

Consumer Choice and Dignity

In the context of food provided in aged care

Position

Choice, including food choice, is fundamental to the Aged Care Quality Standards.¹ Food provided must be nutritious, familiar, culturally appropriate, well presented and part of a positive mealtime experience.

Choice must be provided:

- During the development and on-going review of the menu
- By receiving and acting on feedback regarding the menu
- By catering for individual choice and preferences, even when risk is identified

Accredited Practising Dietitians (APDs) are the experts at designing and identifying food solutions to meet consumer preferences and provide positive health outcomes. APDs must be engaged by providers to determine cost effective menu ideas for both the organisation and individual consumer.

Recommendations

Individual preferences

1. All providers to implement a process/system (using a uniform tool/template developed for aged care providers) that clearly and accurately documents and communicates food preferences, dislikes, texture requirements, food allergies/intolerances, eating aides etc with foodservice staff and care staff. Reviews must be conducted regularly (eg. quarterly) to accommodate food preferences that may change over time.

Risk management

2. All providers to engage an APD to identify food solutions that meet each consumer's food preferences and minimise the risk of catastrophic consequences for both the consumer and the organisation.
3. All providers are required to have a risk management policy and process in place that includes an APD, allowing consumers to make the best food choices despite the health risks.

Feedback and communication

4. All providers to ensure consumers and their families are provided an opportunity to attend a gathering to discuss the menu. Where consumers have difficulty communicating, alternative forms of communication must be implemented (eg. consumers who require a modified texture diet are often unable to speak but they are the consumers who are at highest nutritional risk).

5. All providers to ensure both informal and formal feedback is obtained/collected to continually improve the menu and food service. To empower consumers and their families submitting feedback, they must receive a response including any remedial action taken.

Background

Consumers in residential aged care homes are more likely to enjoy their meal, consume their meal and maintain their health if the food is familiar and of their choosing.² Food and menu systems in aged care homes usually require a consumer to make meal choices on the day before, week before or even the month before. Yet in practice, due to limited resources, food choices are often made by the staff for the consumer. Those consumers requiring modified texture diets are usually given little or no choice.

All residents must be provided real food choices and all options documented on the menu. The menu will need to be communicated in a variety of ways to consumers depending on their cognition, cultural or medical condition. Consumers with special dietary needs, including allergies and intolerances also need to be provided with choice. An APD is essential when designing these individual menu plans for the organisation.

References

1. Aged Care Quality Standards, Aged Care Quality and Safety Commission
<https://www.agedcarequality.gov.au/providers/standards>
2. Abbey K, Wright O, Capra S. 2015. DOI:10.3390/nu7095354