

**Purpose and Scope**

Access4u is committed to ensuring that all clients are provided with meals which are of high quality, nutritious and which include variety. Access4u will ensure that meals are provided which consider the client's nutritional needs, cultural considerations, dietary intolerances, allergies and medication contraindications. Access4u is committed to providing clients with meals which support nutrition, hydration and good health.

Responsibilities and delegations	
This policy applies to	Governing Body, CEO, Managers, Coordinators, Mentors
Specific responsibilities	<p>The governing body will ensure that adequate resources are made available within the budget to ensure the safe delivery of mealtime supports.</p> <p>The CEO will be responsible for the day-to-day implementation of mealtime supports and for ensuring that all staff are aware of these procedures.</p> <p>All staff have responsibility for understanding the policy and implementing the intent and procedures of the policy where applicable in their work.</p>
Policy approval	CEO

Policy context – this policy relates to:	
Standards	NDIS (Provider Registration and Practice Standards) Rules 2018 NDIS Quality Indicators) Guidelines 2018 NDIS Practice Standards 2022
Legislation	
Contractual obligations	NDIS Provider Registration
Organisation policies	High Intensity Daily Activities Policy Mealtime Management Policy
Forms, record keeping, other documents	Access4u information sheet - Oral eating and drinking and managing dysphagia

## Procedures

### Expectations and requirements

Access4u will ensure the needs and expectations of all clients are met. Access4u will ensure that clients know how to provide feedback on their meals and nutrition and are assured that their concerns will be listened and responded to. All clients' dietary requirements and requests are documented and communicated to all staff involved in the planning and preparation of meals. Access4u will ensure that in

developing client meal plans, clients receive adequate quantities of key nutrients, including protein, calcium and Vitamin D.

## **Cultural considerations**

Access4u understands the importance of clients being able to maintain their cultural and religious beliefs while in Access4u's facilities / when using Access4u's support service. A translator will be offered to clients whose preferred language is not English, when making Access4u aware of their cultural or religious considerations relating to their diet. Where possible, Access4u will include clients in the planning of menus so that their needs are met. Access4u will try to provide clients with special traditional meals for special occasions and will seek the family's input when asking about the client's dietary needs, requirements and requests.

## **Managing dysphagia and swallowing problems**

All clients will be assessed for potential swallowing problems when entering the care of Access4u, and any clients who present signs will be referred to a speech pathologist for diagnosis.

If a client is showing any signs or symptoms of swallowing difficulty, Access4u will support them to consult a GP and a speech pathologist promptly. If a client is identified as having difficulties with swallowing, this will be recorded in a mealtime management plan written by a health professional, and their meals will be adjusted as necessary. Access4u will work with speech pathologists and trained dietitians to obtain recommendations for texture modifications of the diet for clients with swallowing difficulties, and create a meal plan that ensures clients' nutrition and hydration needs are met.

Access4u will ensure that:

- Staff are trained to implement an individualised treatment plan or other mealtime recommendations for swallowing safety and mealtime management;
- Meals for participants with dysphagia and medication taken orally are prepared as directed;
- Staff are trained to monitor clients with swallowing difficulties during mealtimes, and implement feeding strategies, where necessary;
- Staff know how to respond if a participant starts to choke during mealtimes, including when they should call an ambulance; and
- Mealtime safety issues for people with dysphagia are considered in staff meetings and addressed in day-to-day procedures, clients' documentation, and plans for transition to hospital.

Supported Independent Living staff are aware of the types of foods which present a choking risk for clients who experience dysphagia. It is important that even when considering the risks associated with eating for clients experiencing dysphagia, clients should nevertheless be provided with some variety and choice when offering meals.

Access4u will ensure that mealtime management plans are reviewed regularly. The organisations will support participants to arrange a review of their mealtime management plans with a trained professional.

## Variety and choice

Access4u will endeavour to provide plenty of variety and choice to clients in their care. Access4u will provide a choice of a minimum of two main meals and one vegetarian option for each meal. Access4u will also provide a range of desserts, soups, salads and vegetables. The menu will be planned over a one to four week period, depending on customer needs/requirements, will be cycled and will be changed seasonally. Where possible, clients will be given the opportunity to be involved in the planning of meals.

## Food safety and appropriate food handling

All Supported Independent Living staff, mentors and volunteers responsible for food preparation and/or handling will receive adequate training and be aware of relevant food handling and preparation procedures, and comply with all applicable food safety standards. If staff are ill, they must wait until symptoms have ceased for 48 hours before handling food. Supported Independent Living staff and mentors will ensure that food storage, temperatures and conditions are monitored and documented.

## Temperature guidelines for serving food

- Hot food will be cooked and served at over 60 degrees Celsius
- Cold food will be stored and served below 5 degrees Celsius
- Frozen food will be stored at -18 degrees Celsius
- Food which enters the danger zone of 5-60 degrees Celsius will not be used or served

## Food presentation and mealtime enjoyment

Access4u will, to the best of our ability, make all meals presentable by using a variety of colours, shapes, textures, garnishes and dressings. Access4u will serve all meals on a white or cream coloured plate and ensure the serving plate contrasts with the tablecloth/mat it is served on.

Access4u will encourage communal eating and socialising. The communal eating area will have good lighting, comfortable seating, be conducive to socialising and serve using good quality crockery (not paper or plastic). Access4u will ensure that clients who require assistance during mealtimes receive adequate support from Supported Independent Living staff and mentors.

## Hydration

The hydration needs of clients will be regularly assessed, documented and reviewed. Clients will have a fluid goal, depending on their health needs. Clients will receive a minimum of 1600mL of water a day, unless their health care requirements specify otherwise.

Supported Independent Living staff and mentors will be equipped to identify signs of dehydration including;

- Dry mucous membranes in the mouth, dry tongue, cracked lips
- Dark urine
- Infrequent urination
- Reduced armpit sweat
- Alteration in consciousness

Supported Independent Living staff and mentors will:

- Encourage water consumption throughout the day, during mealtimes, with medication and after clients go to the toilet;
- Remind clients to drink water;
- Aid clients to drink where necessary;
- Offer clients their preferred fluids;
- Offer clients fluids at different textures or temperatures;
- Offer clients fluid in frequent small portions, rather than large portions infrequently;
- Ensure clients have access to appropriate beakers, straws, bottles etc; and
- Ensure that fluids are kept within a clients' reach and are easily accessible.

Nutrition for palliative care patients will focus on managing clients' symptoms and the enjoyment of food rather than active nutritional therapy. The use of enteral and parenteral nutrition will be avoided, unless the medical team suggests otherwise.