

Residential Care Services (RCS)
Operational Principles and Procedures for
Adult Family Homes (AFHs)
LICENSING INSPECTIONS

FOOD SERVICE

I. Purpose

To provide the Licensor with an overview of the AFH's food service operation including food preparation, meal planning and scheduling, provision for individual dietary needs, including cultural and ethnic preference, quality of life and food safety.

II. Authority

[RCW 70.128.090](#)

[RCW 70.128.130 \(1\)\(2\)\(5\)](#)

III. Operational Principles

- A. Observations and data collection regarding food services are resident oriented, focusing on the following:
1. Nutritional needs of the resident
 2. Meal service meets each resident's needs and preferences
 3. Food preparation and environment
 4. Infection control

IV. Procedures

The Licensor will:

- A. Identify the best time for the meal observation through interview with the provider and staff.
- B. Observe food preparation area for:
1. Adequate and safe storage
 2. Cleanliness of food preparation area
 3. Observe proper food handling skills, including hand washing.
- C. Observe staff technique, staff to resident interaction and resident response during the meal if a resident requires assistance.
- D. Observe if each resident receives the necessary and reasonable accommodations for the meal.
- E. Observe if the meal addresses preference and/or needs of the residents.
- F. Document observation of a meal, food preparation and tour of kitchen/food preparation area. **FORM D (Environmental Tour)**
- G. Observe general food service ongoing, noting availability of nutritious snacks, liquids and alternate meal times as needed or required by residents.

INFORMATION AND ASSISTANCE

- A. Through observations, interviews and/or record review:

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1. Identify residents who may have conditions that require assistance or intervention to meet their dining needs such as weight loss, difficulty with swallowing, severe visual loss, loss of motor skills, or hand tremors.
- B. General observations:
1. Conduct meal observation at eye level with residents – not standing over. Observe the meal for:
 - a. General appearance of the meal
 - b. Nutritious content
 - c. Liquids provided per resident choice
 - d. Timeliness of service according to meal times noted
 - e. Did residents voice any concerns regarding temperature of food, taste, variety, quality or quantity.
- C. Specific observations; note the following for each resident:
1. Dentures in place, appropriately fit and well maintained; teeth are clean; no obvious oral care issues or pain
 2. Eye glasses on
 3. Assistance with positioning at the table
 4. Use of any adaptive devices
 5. Staff assistance as needed – cutting foods, observation for choking etc
 6. Isolation or socialization of resident(s) during meals
 7. Preferences considered:
 - a. Cultural, religious, and/or ethnic background considered
 - b. Physical conditions that impact food intake
 - c. Medical conditions that impact food intake
 - d. Resident inclusion in meal planning
- D. Specific observations for the area:
1. Physician prescribed supplements and/or special diets available
 2. Minimum of three meals per day at regular times
 3. Meal times support resident activities and choice
 4. Nutritious snacks available
 5. Availability of fresh fruit and vegetables – appropriate to season
 6. Availability and offering of liquids for hydration
 7. Proper food storage
 8. Proper food handling practices
 9. Sanitary conditions
 10. Equipment is maintained in good condition
- E. When to interview staff regarding food preparation:

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1. If residents assist with meal preparation note residents skill level and demonstration of proper hygiene and food handling practices as well as any potential safety concerns
2. If problems are noted with resident or staff concerning meal preparation and/or food handling.



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Date