practices, including hand washing

SNACK SERVICE

- Assistive devices, appropriate furnishings, and equipment
- Proper feeding techniques: safe positioning for eating and drinking
- Monitoring of residents eating and drinking
- Communication of resident nutrition and hydration needs (diet list, rosters)
- Implementation of the resident's plan of care
- Staff to resident interactions are conducted with respect and dignity

- Safe food handling practices, including hand washing
- Food and Fluid Guide (eInspectors' Handbook)
- International Dysphasia Diet Standard Initiative (IDDSI) (eInspectors' Handbook)

INTERVIEWS

RESIDENT/SDM

- Engage residents in a conversation about the menu, meals and snacks, food quality, e.g., looks, taste, temperature, portion size, assistance, availability of food and fluid throughout the day
- Discuss how menus are communicated to the resident

DIRECT CARE STAFF

PSW, RPN, RN and others as applicable

- Explore the roles and responsibilities during meal and snack service
- Discuss how staff are made aware of a resident's nutrition and hydration needs
- Discuss safe food handling practices, including hand washing
- Discuss the ways in which other members of the care team are involved in care needs related to nutrition and hydration, e.g., referral to therapies, RD, NM
- Confirm their familiarity of the resident and their care
- Discuss the resident's nutrition and hydration care, specific to the inspection
- Explore how a resident's nutritional parameters, such as weight and food/fluid intake are monitored

REGISTERED STAFF AND MEDICAL PERSONNEL

- Explore the approaches and tools for nutrition and hydration assessment, implementation of interventions and re-assessment when interventions are not effective.
- Explore what interventions are used to mitigate and manage the identified nutrition and hydration risks.



FOOD SERVICE WORKERS, COOKS

- Discuss the roles and responsibilities during meal and snack service.
- Discuss how staff are made aware of a resident's nutrition and hydration needs.
- Explore the food production system, food preparation, plating and service of meals and snacks.
- Confirm their familiarity of the resident and their care.
- Discuss the resident's nutrition and hydration care, specific to the inspection.

OTHER STAFF**Registered Dietitian**

- Explore the approaches and tools for nutrition and hydration assessment, implementation of interventions and re-assessment when interventions are not effective.
- Explore how a resident's nutritional parameters, such as weight and food/fluid intake, are monitored.
- Confirm their familiarity of the resident and their care.
- Discuss the resident's nutrition and hydration care, specific to the inspection.
- Discuss the legislative areas of concerns, if identified.

MANAGEMENT**Food Service Supervisor, Nutritional Manager**

- Explore the food production system, food preparation, plating, and service of meals and snacks.
- Explore how the nutrition and hydration program is organized to ensure resident's nutrition and hydration needs are met.
- Discuss the legislative areas of concerns, if identified.

OTHER RECORD REVIEW

RESIDENT CARE NEEDS

- Process to ensure food service workers and other staff involved in meal and/or snack service are aware of the residents' nutrition and hydration needs (diet list, rosters)
- System to monitor food and fluid intake of those residents at risk
- System to monitor body weight of residents
- Policies relevant to the nutrition and hydration program

MENUS, FOOD PRODUCTION SHEETS, RECIPES

- Minimum 21-day menu cycle that includes meals and snacks for all diets and textures offered
- Includes alternative choices, as required
- Continuity between information sources, e.g., menu items are reflected on the production sheet and there is a corresponding recipe
- Approval of the menu by the Registered Dietitian; review of the menu by the Residents' Council
- Policies relevant to the nutrition and hydration program

STAFFING SCHEDULE AND QUALIFICATIONS

- Registered Dietitian is on site for the required hours per month
- Nutritional Manager is an active member of the *Canadian Society of Nutrition Management* and is on site for the required number of hours per week
- At least one cook has the required certification and is on site working 35 hours per week
- Food Service Workers have the appropriate qualifications and there are sufficient food service workers to meet the required staffing hours per week

FOR FURTHER GUIDANCE

Please refer to policies, guidance documents, and job aids available in the eInspectors' Handbook.