POLICY:	Diet Orders - Diet Changes	
Program Area:	Across All Care Areas	
Section:	General	
Reference Number:	CLI.4110.PL.029	
Approved by:	Regional Lead - Acute Care & Chief Nursing Officer	
Date:	lssued Revised	2024/Aug/27 2024/Dec/17



PURPOSE:

To ensure the client receives the correct diet, diet information is accurate, up to date, and consistent in all care plans, thus providing safe, and nutritious food to the client.

To ensure all diet orders and diet changes are written and documented by the appropriate authority and communicated as changes occur throughout the client length of stay, minimizing risk of adverse events/complications and improving safety for the client.

BOARD POLICY REFERENCE:

Executive Limitation (EL-01) Global Executive Restraint & Risk Management Executive Limitation (EL-02) Treatment of Clients Executive Limitation (EL-07) Corporate Risk

POLICY:

All therapeutic diets, modified textures, oral nutrition supplements (ONS) and any other diet request or changes are prescribed and documented by the appropriate designated health care professionals on the appropriate form and communicated to the Nutrition and Food Services (NFS) department.

DEFINITIONS:

Client - any individual that is the recipient of health care services. Client is used interchangeably with resident (in personal care homes) and patient (in acute care or transitional care centers).

Prescriber - refers to a Health Care Professional who is permitted to prescribe medications and/or treatments as defined by provincial and federal legislation, their regulatory college or association, and practice setting.

Transcriber - refers to a Health Care Professional (i.e. Healthcare aide, resident assistant, unit clerk) who is permitted to **copy** the authorized prescriber's order onto the diet change form or other forms as required.

IMPORTANT POINTS TO CONSIDER:

Across ALL CARE AREAS

- When new admissions occur, use the appropriate form to communicate the new diet information to the NFS dept.
- > The diet change form is used to communicate client diet changes to NFS.
- > Verbal orders increase risk to the client; therefore, all diet orders-diet changes are written.
- ➢ For the purpose of this policy, prescribers include Nurse Practitioners (NP), Physicians, Physician Assistants(PA), Clinical Assistants (CA), Registered Dietitians (RD), Speech Language Pathologists (SLP),

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Licensed Practical Nurse (LPN), Registered Nurse (RN) and Registered Psychiatric Nurse (RPN). Prescribers are authorized to write diet orders/diet changes within their scope of practice.

- Ward/Unit Clerks/HealthCare Aides/Resident Assistants are authorized to transcribe the diet order onto the diet change form on behalf of the prescribers as ordered.
- The transcriber writes their initials and the initials of the authorized prescriber for each patient entry to identify who ordered the change, and double checks to ensure the diet change information is accurate and aligned with in the chart, progress notes and care plan.
- For diet texture upgrades, refer to SLP and/or Registered Dietitian (RD) for reassessment. Reference CLI.6410.PL.005 Safe Feeding and Swallowing in Personal Care Homes and Transitional Care.
- Therapeutic diets, diet textures, and thickened liquids are ordered according to the Regional Diet Compendium. This information is accessed on the <u>StaffNet</u> under Programs and Services; Nutrition and Food Services Program; Resources.
- Oral Nutrition Supplements and Tube Feeding Formula are ordered according to what is available through provincial contracts.
- Diet Change Forms are received by NFS before the cut off times designated by the NFS department. If submitted after cut off times, changes may not be in effect until the next meal. High risk circumstances are considered and accommodated as reasonably possible.
- Late requests are picked up from the kitchen by the unit staff. Wardstock is available to use if necessary as per ORG.1912.PL.012 Wardstock Food, Beverages and Supplies.

PROCEDURE:

Across ALL CARE AREAS

- A member of the health care team discusses the diet information with the client/alternate decision maker. This provides the client/alternate decision maker the opportunity to make informed choices about his/her nutritional well-being. Documentation is included in the health record to indicate the client/alternate decision maker are aware of the diet information and agree with the care plan.
- Upon admission, review and assessment, prescribers and health care professionals authorized to write orders determine the appropriate diet and texture for client, and submit the appropriate form for the setting to the NFS department to implement.
- ➤ The prescriber, health care professional and/or designate document the diet information and supporting evidence for the decision in the health record and care plan.
- Any changes made to the diet information throughout the length of stay, are submitted in writing using the appropriate form and authorized by the appropriate health care professional.
- When NFS receives the appropriate form, the NFS staff transcribe the diet information onto the NFS Nutrition Care plan in the kitchen and implement the changes requested.

Personal Care Homes

For new admissions, diet orders and diet changes, submit CLI.4110.PL.029.FORM.01 Diet Change Form - Personal Care Home to the NFS Department. Exception: client preferences may be verbally communicated to NFS at the point of service. For permanent changes, use the Diet Change Form -Personal Care Home to ensure it is in writing and is documented in the NFS Nutrition Care Plan.

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Acute Community Hospitals

For new admissions, diet orders and diet changes in acute community hospitals, submit the appropriate form(s), CLI.4110.PL.029.FORM.02 New Patient Admission Diet Information - Nutrition Care Plan - Acute Community Hospitals and/or CLI.4110.L.029.FORM.03 Diet Change Form – Acute Community Hospitals to the NFS Department.

Transitional Care Centres /Juxtaposed Sites

For new admissions, diet orders and diet changes, submit the appropriate form(s), CLI.4110.PL.029.FORM.02 New Patient Admission Diet Information - Nutrition Care Plan - Acute Community Hospitals, or CLI.41110.PL.029.FORM.03 Diet Change Form - Acute Community Hospitals, or CLI.4110.PL.029.FORM.01 Diet Change Form - Personal Care Home to the NFS Department.

Regional Centres

- For new admissions, submit CLI.4110.PL.029.FORM.07 New Patient Admission Diet Information Form - Nutrition Care Plan - Regional Centres to the NFS dept.
- For further diet orders-diet changes after admission, submit the appropriate form for the site; CLI.4110.PL.029.FORM.04 Diet Change Form - Boundary Trails Health Centre, CLI.4110.PL.029.FORM.05 Diet Change Form - Bethesda Regional Health Centre, CLI.4110.PL.029.FORM.06 Diet Change Form - Portage District General Hospital to the NFS Department at the site.
- > Reference the specific instructions that are outlined on the diet change form for each site.

SUPPORTING DOCUMENTS:

CLI.4110.PL.029.FORM.01Diet Change Form - Personal Care HomeCLI.4110.PL.029.FORM.02New Patient Admission Diet Information - Nutrition Care Plan – Acute Community
HospitalsCLI.4110.PL.029.FORM.03Diet Change Form - Acute Community HospitalsCLI.4110.PL.029.FORM.04Diet Change Form - Boundary Trails Health CentreCLI.4110.PL.029.FORM.05Diet Change Form - Bethesda Regional Health CentreCLI.4110.PL.029.FORM.06Diet Change Form - Portage District General HospitalCLI.4110.PL.029.FORM.07New Patient Admission Diet Information - Nutrition Care Plan - Regional Centres

REFERENCES:

<u>CLI.6410.PL.005</u> Safe Feeding and Swallowing in Personal Care Homes and Transitional Care

ORG.1912.PL.012 Wardstock-Food, Beverages and Supplies.

Diet Compendium

Diet Orders - Diet Changes

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