3701-17-18  Food and nutrition.

(A) Each nursing home shall have a kitchen and other food service facilities which are adequate for preparing and serving appetizing food for all residents. The nursing home shall develop and implement a policy addressing its method for accommodating religious, ethnic and cultural and personal preferences.

(B) Each nursing home shall provide at least three nourishing, palatable, and appetizing meals daily to all residents at regular hours. The meals shall provide the dietary referenced intake of the "Food and Nutrition Board" of the "National Academy of Science." For scheduled meal services, there shall be at least a four-hour interval of time between the mid-point of the breakfast and the mid-point of the noon meal and between the mid-point of the noon and mid-point of the evening meal. There shall be no more than sixteen hours between the evening meal and breakfast. Each nursing home shall offer a nourishing snack, consisting of a choice of beverages and a food item from a basic food group, after the evening meal. Food substitutes of similar nutritive value shall be offered to residents who refuse the food served and serving size may be adjusted according to resident preference. The nursing home shall accommodate a resident's preference or medical need to eat at different intervals.

(C) A nursing home may provide any alternate format of meal service that otherwise meets the requirements of this rule, if the residents agree to participate in the meal service and the home:

(1) Uses precautions to prevent contamination of food being served; and

(2) Assists residents when necessary.

(D) Each nursing home shall maintain at all times sufficient food supplies for residents. The home shall maintain at least two days' supply of perishable food items and at least one week's supply of staple food items. The amount of such supplies shall be based on the number of meals that the nursing home provides and the nursing home's census.

(E) Each nursing home shall have planned menus, which are approved by the dietitian required by paragraph (K) of this rule, for all meals, including complex therapeutic diets, at least one week in advance. Menus shall be varied and be based on a standard meal planning guide published, or approved by a licensed or registered dietitian in accordance with acceptable standards or practice, or both. The nursing home shall maintain records for all meals, including complex therapeutic diets, as served. The meal records shall be kept on file in the nursing home for at least one year after being served and made available to the director upon request. The records shall indicate the date that each meal was served along with any food substitutions from the menu.

(F) Food shall be prepared and served in a form that meets the resident's needs based on the assessment conducted pursuant to rule 3701-17-10 of the Administrative Code.

(G) Safe, fresh, and palatable drinking water shall be accessible for residents at all times.
(H) Complex therapeutic diets shall be:

1. Ordered by a physician or other licensed health professional acting within the applicable scope of practice;

2. Prepared and provided in accordance with the instructions of a dietitian pursuant to the verified diet order; and

3. Adjusted as ordered by a physician, dietitian or other licensed health professional acting within the applicable scope of practice.

(I) The nursing home shall monitor each resident's nutritional intake and make adjustments in accordance with the resident's needs. Notification of any significant unplanned or undesired weight change shall be made to the resident's attending physician and the dietitian required by paragraph (K) of this rule. "Significant unplanned or undesired weight change" means a five per cent weight gain or loss over a one month period, a seven and one-half per cent or more weight gain or loss over a three month period, or a ten per cent or more weight gain or loss over a six month period.

(J) The nursing home shall store, prepare, distribute and serve food under sanitary conditions and in a manner that protects it against contamination and spoilage in accordance with food service requirements of Chapter 3717-1 of the Administrative Code.

(K) Each nursing home shall employ a dietitian, who may be hired on a full-time, part-time or consultant basis, to plan, manage and implement dietary services that meet the residents' nutritional needs and comply with the requirements of this rule. If the home does not have the full-time equivalent of a dietitian, the nursing home shall designate a person who meets the qualifications specified in paragraph (H) of rule 3701-17-07 of the Administrative Code, to serve as the food service manager. The part-time or consultant dietitian, at a minimum, shall consult monthly with the food service manager. Each nursing home shall ensure that the dietitian performs the following functions:

1. Assesses, plans, manages and implements nutritional services that meet the needs of the residents;

2. Oversees the development and implementation of policies and procedures which assure that all meals are prepared and served as ordered and that food service personnel maintain sanitary conditions in procurement, storage, preparation, distribution and serving of food;

3. Monitors at least quarterly, or more often as determined by the dietitian, food preparation staff, staff responsible for carrying out the duties specified in this rule, and residents on complex therapeutic diets;

4. Evaluate residents' response to new complex therapeutic diets, and the home's compliance in the provision of such diet, within one month after the nursing home commences providing the diet. For the purposes of this provision, "new" means either a food regimen that the nursing home has never before supervised or a food regimen that has been prescribed for a resident for the first time; and

5. Oversees, or arranges for, the training of staff in performing the duties specified in this rule and in the preparation of special diets. Trained unlicensed staff,
including the dietary manager, may perform routine tasks that:

(a) May be assigned pursuant to Chapter 4759. of the Revised Code and this rule; and

(b) Do not require professional judgment or knowledge.

(L) Tube feedings and parenteral nutrition shall be administered by the appropriate licensed health professionals in accordance with acceptable standards of practice. Tube feedings shall not be used for convenience or when in conflict with treatment decisions, or a resident’s advance directive, in accordance with applicable provisions of Chapters 1337. and 2133. of the Revised Code.

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