VAN WERT COUNTY HOSPITAL

Policy/Procedure: Interdepartmental

No: N 3-03

Issue Date: 4/2005

By: Nutrition Services

No of Pages: 1


Revised: 4/2014

Distribution List: All Nursing Units

SUBJECT: ROOM SERVICE

POLICY: All inpatients will be offered Room Service as their primary meal source. Breakfast, lunch & dinner meals will be available on demand during operational hours of 7:00 a.m. to 6:00 p.m. and will be delivered as soon as possible with a goal of less than 30 minutes after the order is placed.

PURPOSE: To provide daily meal service in a safe and timely manner to the patients of Van Wert County Hospital (VWCH), such that all meals meet standards for accuracy, temperature, and quality.

PROCEDURE:

1. Inpatients at VWCH may use Room Service to request breakfast, lunch & dinner meals daily from 7:00 a.m. through 6:00 p.m.
2. Patients select from a restaurant-style menu that adheres to their prescribed diet order.
3. Meal requests are made by telephone to the Food Service Associate, at ex. 222. All requests are corrected based upon dietary restrictions at the time of order. Meal orders tickets are sent to the production area for assembly and then delivery.
4. Meals will be delivered to the patient within delivered as soon as possible with a goal of less than 30 minutes after the order is placed.
5. All patient meals are checked for accuracy, quality, and adherence to temperature standards before delivery.
6. Patients may phone in request for breakfast, lunch and dinner meal each day for themselves. Food Service Associate will maintain a log sheet to verify that patients are ordering at each meal.
7. Guests may select ordering off the room service menu for a fee of $4.00 for each meal.
8. Patients unable to use the room service system will have meals arranged according to set procedures.
VAN WERT COUNTY HOSPITAL

Policy/Procedure: Interdepartmental

No: N 3-04

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By: Nutrition Services

No of Pages: 1 of 2


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Distribution List: All Nursing Units

SUBJECT: COMMUNICATION OF NUTRITION CARE ORDER, STATUS CHANGES AND PATIENT INFORMATION

POLICY: A nutrition Care Order is accepted upon the written order of a physician. The order remains in effect until a Nutrition Care Order change is received. All diet orders must be entered into Allegre before the meal is served. A phone call to Nutrition Services is helpful in letting Nutrition Services know a new diet order has been inputted into the computer. Diet Orders, status changes or nourishments, standing orders and allergies will be communicated to Food and Nutrition Services via facility computer system.

PURPOSE: With increased patient participation in selecting meals, accurate and updated information is vital to ensure proper diet for patient.

PROCEDURE:

1. The facility computer system will be used to communicate patient status changes. Such nutrition care changes/information, but not to be limited:
   - TPN orders
   - Room Transfers
   - Diet Orders-New/Changes
   - Food Allergies/Intolerances
   - New Admissions
   - Discharges
   - NPO

2. Nursing will enter status changes, Diet Orders, NPO orders, etc. Verbal orders must be confirmed within one meal period by facility computer program.

3. Nutrition Care Orders must be entered into the VWCH Computer System when the order is written. Allergies, intolerances, likes, dislikes, etc. should be entered in the comment section.
4. Any previously ordered diet must be cancelled before entering a new order. Ex.: if full liquid changes to soft, the full liquid must be cancelled before entering soft diet.

5. Hold trays: If a meal is to be on hold, it must be entered into the computer system, NPO, as a new diet order. When meals are resumed, another new diet order must be entered into the computer system.

6. Supplements are entered under the REMARKS section of the diet order, or entered as an order.

7. Miscellaneous requests may be entered under comment section, but must be modified after request is given. Ex: birthdays, anniversaries.

8. Nutrition Services must be notified by phone by Emergency Department, or ASA/Outpatient staff requesting a patient meal. Must also be put into VWCH Computer System.

9. Nutrition Care Orders that do not conform to the MMS Diet Manual are referred to the dietitian or designated representative and addressed immediately.
SUBJECT: COMPUTER & PHONE USAGE FOR ROOM SERVICE

POLICY: All communication regarding patient information (relevant to Food Services) will be transmitted via facility computer program from nursing.

PURPOSE: To ensure communication to room service occurs in a consistent and documented manner.

PROCEDURE:

1. The facility computer program will be used primarily to communicate Patient status changes. Such changes may include, but not be limited to:
   - TPN orders
   - Room Transfers
   - Diet Orders-New/Changes
   - New Admissions
   - Discharges
   - NPO

2. The room service phone will be used for order placement, when the patient is unable or unwilling to place orders. (See policies for non-English Speaking Patients, Patients Orientation To Room Service) The Room Service number is (222).

