Feeding Residents and Patients

Objectives:
After you take this class, you will be able to:

1. Discuss the special needs of patients and residents in respect to nutrition and meals.
2. Feed and assist residents and patients with their meals, according to their needs and in a safe, dignified manner.

INTRODUCTION

Food needs change as a person gets older and older. Older people do not need as many calories as they did in the past. But they do need the same amount of vitamins, minerals and protein that they needed when they were younger. Sometimes they need even more. When they are sick or have a pressure ulcer they need more vitamins, minerals and protein to get better and to heal.

The older age group is at risk for a poor diet for many reasons. Although some older people may gain weight from eating too much, most older people are at risk for losing weight. They may lose weight without wanting to. This loss of weight can cause them to be weak and ill.

Some older adults also need large amounts of fiber to prevent constipation. Breads, cereals, fruits and vegetables have fiber.

A good diet must have all four food groups. The four food groups are:

- **Dairy.** Cheese, milk and ice cream are dairy foods.
- **Meat.** Chicken, steak, fish, beans, and pork are members of the meat group.
- **Fruits and vegetables.** Apples, pears, lettuce, tomatoes, orange juice and potatoes are some of the foods that people can eat to get their daily fruits and vegetables food group.
- **Grains.** Bread and cereal belong to the grains food group.

WHY SOME OLDER PEOPLE HAVE TO BE FED BY ANOTHER

Some older people can feed themselves without any help at all. They are able to cut their meat, use a fork, knife and spoon, open their milk container and place a straw in it. They can eat, chew and swallow safely.

Other old people need a small amount of help. They may only need help to open their milk or cut their meat. Some patients and residents can eat well with just a little help from the nursing assistant.
A large number of older adults only need encouragement and cues from another person. Nursing assistants and others may only have to ask, ‘Mrs. Smith, would you like to eat some of those potatoes that are on your plate?’ Simple questions like this help a person to eat their meals.

Still others, however, need a lot of help in order to get a good diet. Some people may not be able use their hands to lift fork or spoon. They may be too confused or weak to eat on their own. They may not be able to keep their food on a fork and they may also not have the ability to bring food from the plate to the mouth with a fork or spoon.

When an older person can’t eat or drink on their own, they must often leave their home and enter an assisted living or a nursing home so that they can be helped with eating. Eating is a basic activity of daily living (ADL). Nursing assistants most often provide this needed help.

People that are blind or have poor vision need help with eating too. They may need help to cut their food, open their drinks and some other special help. Nursing assistants should tell these residents and patients where the food is on the plate. The best way to do this is to describe where the food is by using the clock method. They should be told that the peas are at 9 o'clock, the potatoes are at 3 o'clock and the pork chop is on their plate at 6 o'clock.

Some patients and residents may also have a swallowing problem. They may cough when they eat or drink. They can choke on foods and fluids. These people can't drink liquids like water, juice, tea or coffee or food safely. These people also need help. Nursing assistants are often asked by nurses to give the patient water and fluids that are made as thick as honey. These thick fluids are good for patients who many choke on thin fluids, like water.

Some older adults can eat without any help or assistance. Others need a special plate, fork or cup in order to eat without any help or assistance. Others may need a little help from another person to cut their food, open their drinks and to remind them to eat. Others are completely dependent on others to feed them. They can't do any feeding of themselves. They need the most help of all.

FEEDING THE PATIENT OR RESIDENT

Patients and residents should be allowed and encouraged to be as independent as possible. Independence makes a person feel good. When a person can do the activities of daily living, like eating, it helps a person to feel like a person. It helps them to keep their dignity.

There are, however, times when older adults need some with eating. This help should meet the patients needs, not the needs of the nursing staff. Patients and residents must have enough time to feed themselves. They should not be fed to speed up the feeding time.
Residents have different needs during meals. Many nursing homes and assisted living houses have dining programs. These dining programs aim to meet the needs of all the residents. Residents with the same needs are grouped together for meals in these dining programs.

These assisted living and nursing homes may have a dining room for only those residents who are completely independent with eating and do not want to eat with others who may be messy, drooling or noisy. This group may like conversation, socialization and even peaceful music or complete silence during their meals. This group may get family style or buffet type food delivery.

