

ICD - HCF

Iowa Consulting Dietitians in Health Care Facilities

Summer 2006



ICD-HCF Mission Statement: This association is the advocate of the dietetic profession serving the public through the promotion of optimal nutrition, health and well-being.

Message from the Chair. Char Kooima

“YOU CAN NOT CHANGE THE WIND, BUT YOU CAN ADJUST YOUR SAILS”

This holds true for so many issues that are placed before us. We look at our personal and our professional lives; we adjust our sails daily - sometimes hourly. The ability for one to adjust their sails depends upon how open they are to looking beyond themselves. It depends upon their maturity levels, coping abilities, foresight, and thought processes. Part of this message is also about taking care of you. We learned from Laurie Kimball at our spring meeting that we need to do simple tasks to take care of ourselves. Does anyone remember what those were? Say it to yourself right now.

When teaching my cardiac rehab patients, I am often asked if I eat the foods that I am recommending. Without a flinch, I can say yes and also tell them that my husband does too. I discuss with them that we eat the foods for a reason. My husband's dad died at age 54, his uncle at 56 and an aunt at 58 – all from heart attacks. I share with them that I am worried for hereditary heart disease in his family. I also share my lipid profile if asked. We share fears about heart disease and also recognize that they are humans and are not expected to change overnight. We talk about not being able to change the wind, but simply adjusting

their sails to handle the disease in a more manageable and successful way.

I am a volunteer Emergency Medical Technician in our town. This in itself brings on a whole new perspective on life, stress, and death. When thinking about changing our sails, I couldn't help but to think of two of our squad members. They have a hard time changing their sails. They fight the wind, they try and control the wind, and they always lose. I am constantly telling them to let it roll off their backs. They agree, but still try to buck the wind.

Over time and through life's experiences, you learn to change your sails quicker and without such a fight. You learn how to handle the stressors and also are more in tune with your body. You know how your body reacts to stress. Some of us become chocoholics while others have acne outbreaks.

There are several self help books and recommendations out there regarding stress management. The following is just a review of suggestions to manage stress better:

- **Simplify your life.** Ask yourself what really needs to be done, what can wait and what can be dropped entirely.
- **Manage your time wisely.** Update your to-do list every day —

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both at work and at home.

- **Be prepared.** Organize your day ahead of time
- **Let go.** Don't worry about things you can't control.
- **It is OK to say NO!**
- **Adjust your attitude.** Think "This will be tough. But I **CAN** make it work."
- **Relax.** Set aside time for yourself every day, even if it's only a few minutes.
- **Take a break.** If you feel overwhelmed, take some time to clear your mind.
- **Exercise regularly.** Exercise also provides a break from the stress of daily life.
- **Eat smart.** A diet rich in fruits, vegetables and whole grains can give you more energy — plus the fuel you need to keep stress under control.
- **Laugh.** Humor is a great way to relieve stress. Laughter releases endorphins; natural substances that help you feel better and maintain a positive attitude.
- **Change the pace.** Occasionally break away from your routine and try something new.

Try to practice some of these tips every day. You will find that the storms shall pass, your sails will be in the right direction and you will have clear sailing in whatever path you are on professionally or personally.

Life is short, enjoy it while you can.

CK

Thank you Rose!

Thank you to Rose Hoeing for all of her hard work over the past 3 years with ICD-HCF. She has been a valuable asset to our group and will be encouraged to become involved again. She has been wonderful to work with and I have learned a lot from her. She gave me perspective when I was seeing one sided, gave me help when asked, listened when venting and provided an organized system for me to follow. Thank You Rose!

CK

Meet the Incoming Chair-Elect

Anne Sposato is a graduate of the University of Nebraska – Lincoln with a BS in Human Nutrition and Food Service Management, and Texas Tech University with a Master's Degree of Science. She also received a Culinary Arts Diploma from Western Culinary Institute in Portland, OR.

Her current job is a Washington County Hospital and Clinics as Clinical Dietitian serving the LTC residents, acute patients, and outpatients since February 2003. She has accepted a small part-time job as Consultant Dietitian for Keokuk County Health Center in April 2005. Her previous job was at Iowa City Rehabilitation and Health Care Center as the Dietitian and Director of the Food Service Director from 2000 – 2002. She is also a veteran from the US Navy where she served as Clinical Dietitian in the first gulf war. Her jobs between the US Navy and going back to the Dietetics where were working on Chef de Cuisine in long-term facilities and restaurants.