3. If the facility computer program malfunctions, the Unit Clerk will telephone the Patient Food Service Department at ex. 222. At that time, it will be confirmed that all orders or status changes sent have been received via phone.

4. The Patient Food Service Department will transcribe orders or status changes by phone from the Unit Clerk until the facility computer program problem is resolved.

5. Nutrition services will maintain a written log of diet orders in the nutrition office.
VAN WERT COUNTY HOSPITAL

Policy/Procedure: Interdepartmental

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By: Nutrition Services

No: N 3-06

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Distribution List: All Nursing Units

SUBJECT: ROOM SERVICE COMMUNICATION - Within Nutrition Service Department

POLICY: All members of the patient service team will practice professional communication skills, while satisfying patient orders.

PURPOSE: To ensure that clear lines of communication exist for production of Room Service orders.

PROCEDURE:

1. All orders for Inpatient Room Service meals will be called to extension 222.

2. Each patient's name, room number and diet order will appear on each order. This ensures that the prep areas are aware of dietary information at the time of food production.

3. Each diet order has a separate order form, with only appropriate items printed on each. Each order form is clearly labeled with the diet order, and the meal period (either Breakfast, Lunch or Dinner).

4. If an order is unreadable or unclear, the Tray Assembler will request clarification from the Food Service Associate or Dietitian.

5. If there is any question about any item on an order, the Cook / Cold Prep will request clarification from the Food Service Associate or Dietitian.

6. Any questions regarding specific item requests will be confirmed by phone with the Patient before the meal is delivered. Questions regarding a restricted diet exception will be directed to a Registered Dietitian. (assigned or on call).
SUBJECT: MONITORING PATIENT MEAL ORDER PLACEMENT

POLICY: The Food Service Associate shall monitor the frequency of ordering by utilizing a diet order sheet.

PURPOSE: To ensure patients regularly order meals in accordance with their diet order.

PROCEDURE:

1. The Food Service Associate will use an order verification sheet (diet list) as a means of monitoring who has not eaten within the last meal period.

2. As a patient's order is placed, a check is marked on the diet order sheet (Breakfast, Lunch or Dinner).

3. If a patient does not order by 8:45 a.m. at breakfast, 12:45 p.m. at lunch and/or 5:45 p.m. at dinner the Food Service Associate will call the patient to assist with the order. Calls are not made to OB/3rd floor except at dinner. If Food Service Associate is unable to obtain the Patient order from the patient, family, or nurse – a house diet/non-select diet will be provided.
SUBJECT: PATIENT ORIENTATION TO ROOM SERVICE

Policy/Procedure: Interdepartmental

Issue Date: 4/2005

By: Nutrition Services


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Distribution List: All Nursing Units

POLICY: Promptly after a diet order is received, a Food Service Associate will orient patients to Room Service Procedures, including: hours of operation, phone number, and how to order.

PURPOSE: To ensure all patients are educated in placing food requests and have proper menus that reflect their correct diet order.

PROCEDURE:

1. Promptly after admission, Nursing will assess each patient to determine ability to participate in the room service program. If a patient is not able to participate, it is noted in the remarks section of the diet order.

2. When the unit clerk enters the diet order into the facility computer, the above information will also be entered in regards to determining ability to use room service.

   Patients determined to be inappropriate for room service will be receive a house, or non-select diet based on diet order. (Room service orders will be taken for the patient in the event that the family is present and wishes to order for the patient).

   Patients who needed assistance will receive assistance as needed.

3. The Food Service Associate will orient each patient participating in room service promptly after admission on the following:
   - Hours of operation
   - Room service number
   - Menus
   - Explanation of prescribed diet.

4. Patients with further questions or need of education will receive follow-up from the dietitian within 48-72 hours of request via the Food Service Associate, nursing, care givers, etc.
VAN WERT COUNTY HOSPITAL

Policy/Procedure: Interdepartmental

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Distribution List: All Nursing Units

SUBJECT: TELEPHONE OPERATIONS

POLICY: Telephones will be available during patient meal service hours.

PROCEDURE:

1. Telephones will be attended for food service period – 7:00 a.m. - 6:00 p.m, and during Nutrition Services staff working hours – 6:00 a.m. – 7:00 p.m.
VAN WERT COUNTY HOSPITAL

Policy/Procedure: Interdepartmental  
No: N 3-10

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Distribution List: All Nursing Units

SUBJECT: ROOM SERVICE MEAL ACCURACY

POLICY: The Food Service Supervisor or Designee will check all completed meal orders for accuracy.