The dining program may also have a restorative feeding program. A restorative dining program helps residents to increase their independence during meals while getting a complete diet. Restorative feeding programs use the skills of nursing, occupational therapy, speech therapy, a dietitian and others during dining. Residents in restorative feeding programs may:

- get cues, or reminders, to eat
- have a plate guard to hold the food on the plate. Plate guards are good for people who are only able to use one hand or they have hands that shake or are weak
- use placemats that stop plates and cups from moving across the table
- drink fluids with a cup or glass that has a weight on the bottom to prevent it from tipping and spilling, a special handle so the person can hold it, a built in straw or a spill proof lid so it will not spill
- eat well with special forks, knives and spoons with special handles they can help them to eat with little or no help
- have plates that have sections or high sides so that the person's food stays on the dish
- use protective clothing items to keep their clothes free of food and fluids in order to maintain their dignity

Nurses and/or nursing assistants should always be present in a restorative dining room so they can cue residents and help them increase their independence with meals. This is a very important part of nursing care.
Another group of residents is the group that can't eat or drink anything without being fed. They are totally dependent on others to eat and drink. These residents should also be in a group for meals. Dependent residents should not be left in their bed during meals unless the doctor orders it. They should be in a group with other residents so that the nursing assistant or nurse can slowly and safely feed them and the other residents.

This group should also be brought to their dining room. These residents or patients need a lot of time and attention. We must give them the help and time they need to get a healthy and complete diet.

The procedure for feeding residents and patients is below.

- Prepare the patient or resident for their meal. Wash or ask the person to wash their hands and face. Give them time for mouth care. Give them their dentures if they have them and they are not in the mouth. Make sure that their clothes are clean. Ask them if they would like to use the bathroom, commode, urinal or bed pan before they eat.

- Wash your hands before and after feeding each patient or resident. Some assisted living and nursing homes have sinks in the dining areas. Others may use a waterless hand washing product for frequent hand washing.

- Keep the dining room or patient room bright, cheerful, clean and with no bad odors.

- Place the patient or resident in a comfortable and safe position. Chairs in the dining room should be comfortable. People in wheelchairs should be placed at the table so they can reach their food and drinks. The head of the bed should be up at least 30 degrees if the patient is eating in their bed so that they can swallow food and fluids. This prevents choking. Over the bed tables must be clean and put in place so the person can see and reach their meal.

- Give the person their meal and check to make sure they are getting the correct meal. Know your patient or resident. Check their meal tray against their patient identification band to make sure that they are getting the correct meal. Know what foods and fluids they should be getting on their tray. Is the patient or resident getting everything they should on their food tray? Is the patient or resident getting the foods that they have chosen? Does the resident or patient have the utensils and napkins they need?

- Check the food temperatures. Cold foods should be cold and hot foods should be warm but not too hot to cause a burn.

- Place the meal so that the person can reach it, if they can safely do so

- Help the person with their meal, as much as needed

- Feed patients and residents that have to be fed. Feed patients slowly. Tell them what they are eating. Talk with them and give them time between bites so they can enjoy their food. If a person cannot use one side of their face or mouth, put the food and drinking straw on the side of the mouth that they can use. Tell them to swallow as needed. Alternate foods. Give residents and patients some meat, then some vegetable, then some milk, and then some bread or potatoes. Feed them as they want to eat. If they cannot tell you what they want, alternate bites of food like you would do if you were eating the meal. Use a different straw for each fluid. Do NOT force a person to eat something that they do not want to eat. Encourage patients and residents to eat but NEVER force anyone to eat if they do not want to.
Check, record and report how much of what the person has eaten. Write down the person's name and how much of meat, peas, potatoes and milk, or other fluid, they have eaten. If the person has not eaten well, you must report this immediately to the nurse in charge.

Return the person to their room and clean them up if needed. Clean crumbs and food off the bed if the person has eaten their meal in the bed.

Keep the resident or patient in a sitting position for at least 30 minutes after the meal so they do not choke.

Call for help and do the Heimlich maneuver if a person chokes on food or fluid and is not able to cough.

Summary

Feeding The Patient or Resident

Patients and residents need a good diet and fluids. Nursing assistants play a very important role in meeting the food and fluid needs of residents and patients.