She enjoys working out at Curves 4-5 times per week, bicycling, cooking, and spending all her extra money on travel.

As the incoming Chair-Elect, I am looking at to working on the following projects. I am totally green to this office, and there is no guide manual for the Chair-Elect position. Regarding to these projects: 1. Create or develop guidelines for the position. 2. Working towards consistency in membership list, since this topic is brought up at every board meeting. (Mail out reminder cards to currents members who did not paid their dues at the annual conference.) 3. Working on the annual conference with Event Coordinator.

Disaster Preparation Information and Resources

New Checklist Helps Long-Term Care and Other Residential Facilities Prepare for an Influenza Pandemic

On May 16, HHS Secretary Mike Leavitt announced the release of the "Long-Term Care and Other Residential Facilities Pandemic Influenza Checklist." This tool provides guidance for these facilities to assess and improve their preparedness for responding to pandemic influenza.

"The collaboration of long-term care and other residential facilities with public health agencies will be important in protecting the people living in those facilities if and when a pandemic occurs," Secretary Leavitt said. "These facilities provide vital services for their residents. By working together now, we'll be better equipped to serve these residents and their caregivers in the future."

The new checklist identifies steps that long-term care and other residential facilities can take to prepare for a pandemic, and could be helpful in other types of emergencies. The checklist was developed by the Centers for Disease Control and Prevention (CDC).

Preparedness suggestions include:

- Have a structure for planning and decision-making, with a multidisciplinary group created to specifically pandemic influenza preparedness planning.
- Develop a written pandemic influenza plan that identifies the person or persons authorized to implement the plan and the organizational structure to be used.
- Develop a facility communication plan that includes key points of contact such as local and state health department officials, and a person responsible for communicating with staff, residents and families.
- Have a plan to provide education and training to ensure that all personnel, residents and family members of residents understand basic prevention and control measures for pandemic influenza.
- Have an infection control plan in place for managing residents and visitors with pandemic influenza.
- Have a plan to get and use vaccines and antiviral drugs.
- Address issues related to sudden increased needs, such as prioritizing services, staffing and supply shortages, and alternative care for residents who need acute care when hospital beds are unavailable.

The release of this new tool builds on the Administration's overall planning to increase pandemic preparedness. President Bush has outlined a coordinated government strategy that includes the establishment of the new International Partnership on Avian and Pandemic Influenza, stockpiling of vaccines and antiviral medications, expansion of early-warning systems domestically and abroad and new funding and initiatives for local and state level preparedness.

Secretary Leavitt has met with senior officials from all 50

states and has been holding summits with the goal of enhancing state and local preparedness. In addition to today's checklist, Secretary Leavitt has issued preparedness checklists for individuals and families, businesses, state and local health departments, and faith-based and community organizations to aid their pandemic preparedness efforts.

A copy of the "Long-Term Care and Other Residential Facilities Pandemic Influenza Preparedness Checklist" is available at <http://www.pandemicflu.gov/plan/LongTermCareChecklist.html>. Additional pandemic planning information is available online at <http://www.pandemicflu.gov/>.

AoA will continue to post updated information related to pandemic flu planning at: <http://www.aoa.gov/press/preparedness/preparedness.asp>.

We want to draw your attention to two pieces of information that have been posted to the ADA member Web site as a result of the Spring HOD Meeting discussions:

- ◇ Government Releases Report on Avian Flu: The White House released a 228-page report that outlines how individuals, businesses, local and federal governments, and community groups should respond in case a pandemic flu, such as the avian flu, hits . Read the report at www.whitehouse.gov/infocus/pandemicflu/
- ◇ ADA Hot Topic: Avian Bird Flu and Our Food-This Hot Topic is a product of the Association Positions Committee and addresses an issue that has significant effect on consumer health and will clarify a controversy on the issue for ADA members, health care providers and consumers. This Hot Topic was prepared by Laura McNally, Public Health/Community Nutrition DPG member (chair-elect for 2007-2008) and delegate for the District of Columbia . To access this Hot Topic, please use the following link: http://www.eatright.org/cps/rde/xchg/ada/hs.xsl/nutrition_8759_ENU_HTML.htm
- ◇ Also, the ADA Web site has a section under the "Food and Nutrition Information" entitled "Disaster Preparedness Resources", which provide the following types of materials: 1) ADA Resources; 2) Additional Resources; and 3) General Information. The link to this information is: http://www.eatright.org/cps/rde/xchg/ada/hs.xsl/nutrition_6004_ENU_HTML.htm

Please share these important resources with other IDA members!!! This demonstrates ADA's commitment to supporting our members with information on key issues to the profession of dietetics.

Iowa Consulting Dietitians in Health Care Facilities Spring Board and Council Meeting Minutes Sunday, April 30, 2006

Attendance:

Char Kooima (Chair), Carol Hill (Chair Elect), Rose Hoening (Past Chair), Cathy Pollock (Secretary), Alison Demory (Treasurer), Alicia Aguiar (Public Relations), Beth Samuelson (Education), Anne Sposato (Nominating & Hawkeye Area), Robin Maharry (Nominating), Betty Barton (DMA Liaison), Roxanne Patton (Northwest Area), Bonnie Moeller (Mississippi Area), Shawn Welter (North Central Area), Theresa Eberhardt (Upper IA Area).
Guests: Bridgett Doyle, Regional Officer for CD-HCF.

The meeting was called to order by Chair Char Kooima at the Sheraton Hotel in West Des Moines, IA at 5:07 pm. Introductions were completed and Char asked for any additions to the agenda. Char called for a quorum check and Cathy Pollock confirmed that there was a quorum present.

Secretary's Report:

Cathy Pollock presented the secretary's minutes and asked for any additions or corrections. Carol Hill made the motion to approve the minutes from the fall board and council meeting and Alison Demory seconded the motion. The minutes were approved as posted in the winter 2005 newsletter.

Treasurer's Report:

Alison Demory presented the treasurer's report. Copies of the budget from November 2, 2005 to April 30, 2006 were distributed for board review. Alison reviewed the income and expenses for the time period stated above. Total expenses were \$5,673.53 and the total income for the time period was \$2,980.90. Current balance on hand, as of April 30, 2006 is \$15,023.68. One big expense mentioned was \$2500 to ADA Research for the Standardized Language Project. Alison also distributed the financial history for the past four years starting in June of 2002 and compared the years.

Alison brought up the question of whether we should be providing a 1099 to the Newsletter Editor since that is a paid position. This will be put on the agenda for the next Treasurer to look into and report back.

The current membership is 144. Mailing out newsletters to all IDA members last summer promoting our group did not bring in extra members and ended up costing about \$1,000.

Bridgett Doyle was asked how our group compares to our bordering states in the region she oversees with number of members and budget. She says that we are right in the middle and that other states are struggling to get mem-

bership numbers up.

Legislative Report:

Char Kooima read an email from Dorothy Riddle in her place outlining some current issues. If anyone has questions please talk with Dorothy.

Newsletter:

Char Kooima reported in place of Lucinda. Advertising for the newsletter continues to be hard to come by. Lucinda has tried contacting different companies and organizations, but has had no luck. A reminder was given for the area representatives to email meetings and anything new in their area to be put into the newsletter. All submissions for the summer newsletter need to be to Lucinda by May 21st for the newsletter to be completed by June 5th.

Public Relations:

Alicia Vance Aguiar reported that there will be an ICD-HCF booth in the vendor area tomorrow during the conference. The membership form was updated to have at the booth. The new pens and notepads purchased for the new member packets will also be at the booth.

Nominating Committee:

Anne Sposato reported that there is one person on the ballot for each of the three open positions to be voted on. The three open positions are Chair Elect, Treasurer, and Nomination Committee. Members may also write in nominees on the ballot. Anne asked if there was a list of all officers from previous years to look at when finding people to put on the ballot. It was suggested to ask Lucinda for that information.