PURPOSE: To ensure adherence of room service meals delivered to VWCH patients to prescribed diets and according to patient wishes.

PROCEDURE:

1. The Food Service Associate reviews all meal requests made for inpatients. Corrections, deletions or additions to the meal request are made to adhere to the prescribed diet order as written by the physician and reviewed by the Dietitian.

2. Before delivery, the Food Service Associate will check each room service meal for accuracy. This includes, but is not limited to: confirming that all items are in place, quality standards are met, delivery slips are complete, and diet order restrictions are met.

3. Any questions regarding specific item requests will be confirmed by phone with the Patient before the meal is delivered. Questions regarding restricted diet exception will be directed to the Dietitian (assigned or on call.)
VAN WERT COUNTY HOSPITAL

Policy/Procedure: Interdepartmental

Issue Date: 4/2005 By: Nutrition Services


Distribution List: All Nursing Units

SUBJECT: ROOM SERVICE MENUS

POLICY: Patients will be given a Room Service Menu that adheres to their prescribed Diet Order.

PURPOSE: To provide menus that provide sound nutrition for all patients.

PROCEDURES:

1. Menus available
   
   A. Eleven menus will be available at all times. They are:

   - Regular RED Menu Cover
   - Cardiac GREEN Menu Cover
   - Consistent Carbohydrate Count BLUE Menu Cover
   - Consistent Carbohydrate Count/Cardiac BLACK Menu Cover
   - 2 Gram Sodium MAROON Menu Cover
   - Gluten Free Orange Menu Sheet
   - Dysphagia/Mechanical Soft Green Menu Sheet
   - Puree Blue Menu Sheet
   - GI Soft Fuchsia Menu Sheet
   - Clear Liquids Green Menu Paper
   - Full Liquids Yellow Menu Paper

2. The Director of Food and Nutrition Services and Dietitian approve all menus used for room service.

3. Menus will be reviewed biannually (or as otherwise needed) for changes.

4. Menus for patients requiring further specialized diets will be designed on a case by case basis. (See Special Diet Policy).
VAN WERT COUNTY HOSPITAL

Policy/Procedure: Interdepartmental  No: N 3-12

Issue Date: 4/2005  By: Nutrition Services  No of Pages: 1


Distribution List: All Nursing Units

SUBJECT: SPECIAL DIETS

POLICY: Patients on calorie level, 4 gm sodium, and low fat, or other specialized diets will have meal patterns listed in the Nutrition Services Cardex and at bedside to assist with menu ordering and planning. All other diets will be monitored according to the guidelines in the MMS Diet Manual.

PROCEDURE:

1. During orientation to Room Service, the Food Service Associate will provide the patient with a list of restrictions and/or a meal pattern as developed and approved by Dietitian.
   
   A. Meal patterns or restrictions will be communicated to Room Service and be placed in the cardex, and used for monitoring food requests.
   
   B. A copy of the pattern or restrictions will be given to the patient, and reviewed with him.
   
   C. Food Service Associate will distribute special diet menu according to the following:
      1. Calorie level diets will receive Blue menu cover.
      2. 4-gram sodium diets will receive Maroon menu cover.
      3. Low fat diet will receive Green menu cover.

2. The Food Service Associate will notify the Dietitian of any patient deviating from the diet pattern.

3. The Dietitian or designee will review the diet with any patient deviating from the diet pattern. Any patient unable to order meals according to his diet pattern will be placed on standing orders, and/or assisted daily with food ordering. Such default menus/meals will be designed by the Dietitian or designee, and communicated to Food Service Associate. (See Alternate meal services)

4. On weekends and holidays, the Food Service Associate will call the Dietitian on call for special diet assistance.
SUBJECT: PLACING ROOM SERVICE ORDERS

POLICY: Meal requests will be placed with the Food Service Associate via Room Service telephone. Meal requests will be honored only for patients with a written diet order in the Physician's Orders.

PURPOSE: To provide a standardized ordering procedure.

PROCEDURE:

1. Patient meal requests may be placed with the Food Service Associate by patients, family/caregivers, guests, trained Food Service Staff, or nursing.

