

Appendix B

Provider Practices Summary

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FACILITY and PRACTICE	CONTACT PERSON	APPROX. COSTS	PRACTICE DETAILS	IMPORTANT OUTCOMES	IMPORTANT LESSON
Del Amo Gardens Snack Cart	Harumi Takeda Administrator	\$40-50/week increase for snacks Initial purchase of napkins and cups \$240 but will last for several months	<ul style="list-style-type: none"> - Use existing hydration cart 2x/wk - Display food choices - Announcement via intercom re: time for snack - Distribution staff allowed access to snacks 	<ul style="list-style-type: none"> - Used in marketing plan w/ positive results - Residents eat better/reduce weight loss 	<ul style="list-style-type: none"> - Find inexpensive stores to supply snacks - Ask residents what their preferences are - Perform in-service program for staff - Don't wait for buy-in ... just do it!
Downey Care Center Resident Snack Center	Joline Huren Administrator	\$20- 30/month increase for snacks	<ul style="list-style-type: none"> - Placed refrigerator in resident activity area to allow free access - Educated residents re: special diets 	Provided resident with more free choice/ independence/control over when they wanted to eat	<ul style="list-style-type: none"> - New practices don't have to be a big deal - In retrospect, if pilot was more complex, it would have challenged staff - Innovations must come from the top
Gardena Convalescent Snack Cart	Brent Wauke Administrator	\$ 300 for cart \$90 - 200/mo for snacks	<ul style="list-style-type: none"> - Offer a variety of snacks - Ringer bell announces cart - Different from regular snacks offered 	Both residents & staff enjoyed it Builds relationships between staff & residents	<ul style="list-style-type: none"> - Keep timing consistent - Keep same snacks that residents like - Have more staff involved in initial planning – buy-in - Go all out right away
Hi-Desert Continuing Care Center Breakfast & Lunch Buffets	Jason Duckworth Dietary Services Supervisor	Cold Cart \$1300 \$125/month for rental of table linens	<ul style="list-style-type: none"> - Friday breakfast – Tuesday lunch - Menus passed out in advance; returned to nurses station or kitchen - Same menu for in-room diners - All portions dished by buffet serving staff - Table linens used - Portable steam & cold tables 	<ul style="list-style-type: none"> - Increased attendance in dining room; - Increased customer satisfaction ... happier, look forward to meals - Weight gain for some residents & more 	<ul style="list-style-type: none"> - Purchase rather than rent table linens - Identify favorite food items - Stagger times of service - Use Nutritionist 5 software to analyze food items - Get MD order in advance for therapeutic diets - Cost out equipment - Be realistic about greater food costs - More on-line staff involvement

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Monterey Pines Breakfast Buffet	David Van Reusen Administrator	Cold Cart \$ 700 Slight increased food costs	<ul style="list-style-type: none"> - Buffet style at breakfast - Extended meal hours allowing residents to sleep in - Residents encouraged to walk thru line & make selections - Menu at table for those who can't walk - Started with 2 days/ wk and expanded to 7 	<ul style="list-style-type: none"> - Steady numbers of residents coming to the dining room - Improved staff morale - Residents excited about eating 	<ul style="list-style-type: none"> - Keep list of social dining program participants and adjust for drop-ins - Get staff buy-in from the beginning - Anticipate physical accommodations in dining room - Liberalized diets became an issue – need to educate residents re: choices - Get full support from corporate for changes & costs
Parkside Special Care Restaurant Style Dining	Ed Long Administrator	Equipment costs including table settings, CD for dining room music, gardening supplies, and washer for table linens: ~ \$2000 Food costs increase not significant	<ul style="list-style-type: none"> - Created new dining room for more high functioning residents - Began w/ lunch, expanded to 3 meals/day, 7 days/week - Menu selection not appropriate for most residents (Alz) – food served in courses to lessen agitation - Ceramic boats filled w/ pureed food w/ piping bags - Music, flowers, linens, flameless candles 	<ul style="list-style-type: none"> - Reduction in resident agitation - Better quality of life for residents (calmer, better appetites) and improved staff morale - Noise reduced in dining room - Increased water consumption - Improved appetites, weights seemed to stabilize - Very positive feedback from families, et al 	<ul style="list-style-type: none"> - Quality of life was improved for all residents - Can expand to main dining room with same benefits - Met goal earlier than planned; residents were less agitated, full buy-in from all departments - Involvement of administrator, nursing and DR managers

