

**SECTION - SUPPORTIVE SERVICES
ADMINISTRATIVE DIRECTIVE NO. 630
(Replaces A.D. No. 630 dated 5/11/06)**

Effective Date: April 17, 2007

SUBJECT: THERAPEUTIC DIETS AND NOURISHMENTS: ORDERING, SERVICE, AND MONITORING

I. PURPOSE

To assure Individuals receive the prescribed diet ordered for their needs in accordance with the physician's orders with input from clinical dietitians.

II. AUTHORITY

California Code of Regulations, Title 22, Section 71243.

III. POLICY

Coalinga State Hospital has a Nutrition Care Manual that contains a description of all therapeutic diets and is intended to standardize diet orders, nutrition care systems and menu planning. The term "therapeutic diet" encompasses both Regular and Modified Diets. Regular diets/nourishments are provided to individuals who do not require special dietary modifications to meet nutritional needs. Modified meals/nourishments are modified from the regular menu and are provided to Individuals with special nutritional needs.

IV. METHOD

- A. Therapeutic diets shall be prescribed or discontinued only by a privileged prescriber as defined and authorized by the Medical Staff. Orders for therapeutic diets shall be written in conformance to the Nutrition Care Manual.
1. Orders shall be accurately and timely communicated to Dietetic Services as specified in the Nutrition Care Manual.
 2. Orders shall be documented in the clinical record before food or nutrition products are administered.
 3. A therapeutic diet shall be ordered for each Individual upon admission. Each month thereafter, or upon unit transfer, the order shall be reviewed and either renewed, revised, or discontinued.
 4. The need for continuation of a modified diet order shall be reviewed upon discharge and when required, included on the Recommended Continuing Care Plan & Discharge Summary.

5. Under the direction of a registered dietitian, and in collaboration with level of care staff, modified diet/nourishments shall be safely and accurately distributed and administered to the Individuals for whom they were ordered.
6. The nursing and dietetic services staff, in collaboration with the interdisciplinary team, shall monitor the Individual's response to the diet prescription/nutrition care plan.
7. Enteral and peripheral parenteral nutrition products shall be supplied and delivered by the Pharmacy.

B. Ordering of Diets:

1. Diet orders shall be recorded on the Physician Order Form, signed and dated by the prescriber.
2. Diet orders shall include the date and time the order was written; the type of diet or nourishment, including the individuals that are not receiving oral intake (NPO orders); duration, and if applicable, the portion and/or frequency.
3. All modified diets/nourishments shall be keyed to a medical or psychiatric problem number and included in the Monthly Nursing Summary. Diet modifications that may be considered "health maintenance" shall be determined by the assigned dietitian and keyed to the appropriate problem number.
4. After writing the orders, the prescriber shall bring the order to the attention of nursing staff. Nursing staff shall fax the order to Dietetic Services.
5. The dietitian/designee shall verify the orders with the prescriber when questions or discrepancies arise. When a modification is required and it is not addressed in the Nutrition Care Manual, the dietitian shall consult with accredited sources and make recommendations to the prescriber.
6. Nursing staff shall advise Dietetic Services staff of the Individuals that will be receiving a modification of the Regular diet or supplemental food as soon as possible or sufficient time for timely service of the meal.
7. Temporary diet orders (including test meals) are written for no more than a thirty-day duration. Therapeutic diet orders that are discontinued by a temporary diet order shall be reviewed by the prescriber/designee and reordered or revised as needed.
8. Telephone/verbal diet orders may be accepted by a registered nurse, a licensed psychiatric technician or a registered dietitian, and shall be signed by the prescriber the next working day, but in no case later than 48 hours.

9. Intra-hospital transfers: The receiving physician shall review all therapeutic diets, and Dietetic Services shall be notified on appropriate form of any revised, discontinued, or renewed therapeutic diets as soon as possible and before the next meal service.

C. Service - Delivery of Diets to Individuals:

1. Meals for the units shall be served in the Individuals' dining rooms according to the established dining schedule.
2. Individuals who are unable to attend the dining room service are accommodated by providing a sack meal. Sack meals may be picked up by a nursing staff. A nursing staff may also request a sack meal from one of the food service employees to be picked up before or after meals.
3. Dietetic staff shall ensure that modified diets are served as ordered. Nursing staff shall ensure that each Individual receives the prescribed diet.
4. Nourishments shall be picked up at meal times by unit staff. Nourishments are labeled and dated and receipt-verified by the unit. Nourishments are to be stored by unit staff and distributed or at designated times.
5. Tube feeding formulas shall be obtained from the Pharmacy as indicated in the Hospital Formulary and stored/dispensed in accordance with Nursing Procedures.

D. Nutrition Care Monitoring:

1. The ongoing monitoring of each Individual's response to nutrition care is a collaborative process and involves communication among various disciplines and integration of nutrition care into the treatment planning conference.
2. Nursing staff is responsible for:
 - a. The Individuals' consumption of and therapeutic response to food, and nutrition products shall be monitored on an ongoing basis, and significant observations recorded in the clinical record.
 - b. On the appropriate form, record the percentages of the modified meals/nourishments consumed.
3. Dietitians are responsible for:
 - a. Assessing and developing a nutrition care plan for each Individual following the guidelines set forth in the state-wide Department of Mental Hospital's Nutrition Care Process.

- b. Consulting with members of the treatment team to initiate a more intensive nutrition therapy plan for Individuals identified at higher nutritional risk.
 - c. Reviewing an Individual's nutritional status/progress is based upon nutritional risk guidelines set forth in the statewide Mental Hospital's Nutritional Status Typing (NST).
 - d. Counseling Individuals in significant drug-nutrient interactions.
 - e. Providing input for the treatment team regarding the Individual's nutritional status, progress, potential adverse events, and level of functioning in nutrition-related skills via the periodic assessment/ review and as requested. The dietitian shall attend the Treatment Planning Conference based on established guidelines.
 - f. Communicating observations and concerns regarding the Individual's food consumption to nursing staff, other employees of Dietetics department who are directly involved in the care of the Individuals.
 - g. Maintaining a record of Individuals with modified diet orders.
4. The Treatment Team is responsible for:
- a. Assessing the results of the collaborative effort of nutrition care monitoring during the Treatment Planning Conference.
 - b. Making revisions to the nutrition therapy plan, i.e., Nursing Care Plan, when indicated, and documenting the conclusions in the clinical record.



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