2. Room Service telephone lines will be operational from 6:00 a.m. – 7:00 p.m.

3. When a call comes into Room Service the Food Service Associate will:
   3.1 Pull pre-headed diet ticket with current diet order. The diet order sheet will check for verification.
   3.2 The menu order will contain the following: patient name, room number, diet order, date, & requested delivery time.

4. The Food Service Associate will check the menu for completeness, consistency with the diet order, and confirm final menu with the caller.

5. All completed menus will be checked by the Food Service Associate against the Cardex for special instructions, and allergies, and be corrected accordingly. The completed menu will be immediately processed for assembly, and the patient's name will be checked off of the diet sheet for that meal period.

7. Patients who are unable to place orders by phone, due to physical limitation or preference but are otherwise appropriate for room service will have the Food Service Associate assist in ordering their meal to the Food Service Department via phone. Patients who may prefer this method of order placement will be identified during nursing assessment and/or orientation to Room Service and noted in the facility computer system under comments section of the diet order.
SUBJECT: STANDING ROOM SERVICE ORDERS AND NOURISHMENTS

POLICY: Fixed meals and between meal nourishments will be planned with patients as needed or as ordered by the physician or dietitian. They may also be provided per patient request.

PROCEDURE:

1. Standing orders for meals or between meal nourishments or supplements may be indicated for a patient:
   a. As part of the physician’s order
   b. To honor a patient request
   c. At the dietitian’s discretion

2. Patients on house diets/non-select menus

3. Will receive meals at the following times: 0800, 1200, 1700.

4. Patients who are identified to be insulin dependent will be allowed to take part in room service but will receive meals with prior notification to nursing.

5. Patients on diabetic diets will automatically receive an evening snack. Diabetic Evening snacks will brought to the floors by Food Service Associate and distributed at approximately 2000 by nursing staff.

6. Nourishments/Snacks/Supplements are also available at 1000 and 1400 and will be arranged for patients as appropriate by Physician, dietitian or nursing.

7. Standing orders or nourishments must include patient name, room, current diet order, frequency of meals, and desired menu order. (Legibility is also requested)
VAN WERT COUNTY HOSPITAL

Policy/Procedure: Interdepartmental  No: N 3-15

Issue Date: 4/05  By: Nutrition Services  No of Pages: 1


Distribution List: All Nursing Units

SUBJECT: TRAY DELIVERY - ALL UNITS

PURPOSE: To ensure that all trays are delivered into the patient rooms in a safe and timely manner.

POLICY: Patient tray delivery is the joint responsibility of the Food Service Department and Nursing.

PROCEDURE:

1. The Food Service Associate takes the room service tray, on a delivery cart, on the elevator to the appropriate patient unit.

2. The tray deliverer will hand the tray directly to patient if they are not in isolation, confirming patient identifiers (name and birth date).

3. Trays for patients in isolation will be left at the nursing station and a nurse will be notified. Nursing will deliver isolation trays.
SUBJECT: PATIENT TRAY RETRIEVAL

POLICY: Patient tray retrieval is the responsibility of the Nursing Department, and will occur within 60 minutes of delivery.

PURPOSE: To ensure that proper temperature control is maintained; and to ensure soiled patient trays are retrieved from patient rooms in a sanitary and timely manner

PROCEDURE:

1. Trays must be removed from patient rooms 60 minutes after delivery. (Proper temperatures cannot be guaranteed after that period) Removal time is gauged according to noted delivery time on order form and individual needs of the patient.

2. Nursing will record intake/output for each patient in conjunction with removing trays.

3. All trays retrieved from patient rooms by Nursing are placed on the soiled tray rack in the kitchenette and stored with the cover down.

4. Racks are used only for soiled trays. The Food Service Associate will remove them from the kitchenette. The Food Service Associate transfers soiled trays to the soiled tray cart, then transfers the cart to the dish room via the elevator.

5. Once emptied, the soiled tray cart will be sanitized.
SUBJECT: FLUID RESTRICTIONS

POLICY: Fluid Patients on fluid restricted diets will receive fluid allotment as specified by Nursing in conjunction with Nutrition Services. IV fluid should be subtracted from the day’s total before order is sent to Nutrition Services.

PURPOSE: To ensure that patients receive the proper amount of fluid as prescribed when placed on a fluid restriction.

PROCEDURE:

1. Nursing will be responsible for determining the amount of fluid allocated to Nutrition Services.

2. Nursing will notify Nutrition Services via the computer of patient/resident on a fluid restriction. Fluid restriction orders will continue to appear on subsequent diet reports until the restriction is cancelled.