Education:

Beth Samuelson reported that she spent all of her budget this year updating and adding new items to the lending library. Videos continue to be the most used. Some new items include information on the new food guide pyramid and ISU food sanitation course. It was mentioned that Beth is one of the speakers at the conference tomorrow.

Dietary Manager Liaison:

Betty Barton discussed the annual dietary managers meeting held last week in Ames. She reported that it was a success. Next year's meeting has been set for April 26-27 in Ames. Char Kooima reported in place of Deb Dawson and encouraged everyone to spread the word to those able to apply for the DMA scholarship named for Anna Katherine Jerigan. It can be downloaded from the DMA website. Everyone should put on their calendars the MINK conference in March 2007.

Area Representatives:

Reports from local district activities/meetings were shared by Anne Sposato (Hawkeye), Roxanne Patton (Northwest), Bonnie Moeller (Mississippi Valley), Theresa Eberhardt (Upper Iowa), Shawn Welter (North Central), and Char Kooima reported in place of Kathleen Niedert (Northeast, Mideast), and Sue Schinstock (Southeast).

Old Business:

Diet Manual: Char Kooima reported that the newest edition of the Simplified Diet Manual is at the press and will be available spring 2007.

Job Descriptions: Char reported that the updated positions of Chair, Chair Elect, and Event Coordinator were finalized and put into place.

Standard Language Update: Char reported in place of Kathleen Niedert that there is nothing new and that it takes practice to use. It is not as applicable to use in LTC settings.

New member packets: Theresa Eberhardt and Char discussed the packets that they have put together. Some of the items that the packets include are a welcome letter, membership list, copy of regulations, newsletter, list of nutrition websites, and pens and notepads. Theresa has made 30 to begin with. The plan is to have the public relations person to keep and distribute the packets. It was decided to mail a packet to each of the ISU and U of I internship graduates to promote our group. Members may order the ICD-HCF pens or notepads online.

Area Representative Openings: Carol Hill reported that there are currently three open positions and that she has not found anyone to fill those, but has a lead on one.

Publications: Roxanne Patton led discussion on the 90 hour course available for dietary managers and asked for ideas for improvement. The current textbooks need updated and it was decided that we take over updating the textbooks from IDA. There is an online program available, but has received some negative comments. This will be put on the agenda for the fall meeting and Roxanne agreed to lead the committee.

New Business:

Spring Meeting 2006: Char Kooima reported that there are 205 registered for the conference tomorrow. The agenda looks good and the vendor area is larger than last year. There are 15 vendor booths and two of the speakers will be selling their books. They are the "Depression Toolkit" and "Food Drug Interactions". Roxanne Patton and Rose Hoeing both volunteered to help at these booths. Bridgett Doyle with the CD-HCF regional area will have a booth to show resources available and to answer questions. Bridgett plans to take our questions and concerns to the executive board meeting this summer.

Newsletter: Char reported in place of Lucinda and said that there is nothing new to report except for thanks for sending information in to be put into the newsletter. Any new ideas would be appreciated.

Annual Conference Stipend: Char discussed whether we should give money to the event coordinator along with the chair elect to attend the ADA conference. Carol Hill made the motion to provide \$1,000 to the event coordinator and chair elect to attend the annual ADA conference. Allison Demory seconded the motion and was approved by all members present. After returning they each will need to write an article about the conference for the newsletter. There is also an US Foods scholarship available for ADA. Char will email the group the information on that.

Reimbursement for Miles: Char discussed with the group using the reimbursement for miles based on the current rate for the IRS. The current rate is 44.5 cents. Also discussion was held to add the area representatives to the rest of the board and council to be reimbursed for coming to board meetings. Robin Maharry made the motion to include the area representatives with the rest of the board and council to get reimbursed for miles at the current rate followed by the IRS effective immediately. Anne Sposato seconded it and the motion was approved by all members present.

Feeding is Everyone's Business: Carol Hill and Betty Barton both reported that there is nothing new to share. They plan to work on it and discuss at the fall meeting.

Ballot for Officers: Anne Sposato said that the ballot is all ready for the meeting and members can vote at the booth set up in the vendor area. All ballots need to be back before noon, so they can be tallied and announced.