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St. Mary's Medical Center Restaurant Style Dining	Leanne Young Recreation Therapist	None reported	<ul style="list-style-type: none"> - Changed from original family style dining and snack because there was too much food waste, maintaining temperature was a problem; limited choices that were to be transported on a steam table - Activity (dining) room enhanced w/ music - Residents served their meals by volunteers who bring trays with pre-served food, transfer food to table, remove trays 	Increased socialization; increase in social skills	<ul style="list-style-type: none"> - Learned residents' reasons for not attending dining room: self-conscious about disability, incontinence ... asked volunteers to eat w/ them in room - In-service CNAs re: patient orders, etc - Should have been a designated CAN for the program - Develop strategy to encourage residents from their rooms; staff to offer personal invitations to residents - Meet new residents early and invite them to participate
Scripps Kensington Snack Cart/Between meal coffee	Barbara Calderone Director Staff Development	None reported	<ul style="list-style-type: none"> - Snacks passed out twice daily by CNAs & activity staff - Hot coffee available in kitchen at all times 	<p><u>Residents:</u> nice to be listened to; variety, more like home</p> <p><u>Staff:</u> a burden at first, but later they enjoyed it and the positive interaction with residents</p>	<ul style="list-style-type: none"> - Problem solve how to prevent residents w/ dietary restrictions from accessing the cart rather than eliminate the process - Problem solve how to prevent residents from burning themselves when pouring hot liquids - Poll residents re: snack choices - Simpler is better - Keep at it – don't give up - Involve resident council in planning process

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Tulare Nursing & Rehab Snack Cart	Dave Britter Assist. Administrator	\$ 1500 for cart	<ul style="list-style-type: none"> - Determine sample list of alert & oriented residents - Gather, count & respond to choices made by residents w/ appropriate cart options - Compare pricing of packaged vs non-packaged goods 	Residents love it	<ul style="list-style-type: none"> - Anticipate staffing challenges - In-service staff re: cart “movement”, importance of getting residents out of their rooms to socialize - Conduct period surveys re: types of foods residents would like on cart - Use of Lazy Susan on each table didn’t work; staff is re-evaluating usage - Get liberalized diet orders
Victoria Special Care Snack Cart/Breakfast Cart/Popcorn Cart	Ryan Krebs Dietary Manager	No significant costs	<ul style="list-style-type: none"> - Mobile cart built by Maintenance - Snacks circulated early PM 3x/wk to residents, staff, families - Introduced 2 other cart services: hot breakfast at 8:30 7x/wk and popcorn cart used on days snacks not served. 	<ul style="list-style-type: none"> - Improved quality of life and choices for residents (could stay in bed if desired) - Family appreciation of new environment – resident being catered to more, snacking w/ family very pleasant - Staff more productive from having snacks too - Weights have stabilized by offering food throughout the day when hungry 	<ul style="list-style-type: none"> - Be persistent – continue implementing in spite of barriers such as staff resistance - Don’t let go of the intent to make change - Better interdepartmental communication to get early buy-in from all

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White Blossom Care Center Buffet dining Breakfast Club	Virend Prasad Dietary Supervisor	Mobile steam table - \$1000 Beverage Cart - \$300 Table ware and settings \$1350 Uniforms for wait staff \$400 1 FTE Cook	<ul style="list-style-type: none"> - Changed initial WB Bistro idea to breakfast club - New program was breakfast club every other Wednesday cooked in front of residents; residents order at their table; china, table centerpieces - Idea came from resident dining committee 	<ul style="list-style-type: none"> - Residents came out of their rooms - Weight stability - More involvement by residents in other types of activities - Better marketing 	<ul style="list-style-type: none"> - Teamwork important – other staff essential for setting up and cooking - Support from administrator & DON - Consider putting liberalized diet order on patient’s chart and on menu ticket (done by computer) - Consider staff having change of uniform for breakfast club - Buy full size table cloth, cut it and hem it.