3. The amount of fluid allowed per day will be divided between the patient’s meals.

4. Food Service Associates will note fluid restriction on all guest checks and snack slips to reflect fluid restriction. Fluid will be sent with snacks only if requested by nursing personnel.
SUBJECT: SPECIAL FOOD REQUESTS

POLICY: Special food requests for items not on the menu are honored whenever possible for patients with allergies or strong likes/dislikes and for those observing cultural or religious laws. Special food requests will be granted providing the item is not excluded from the patient's diet order. A special request is for patients that are not eating and/or the medical staff is trying to get the patient off artificial nutrition.

PURPOSE:

- To provide patients with individual food choices that do not appear on the menu or are not kept in stock that encourage increased caloric intake.
- To control special requests for patients with allergies, strong likes/dislikes and those observing cultural or religious dietary laws.

PROCEDURE:

1. Nursing will notify the Dietitian, Nutrition Services Manager, or Food Service Associate when a patient requests special food items. The Dietitian, Nutrition Services Manager, or Food Service Associate will decide if the request will be honored. Requests, if feasible, will be followed as long as they are within the guidelines of the diet ordered by the physician. The physician may need to be consulted if the special diet request requires more liberal interpretation.
2. The cafeteria menu and special write-in items are available to be offered to the patients having special requests. Patients who have been hospitalized for a long period of time may request items in these manners as a “monotony breaker.” Also these are available to be offered to patients who may have other special requests.
3. Every effort will be made to acquire special food items for patients with special dietary needs.
4. If possible, notice should be given at least 24 hours prior to meal.
5. Kosher Meals --Kosher frozen dinners can be made available and will be provided, if feasible within the diet order. Patients/residents are informed about the limitations of the kitchen with regard to food preparation. Kosher foods will be purchased and heated on site. Kosher meals will be served using disposable tray top items. Patients/residents will receive Kosher items in accordance with their diet order.
VAN WERT COUNTY HOSPITAL

Policy/Procedure: Interdepartmental

Issue Date: 4/05 By: Nutrition Services


Distribution List: All Nursing Units

SUBJECT: MENU CHANGES

PURPOSE: To assure that any periodic changes made to the patient menu are approved and communicated appropriately.

PROCEDURE:

1. The VWCH patient menus will be reviewed biannually for changes. These changes may be prompted by patient input, item popularity, seasonal availability of food items, or production needs.

2. Recommended changes will be agreed upon by the Director, the Chef, and Dietitian.

3. The Director & Chief Dietitian will approve menu changes.

4. Documents updated to reflect new changes include

   Menus
   Ordering Sheets
   Prep Sheets
VAN WERT COUNTY HOSPITAL

Policy/Procedure: Interdepartmental

Issue Date: 1/99

By: Nutrition Services


Revised: 11/07

Distribution List: All Nursing Units

SUBJECT: NUTRIENT INTAKE ANALYSIS (CALORIE COUNTS)

POLICY:

The clinical nutrition staff determines daily nutrient intake of a patient when ordered by the physician or initiated by a Dietitian. Calculations are based on intake recorded by nursing staff.

PURPOSE:

To provide necessary information about patient’s nutrient intake.

PROCEDURE:

1. The Dietitian is notified of the need for a Calorie Count via the computer.

2. The Nutrient Intake Analysis Form is placed in the patient’s nursing folder.

3. The nursing staff records the actual food/fluid delivered on the patient’s tray on the Nutrient Intake Analysis Form. Food consumed is described as accurately as possible, including method of preparation (i.e., fried chicken, baked fish, etc.). After the patient has finished eating, the amount of each item consumed is indicated as “none”, “1/4”, “1/2”, “3/4” or “all” by placing a check ( ) in the appropriate box next to food/fluid item. If the patient is allowed snacks of food from the outside, it is recorded and the amount consumed indicated. Fast food packaged snacks or other ready prepared items are recorded by brand name (i.e., 1 oz. Package Ruffles Potato Chips).

4. When a patient is NPO for a meal(s), this is indicated on the Nutrient Intake Analysis Form.

5. When a Nutrient Intake Analysis Form has been completed, the Dietitian collects the form and clarifies any questions with nursing staff.

6. The nutrient intake is calculated by the Dietitian for total calories and/or protein.
7. Total daily calories and/or protein consumed are recorded in the medical record by the clinical nutrition staff member daily until completion.

8. If a Calorie Count is incomplete (i.e., not all food/fluid was recorded on the Nutrient Intake Analysis Form) this is noted in the medical record. Nursing is notified & count is redone as necessary.