Membership List Maintenance: Char led the discussion of whether we need a better system of maintaining the membership list. Currently the treasurer keeps it updated as members pay their dues and then passes it on to Monica Lursen and to the newsletter editor. Everyone felt that this is the best way and will continue. The other issue is getting people to renew their membership and whether we need a reminder sent out. Some ways discussed is to put a sticker on the newsletter or send out reminder post-cards. The newly elected treasurer and public relations will work together to come up with a system. Members also tend to forget that they paid and will pay double. It was decided to put a box at the top of the renewal form that has the date paid, amount, and check # for members to keep for their records.

Keep Judith Alive Committee: Allison Demory reported that she recently talked with Judith Walrod about what our group is trying to do about saving her position once she

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retires. Char read an email from Dorothy Riddle about her conversations with Judith and possible ideas to look into. Discussion was held on how best to use our monies and the committee will continue to explore possibilities and report back to the group.

Char brought up other new business regarding whether we should acknowledge Martin Bros and Hawkeye for being reliable sponsors for the annual conference and for advertising in the newsletter. We are all to think about what we should do and discuss at the fall meeting.

Rose Hoenig made the motion to adjourn the meeting and Allison Demory seconded it. The motion passed by all present. Meeting adjourned at 7:15pm.

Respectfully submitted,

Cathy Pollock, Secretary

**Business Meeting
ICD-HCF Annual Spring Conference
Monday, May 1, 2006**

The business meeting was held during lunch at the annual spring conference. Char Kooima, Chair did introductions of the Board and Council Members. The current balance on hand is \$15,000 and we have 144 members. A reminder was given for everyone to sign up on the ADA Dietitian Network which can be done online. One special guest to note is Bridgett Doyle, regional representative with the CD-HCF. Char encouraged those to ask her questions or share your concerns so she can pass on to the national executive board. Rose Hoenig presented a change in bylaws regarding the editor of the newsletter will be appointed by the chair instead of the chair elect and the past chair will serve as the coordinator of the newsletter with the appointed editor. All in present voted and the bylaw change was approved. Door prizes were then handed out and thanks were given to all the vendors for supporting the conference and having booths. The meeting was then adjourned by Char.

Respectfully submitted,

Cathy Pollock, Secretary

Election Results are Tallied!

The incoming Chair-Elect is Anne Sposato, our new-Treasurer is Nadine Fisher and Theresa Eberhardt now serves on our Nomination Committee.

**Iowa Consulting Dietitians in Health Care Facilities
Treasurer's Report: November 2, 2005 – April 30, 2006
Alison Demory, Treasurer**

EXPENSES:

ADA Stipend	<u>893.13</u>
Administrative	<u>2,624.80</u>
Copies	0
Phone	0
Miscellaneous	2,500 ADA Research
Postage	2.28
Area Groups:	<u>0.00</u>
Board Meetings:	<u>523.75</u>
Food/Room	220.00
Mileage	303.75
Education:	<u>497.16</u>
Salary	27.18
Postage	42.87
Supplies	0
Library	427.11
Marketing:	<u>0.00</u>
Dues	0
Exhibits	0
Newsletter (2 issues):	<u>974.35</u>
Salary	600.00
Postage	181.80
Mileage/Supplies	0
Copies	192.55
Spring Meeting:	<u>0.00</u>
Speakers	0
Mileage	0
Room Fees	0
DMACC	0
Copies	0
Supplies	0
TOTAL:	5,673.53

INCOME:

Dues	50.00
Interest (Nov.-Mar.)	34.90
Newsletter Ads	646.00
Spring 2005 Exhibits	2,250.00
DMACC	0
Books	0
TOTAL:	2,980.90

BALANCE ON HAND as of April 30, 2006 \$15,023.68

Thank you Alison!

Alison Demory has served with honor as our Treasurer for the past six years. She has worked tirelessly to organize the budget and financial reports along with serving actively at the Board and Council meetings. Alison deserves a big thank you for her service—let her know how much you appreciate her when you see her. Thank you Alison!

More Disaster Preparation Information and Resources

"We Can Do Better: Lessons Learned for Protecting Older Persons in Disasters," by Mary Jo Gibson and Michele Hayunga (May 2006, .pdf format, 84p.).

