

Assisting Residents at Mealtime: A Summary

Before a Meal or Snack

A resident is ready to eat when:

- Awake and alert.
- Wearing dentures, eyeglasses, and hearing aids (as appropriate).
- Seated upright at as close to a 90 degree angle as possible, directly in front of the meal. His or her head should not be tilted back nor should the chair.

You are ready to feed a resident when:

- Seated at eye level with the resident.
- Distractions are reduced (as appropriate).
- Food items or fluids are the appropriate diet type and texture for the resident according to their care plan.



During the Meal or Snack:

- Use a teaspoon. Give ½ to one teaspoon size amounts of food or small sips of fluids at a time. Teaspoon should be held level, not angled or tilted.
- Tell the resident what you are putting in his/her mouth before each mouthful. Describe the food in an appealing way. Do not mix foods together unless the resident requests this.
- Feed slowly. Watch the “Adam’s Apple” rise up and down during swallow, to make sure the resident has fully swallowed before placing more food or fluids in the mouth.
- Place food in the middle of the mouth. If one side is weaker, present to the “stronger” side of the mouth.
- Alternate sips of liquid (or thickened liquid as required) with every few spoons of food.
- Reposition resident as necessary.
- Discontinue feeding and inform the nurse if signs of swallowing difficulty are noted.

Refer to “Common Questions and Concerns” section of handbook for more information.

After the Meal or Snack

- Check for any food remaining in the mouth.
- Gently wipe the resident’s mouth, then hands, with a napkin or moist washcloth.
- Ensure appropriate oral care is provided.
- Keep resident upright (at least 60 degrees) for a half-hour.
- Inform the nurse of any signs of swallowing difficulty.