9. Calorie Counts will continue for 3 days unless otherwise specified by physician or dietitian.
SUBJECT: REQUEST FOR ISOLATION TRAY SERVICE

POLICY: Patients receive standard tray service-ware when in isolation.

PURPOSE:

- To prevent infectious illness from occurring.
- To practice standard precautions for all patients.

PROCEDURE:

1. Refer to hospital isolation policy. (Emergency Preparedness Manual under Infection Prevention)

2. Patients in isolation will receive Room Service. Food and Nutrition Services supervisors and personnel are trained in appropriate standard precaution procedures.
   - As part of new employee orientation.
   - As an annual in-service review.

3. The food service associate delivers the patient tray to the nursing station and the nurse will deliver the tray to the patient room.

3. If a food service supervisor is responsible for serving trays, he/she follows the hospital policy and procedure for entering patients’ rooms when in isolation.
VAN WERT COUNTY HOSPITAL

Policy/Procedure: Interdepartmental No: N 3-22

Issue Date: 4/05 By: Nutrition Services No of Pages: 1 of 4


Distribution List: All Nursing Units

SUBJECT: INFECTION CONTROL

POLICY:

The Food Service Department will prepare and serve wholesome food under sanitary conditions. Staff will deal properly with potentially infectious medical waste (P.I.M.W.).

PURPOSE: To ensure wholesome food, prepared and served under sanitary conditions, and to provide for protection of food service employees in the event of exposure to blood borne pathogens.

Responsibility

1. Supervisor initiates and implements policy / procedure changes and keeps VWCH Infection Control informed of the same; maintains temperature records (food, dish machine, refrigerators and freezers); maintains infection control training and education records for staff; reports known or suspected food borne illness.

2. Foodservice Managers/Supervisors and Staff reinforce and comply with policies and procedures.

3. Hospital Infection Control Nurse is consulted regarding infection control related changes procedures, products, or equipment and revision of infection control related issues; assists as needed in development and revision of infection control related policies and procedures; assists as needed in staff infection control training and education: investigates any outbreak of food borne illness.

4. Facility Services will provide for ongoing maintenance of foodservice area and equipment.

5. Environmental Services provides for pest prevention and control through contract with specified pest control service.
PROCEDURE:

A. SOILED TRAYS

1. Patient trays obviously soiled with waste (e.g. emesis, feces) should be pre-cleaned by nursing personnel, placed in a red bag, and returned to the kitchen for thorough cleaning and decontamination. If a grossly contaminated tray is received in the kitchen without having first been cleaned on the nursing unit, the unit will be requested to come pick up the tray and follow the above procedure.

2. Nursing will deliver trays to patients in isolation. Isolation trays will be left at the nurse's station and unit staff will be informed of their arrival. After the patient has eaten, the nursing staff will place the tray in the kitchenette on the soiled tray rack and store with the cover down.

3. Hands of the Food Service Staff delivering trays must be washed after leaving and before entering another patient's room or use an alcohol based rinseless hand sanitizer, regardless of isolation status, if any patient item is touched or handled.

4. Food Service Staff who discover inappropriate item on trays will set the tray aside and contact a manager immediately. Staff will make every effort to save menus and other items which help identify the origin of the waste.

5. Food Service Staff handling soiled dishes will wear gloves at all times.

6. Soiled items and surfaces will be sanitized by one of two methods: 1) Surface or immersing item in an approved sanitizer or 2) Rinsing or immersing item for at least 30 seconds in 180 degree or hotter water.

B. PERSONNEL

1. Employees will comply with all applicable of VWCH Infection Control Policy.

2. Employees must be free of active or communicable diseases, including open wounds, boils, respiratory infections, and diarrhea.
3. Chronic carriers of shigella and salmonella will not be employed in the Food Service Department.

4. Employees will comply with personal hygiene guidelines as outlined in the Uniforms and Personal Appearance policy.

5. Employees must attend annual inservices on infection control and food safety and sanitation.

C. Food Products and Storage

See Department/MMS policy.

D. Food Preparation and Service

See Department/MMS policy.

E. Equipment

All equipment will be cleaned, sanitized, and maintained in accordance with manufacturer recommendations and department policies.

F. Pest Control

Control and prevention of pest infestation will be maintained by the Safety and Sanitation Supervisor through a contract with the specified pest control service. All Food Service Staff will be responsible for reporting any pest sightings to the Director or Manager.