<http://www.aarp.org/research/assistance/lowincome/better.html>

<<http://www.aarp.org/research/assistance/lowincome/better.html>>

US SENATE SPECIAL COMMITTEE ON AGING HEARING TESTIMONY, HEARING

PUBLICATION:

A. "Caring for Seniors in a National Emergency: Can We Do Better?" a hearing held May 18, 2006.

Hearing Testimony (.pdf format): <http://aging.senate.gov/public/index.cfm?Fuseaction=Hearings.Detail&HearingID=170>

<<http://aging.senate.gov/public/index.cfm?Fuseaction=Hearings.Detail&HearingID=170>>

B. "Preparing Early, Acting Quickly: Meeting the Needs of Older Americans During a Disaster," a hearing held October 5, 2005 (S.Hrg.

109-339, .pdf and ASCII text format, 161p.).
<http://www.gpo.gov/congress/senate/senate22sh109.html>

<<http://www.gpo.gov/congress/senate/senate22sh109.html>> Scroll down to or "find in page" "109-339" (without the quotes).

This Government Accountability Office correspondence to the U.S. Senate Special Committee on Aging may be of interest to some of you:

Disaster Preparedness: Preliminary Observations on the Evacuation of Vulnerable Populations due to Hurricanes and Other Disasters, by Cynthia A. Baschetta, director, health care, before the Senate Special Committee on Aging. GAO-06-790T, May 18.

<http://www.gao.gov/cgi-bin/getrpt?GAO-06-790T>

<<http://www.gao.gov/cgi-bin/getrpt?GAO-06-790T>>

Highlights - <http://www.gao.gov/highlights/d06790thigh.pdf>

<<http://www.gao.gov/highlights/d06790thigh.pdf>>

Highlights from the Surveyor at the Spring Meeting

The Food Code has been updated for 2005. DIA does not expect to update requirements for facilities. It is advised that facilities update policies and procedures now rather than wait until changes are required. It is best to follow what is considered best practice, even if it is not required.

The 2005 Food Code states that holding food at 135° F is an acceptable temperature for food safety requirements. However, 135° F generally is not considered palatable. Food needs to be served at temperatures that taste/feel good to the residents.

Iowa does not plan to change menu-planning requirements to the Food Guide Pyramid. The Food Guide Pyramid is a tool for healthy American consumers—it is an educational tool for food choices, not for menu planning for institutions. Residents at long-term care facilities already have concerns about receiving too much food.

The Simplified Diet Manual is in the printing process.

Facility Potluck Dinners—staff and resident families should be encouraged to bring non protein based food items (not potentially hazardous foods), such as desserts, relishes, certain salads, serving those hot or cold as appropriate. The facility may provide the rest.

It is okay to use farmer's market produce as local sanitation departments inspect those. It is also okay to use donated sweet corn and other non-protein based items.

Glove misuse continues to be a concern for inspectors. Employees need to be taught how to use utensils, washing hands when dirty.

News From Around the State

Warm spring sunshine from Northeast Iowa

The UIDDA group met at a Hy-Vee in Cedar Rapids for a look at new products on the market, our personal tour led by Christy Lavine RD/LD and a taste of gluten free products (thanks Judy Fitzgibbons RD/LD). We then traveled to the home of Alicia Aguiar for a business meeting, lunch and afternoon program. Mindy Ellsworth presented information from PIPPAH (Partners in Program Planning for Adolescent Workshop). Mindy had the opportunity to attend this workshop at ADA and shared how she used this information in her community. There was a good discussion and sharing of ideas. At least 4 members in attendance are on local school wellness policy committees and this information will be another great resource to use.

Respectfully submitted,
Theresa E. Eberhardt RD/LD,
Upper Iowa Representative



Web Sites of Interest

A copy of the "Long-Term Care and Other Residential Facilities Pandemic Influenza Preparedness Checklist" is available at <http://www.pandemicflu.gov/plan/LongTermCareChecklist.html>. Additional pandemic planning information is available online at <http://www.pandemicflu.gov/>.

AoA will continue to post updated information related to pandemic flu

Here is an excellent web site containing nutrition information specific for older adults. It also provides access to "You Can" material which is a 12 lesson nutrition and physical activity program for older adults. It is very easy to use so you would need very little prep time.

