

ACTIVITY-BASED DINING

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The development of "Activity-based Dining," an interdisciplinary program, has increased resident weight gain, promoted resident socialization, and enhanced attention to environment at mealtime at Normandy Manor of Rocky River in Rocky River, OH, a skilled nursing facility.

As a result of the involvement of the Nursing, Activity, and Rehabilitation Departments, this successful program has received a great deal of attention from staff, physicians, and families.

Activity-based Dining evolved from staff's concerns regarding the atmosphere of the main dining room and concern for weight trends in the population of residents with dementia. The weight committee of the Quality Assurance team was focused on maintaining stable weights in their early-to-moderately declining dementia patients who were still eating independently or with minimal assistance. The staff knew that these residents needed additional encouragement and some instruction but did not want to sacrifice these residents' ability to eat independently or their dignity by having staff feed them. In addition, it was observed that these same residents were easily distracted from eating due to stimulation in the main dining room.

Activity-based Dining began with the idea that additional stimulating activities could be offered while providing one-to-one attention and assistance to dementia residents and to implement these during mealtime. The goals developed for these residents included an increase in attention, orientation to environment, and percent of food intake, improvement in socialization skills, prevention of weight loss, and decrease in inappropriate behaviors at mealtime. Activity-based Dining focused on the residents' needs and the understanding that the length of program participation was dependent on the residents' progress. The interdisciplinary professionals would periodically evaluate whether to integrate the resident back into the main dining setting or continue the individual in the program.

Seven residents initially qualified for this stimulating program. They met one or more of the following criteria: poor attention at meal time, poor intake at meals, weight loss, tendency to get up and wander away from meals, and inappropriate behaviors that distracted them and others from eating. The Assistant Director of Nursing, Therapy Director, and Activity Director then determined the need for a variety of environmental details. A bright and sunny activity room was chosen as the location. Seating surrounded one common table to initiate a sense of community and family dining. The meal was timed after the busy dining hour in order to allow for one-to-one attention and relaxation. The doors were closed to the outside corridors to reduce the noise level and provide a comfortable atmosphere.

PRE-MEAL

While the residents waited for their meals, fine-motor table activities were provided to occupy their time. For example, a vibrant place mat that included a place for the cup, plate, and utensils was given to each resident to help him focus on his own place setting and not on the individuals around him. This focus provided an opportunity for socialization and verbal interaction before the meal.

Topics of discussion during pre-meal activities included the seasons, wall decorations, and upcoming holidays. Usually the most interesting conversations began when a staff member asked a question or brought in a photograph for show and tell. For example, a member of our staff brought in a photograph from her senior prom. This photo sparked a resident's memory as she broke out in song, singing her alma mater from high school. (It is interesting and stimulating to think how something so minor in our lives could spark such an important memory in theirs!) Movies were shown, and a variety of calming music was played. The entertainment allowed opportunities for the residents to focus which reduced the agitation of some residents.

Fluid intake was an important focus from a nursing standpoint, so water or juice was distributed before the meal and presented as an activity. The residents were provided with a wide variety of juices to promote hydration. Staff demonstrated hand therapy by massaging the residents' hands with scented lotions to trigger the olfactory sensations and used antibacterial washing to promote infection control. The pre-meal giving of thanks increased the tendency for residents not inclined to be verbal or to sing.

MEALTIME

At mealtime, the staff found seats next to the residents in the program. The meal was served in courses: appetizer, main dish, side dishes, and dessert. This increased the residents' attention span and intake. The kitchen provided Activity-based Dining staff with meals, also. This modeling encouraged the resident to eat his meal, thus enhancing the atmosphere of the family table. Our in-house Music Therapist played music from different eras during mealtime.

ADDITIONAL INFORMATION

Allow a minimum of two weeks from the beginning of the program until positive changes are recognized in those residents who wander, call out, or display inappropriate mealtime behaviors. Activity-based Dining does not cause any additional cost in staffing due to the efficient utilization of Environmental, Restorative, and Activity Aides who are not assigned elsewhere in the building during that hour. The program has been so successful that the facility recently expanded the program from lunch five days a week to lunch and dinner every day.

In order for this program to grow, the program's coordinator needs to look to the facility's interdisciplinary team of professionals when recruiting new participants. Referrals to the program can come from care plan conferences, practicing nurses on the floor, dining room nursing staff, family members, and the consulting dietician. Monthly summaries for each resident are completed from that point on. They document behavioral changes, intake trends, weight gain/loss and changes/alterations in diet, or environmental interventions. In addition, the interdisciplinary staff is continuously improving the dining environment and the timing of service, which accommodates participating staff members and assists those residents in need of extra attention.

In conclusion, the caring attitudes and time spent with the residents in the Activity-based Dining program have gone a long way to help residents be able to increase intake, achieve a sharper focus to the environment at mealtime, maintain an appropriate nutritional level, and promote positive physical well-being.

At the time this article was written (September, 2000), Susan was completing her Administrator's in Training practicum at Normandy Manor of Rocky River. She graduated from Kent State University in August of 2000 with a Bachelor of Arts degree in Gerontology and Long Term Care Administration. Susan is currently Director of Admissions and Marketing at Pine Valley Care Center in Richfield, OH. CF