G. Waste control

1. Waste cans with plastic garbage bags will be used for all non-food waste except cardboard boxes and similar packaging materials.

2. Waste cans will either be covered or will be kept underneath counters (except those in office areas).

3. Garbage will be removed at regular intervals throughout the day. Trash carts will be cleaned and sanitized daily.
H. Food Storage on Nursing Units

1. Food will not be stored in refrigerators, cabinets, or other areas used to store medications (except formulas for enteral or supplemental feeding), specimens, or chemicals.

2. Formulas used for enteral or supplemental feeding will be labeled with the patient’s name and the date and must be discarded within 24 hours of opening.

3. Food Service staff will remove outdated items from unit refrigerators; they will remove items which are supplied by Food Services for patient consumption and which are labeled and dated. They will also dispose of any items that are not labeled and dated or are not for patient consumption. Nutrition Services is responsible for cleaning the unit refrigerators and nourishment center in general.

J. Controls on the System

1. The Supervisor will document all preventive and corrective maintenance.

2. Any actual or suspected incidence of food-borne illness will be reported immediately to Infection Control and to the Director. Environmental cultures may be taken as necessary.

3. Safety and Sanitation Surveys will be conducted monthly by the Director and/or the assigned manager on duty.

4. All policies and procedures relating to infection control will be submitted to the Infection Control Department for review.
SUBJECT: NOURISHMENT DISTRIBUTION (BETWEEN MEAL FEEDINGS)

PURPOSE:
To provide food/snacks to all inpatients while Food Service is closed and between meals.

PROCEDURE:

1. Food Service will stock each nourishment center according to predetermined levels. Nourishment stations include: 1) Medical / Telemetry 2) Surgical / Pediatrics 3) Ambulatory Surgical Area 4) Intensive Care Unit 5) Mother / Baby Unit 6) Emergency Room.

2. Included in the stocking procedure, the Food Service staff will be responsible for dating and removing all items which are supplied by Food Services. Food Service is responsible for cleaning the unit refrigerators and nourishment centers in general.

3. The Nursing staff will be responsible for patient tray retrieval from the rooms and placing them on the soiled tray rack for Food Service to pick up periodically throughout the day.

4. Food Service Associates will be responsible for cleaning: interior of refrigerator and temperatures, interior of cabinets.

5. Environmental Services will be responsible for cleaning: floors, walls, ceilings, garbage containers, sinks, counters, exterior of refrigerator, exterior of cabinets.

6. All departments involved with the nourishment centers will be responsible for reporting any maintenance problems to Nutrition Services/Facility Services.
SUBJECT: LATE ADMISSION MEALS

POLICY: Those patients admitted after the Food and Nutrition Service Department closes will be given small snacks from the floor pantry/kitchen or sandwiches from the main kitchen according to their physician diet order.

PURPOSE: To provide nourishment when regular meal service is not available.

PROCEDURE:

1. The Nursing Supervisor on duty is responsible for all late admissions after Food and Nutrition Services closes.

2. Unless otherwise notified, the Food and Nutrition Services will deliver meal trays to patient/residents during times specified in the room service policy and procedures.

3. Due to the difficulty of maintaining acceptable food quality before and after regular meal service times, there is a cut-off time established for the provision of hot foods for patient/residents who require late or early meal trays.

4. The nursing staff will provide the patient/resident with food items from the floor pantry/kitchen. If a more substantial meal is needed and not available in the floor pantry/kitchen, nursing will call the nursing supervisor to request additional item(s).

5. The Nursing Supervisor must unlock the kitchen to gain entrance to a designated main kitchen refrigerator which contains prepared sandwiches. These may be used for ER, OB or other units as needed.

6. Food items on early/late trays will be prepared to meet the therapeutic and consistency modifications required by the patient.

7. If a patient requires food after the kitchen has closed for the evening, nursing will obtain food from the pantry/nourishment room or contact the House Supervisor.
SUBJECT: CARE GIVER TRAYS

POLICY: Two care givers for per each patient age 14 & under will receive a tray.

PURPOSE: To allow care givers, parents, and family members a chance to eat without leaving the patient.

PROCEDURE:

1. The unit will send order to Food Service Associate through facility computer system.

2. Food Service Associate will make note in cardex that parent will receive a tray ordered via room service.
SUBJECT: PATIENT BIRTHDAY /SPECIAL OCCASION

PURPOSE: To provide a birthday or anniversary desserts to patients/residents who celebrate special occasions during their hospital stay per request.