<http://nutritionandaging.fiu.edu/>

Current Concepts in Nutrition & Aging—there is a meeting coming up this fall. To find out more, go to <http://www.uwex.edu/ces/flp/conference/ELDNUT05.pdf>

All ICD-HCF members are encouraged to sign up for the ADA Nationwide Nutrition Network. The application form can be accessed on www.Eatright.org (then use the search function for Nationwide Nutrition Network). This is a way to increase the awareness of RDs in Iowa. As we encourage other groups to use our services, the Nationwide Nutrition Network is one way to identify RDs in each community.

http://www.eatright.org/cps/rde/xchg/ada/hs.xsl/3213_ENU_HTML.htm

If you are interested in more information regarding hydration and nutrition with end of life care, here another valuable asset : the Fast Facts available at www.eperc.mcw.edu

A Promised Reference from our Spring Meeting: Hydration & Nutrition with End of Life

Objectives

Purpose: Food, fluids, nutrition, hydration and the decisions regarding feeding and hydration at the end of life are emotionally charged issues. This session will focus on the emotional and physical implications of such issues and on the benefits and burdens associated with feeding at end of life.

At the conclusion of this session the participant will be able to:

1. Identify the way in which foods and fluids are utilized in our culture to socialize, celebrate and nurture.
2. Identify the burdens and benefits of feeding or not feeding at the end of life.
3. Identify nourishing alternatives to feeding at the end of life.
4. Identify questions to ask when deciding about whether to feed or not at the end of life.

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Wine and Health

Need an interesting idea for an educational program for your district? Consider having a wine tasting and presentation! We had a great and delicious program at The Outing Club in Davenport in May. The setting was lovely and the fare was wonderful. Irene Huffman, Certified Wine Educator from our area presented on wine and health issues and wine and food matching.

She had handouts on each topic and we discussed them. Then the real fun began as we sampled wines with different foods. The choice of wine really did make a difference. It was a fun evening that attracted a good crowd. It also promoted some friendly visiting that we don't get to do much of at other educational meetings. If anyone is interested in contacting Irene send me an email or call and I will put you in touch with her. I am considering proposing this as an event for our residents at one of my facilities. What do you think of that idea?????

Rose Hoenig, RD, LD r.hoenig@mchsi.com
563-289-3221

SERVICE—IT'S OUR BUSINESS
Kathleen C. Niedert, ABD, MBA, RD, LD, FADA

Why do we go back to the same restaurants over and over? Generally we go back because the wait staff knew what they were doing, the food was good, presentations was great, décor and table service was inviting, and service was impeccable. In other words, the dining experience was memorable. If the experience isn't memorable are you likely to return again and spend those discretionary dollars or will you try something different?

When you visit your nursing homes, what kind of service do you see? Do we provide that impeccable experience to our residents? *Sometimes*. Should we provide it to our residents all the time? *Absolutely*. It's important to create a memorable experience at each meal for our residents even though these people have no choice but to be our repeat customers.

Food is a "connecting" experience. Think back when we were growing up. Most of us had meals together. Some of my most cherished memories are around a big kitchen table where everyone just seemed to gather—not in our "beautiful" living room that was seldom used. What was so special about that kitchen table? We called each other by given name (most times anyway—remember, I had a brother); we made eye contact with each other; and we often stood over one another with our hands on the others shoulder. These are the three things our residents also expect—1) to be called by their name 2) to have staff make eye contact with them and 3) to have appropriate touch such as on the shoulder. Our residents need us to pay attention to them. Staff needs to make that connection every meal—make simple conversation, discuss their interests, and be conscious of their individual disabilities—vision, hearing, etc.

Make sure the staff includes the resident in the decision making of what he or she wishes to eat. Provide the options as near to mealtime as possible. Ask, rather than tell. Don't allow staff to think that just because the resident has dementia, it doesn't matter what you provide them at mealtime. Wait staff should provide information on the food items on the menu that meal and help the person to explore all the choices and options available. Staff by their tone, can certainly influence the choice—just like wait staff does in restaurants. Use historical data to determine amounts for production staff to prepare.