PROCEDURE:

1. The food and nutrition department will be notified via computer system by nursing when a patient is celebrating a birthday, anniversary, or special occasion and a special birthday dessert is requested.

2. The food and nutrition department will serve a special dessert item.

3. Patients on modified diets will receive an individualized special dessert within the physician’s diet order and special medical needs of the patient.

4. There will be no additional charge to the patient for this service.
SUBJECT: OB COMPLIMENTARY GUEST MEAL CARD

POLICY: A Complimentary Guest Meal Card redeemable for 1 free meal from the Cafeteria or Room Service will be supplied to new mothers, to be given out at her discretion, intended for the father or support person in lieu of the discontinued “Congratulatory Meal.”

PROCEDURE:

1. The Complimentary Guest Meal Card for new mothers will be supplied (7) seven days per week.

2. Nutrition Services will be responsible for passing out the cards and collecting them once they have been used. Nutrition Services will pass the Complimentary Guest Meal Card after viewing on the computer that a new mother has delivered.

3. A Nutrition Services Aid will deliver the Complimentary Guest Meal Card to the patient and explain its use.

4. A Nutrition Services Aid will collect the Complimentary Guest Meal Card when a guest presents it as payment for a Room Service Meal or Cafeteria order.
SUBJECT: GUEST MEALS

PURPOSE:

- To permit relatives and guests to eat with patients in their rooms.
- To ensure that guest meal trays are provided as requested.

PROCEDURE:

1. Guest meals are provided for a flat rate of $4.00.

2. To request a guest meal tray, the patient, guest or staff will participate in the room service system just as the patient does. Patient or patient family member notifies Nursing Staff that they wish to receive a guest tray. Nursing staff must inform the patient/guest that there will be a self pay charge of $4.00.

8. The Nursing staff will then call Food and Nutrition Services by phone or enter into the VWCH computer system that a guest tray is needed. Nursing will enter patient’s room number and name under the comment section and enter “Guest Tray.”

9. The Food Service Associate will deliver a menu to the guest. The guest may select from the room service menu.

10. The guest tray is identified with patient’s name and room number.

11. The guest tray is prepared and delivered along with other trays by the Food Service Associate.

12. A free guest meal will be served to two care givers staying with a child 14 years or younger.

13. Patient’s guests may also purchase food in the hospital cafeteria for themselves and bring it to the patient room in order to dine with the patient.

14. Meals are available to social workers and police when guarding a patient at NO charge for these meals. This permits them to remain at their post and receive meals.
SUBJECT:  FLOOR STOCK DISTRIBUTION

POLICY:  The Food and Nutrition Services Department provides food supplies to patient floors and ancillary units.

PURPOSE:
• To make readily available items which patients may fail to select on their menus (i.e. sugar, cream, bread, etc.)
• To provide nourishment when regular meal service is not available.

PROCEDURE:

1. Nutrition Services will:
   • Check supplies and product dates, and complete a par level form for OB, Medical-Surgical, 2nd floor, ER, and Cardiac Rehab.
   • Prepare supplies according to floor stock requisition.
   • Supplies will be delivered via Nutrition Services by 8:00 a.m.
   • Costs will be added up and sent to Hospital Accounting to be charged to the appropriate department.
2. Par levels will be adjusted per patient needs as requested.
SUBJECT: FOOD BROUGHT IN BY PATIENTS FROM THE OUTSIDE

PURPOSE: To ensure that food brought in from the outside for patient is safe, and in the ideal circumstances, meets the nutrient needs of the patient.

PROCEDURE:

1. Food items brought in from outside of the facility for patient consumption may have a positive or a negative effect on the patient. From a positive perspective, it provides variety and a source of comfort (if the food is from “home”). From a negative perspective, it can interfere with appropriate medical nutrition therapy or be a source for food-borne illness. Visitors are neither encouraged nor discouraged from bringing food in from outside.

2. Visitors are to inform the nursing staff of any food or beverages brought into the facility for patient consumption.

3. Nursing staff will check the patient’s diet order and inform the visitors if the item is allowed on the patient’s diet.
   
   3.1. Attention will be given to both therapeutic and consistency modifications ordered for the patient.

4. Nursing will determine if the patient will be allowed to consume the food items brought in from the outside.

5. The item(s) is to be labeled with the patient’s name, room number, and date. Prepared food items are to be discarded within 24 hours if not consumed. Shelf stable food items will be stored for up to 7 days or until expiration date warrants disposal.