If staff serve the items and notice the resident does not seem pleased with the food choice, ask them if there is anything else that can be done. Let them know that it's okay to decide at the very last minute that they would prefer something different.

True turnoffs for our residents are the staff's vocal tone, their facial expressions and the body language used. As a consultant, do you schedule time to spend in the dining room with the staff and supervisor? How does staff perceive how you interact with the residents? Can you call each by name?

When staff waits on residents do they know the correct manners to use? Don't expect everyone to have grown up with families that feel manners are important. When staff perform a function and the resident says "thank you" the response should not be "no problem." That implies there was a problem to begin with—the response is "you're welcome." It's not "yea" but "yes, I'd like to...."

When everyone is served can you find the wait staff or have they "left the building?" Wait staff should be returning to the tables served and making sure that the resident has experienced the type of service we want—good food, friendly and attentive service.

How does your table service appear? Are you using tablecloths, placemats or are you still on tray service? Do you use colored napkins or "just white one" because you feel the colored ones are "too expensive." Do dishes and flatware match or is it whatever the staff members puts at each place setting at the time because they want to get the job done in a hurry? Are condiment holders clean and appropriately filled?

Are items served appropriately and does staff know what certain gesture mean? Here are a few tips:

- The main plate/entrée plate is placed 2 inches from the edge of the table
- If the person doesn't want coffee, they may just turn the coffee cup upside down
- To remember what goes on the left—it's a 4 letter word—like fork

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(Continued from page 10)

- To remember what goes on the right—it's a 5 letter word—like knife, spoon
- Plates and dishes go on the left; cups and glasses on the right
- Serve from the left and take from the right
- Enter chairs from the left, straighten your skirt or brush down the back of your pants and gently sit in the chair—don't plop down—and allow the gentleman to push in your chair
- Remember that salt and pepper are "married." Always pass together
- Lettuce should not be stabbed with the fork but lifted
- Soup and cereal should be eaten by pushing the spoon bowl away from you
- Food and eating are "silent" activities—no crunching, slurping, etc
- When a person is done eating the fork and knife are placed across the plate at 10 and 3, otherwise expect the person is just resting between bites
- Keep water glasses full—remember, what goes in the mouth must go down unless it would cause choking—if that is the case, discreetly remove bones, pits, etc using your thumb and index finger and place under the garnish

Treat the resident as a customer.

"The elderly person does not come asking to find a new lifestyle, or even a greatly altered one, but asks that we recognize and honor his or her way of life while assisting in making alterations required. M.O. Wolanin

A Message from the Incoming Chair

Hello Everyone!!

Before I do anything else, I would like to express my heartfelt thanks to Char for all of her hard work over the past two years. She has planned back to back annual meetings of exceptional quality and I am already looking forward to our next meeting in the spring of 2007.

Part of this years meeting, "The Nutrition Puzzle: Putting the Pieces Together" was actually a follow-up from a speaker we had last year. JoEllen Arends, R.N. from Hospice of North Iowa gave us much needed insight on hydration & nutrition during the end of life & provided us with information on the dying process & how provision of food & fluids at the end of life is an emotionally charged decision. Laurie Kimball, R.N., M.S. helped us to define stress & list symptoms of depression and using humor, helped us learn to manage stress & encouraged us to keep ourselves aware of how depression may be affecting us or someone we know. We were pleased to have the authors of *Food Medication Interactions* share with us their insights on drug therapy for the elderly, appetite stimulants, and MNT for Alzheimer's Dementia. In a breakout session Julie Halfpop, RD, LD and Beth Samuelson RD, LD treated us to a "hands-on" skill fair. Much thanks goes to Judith Walrod, RD, LD for once again taking time out of her busy schedule to keep us up to date on issues such as Food Code 2005, defining unplanned weight changes, and updating us on the most cited deficiencies. It was another great CPE meeting. At the end of the day we were able to announce election results and welcome incoming officers.

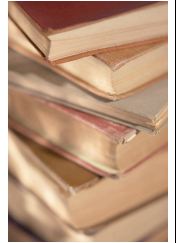
As incoming Chair, I welcome any comments or concerns that you may have. Email is the best way to contact me cjhillrd@aol.com is the address. For those who know me well, I pledge to check it more often as time allows. Looking forward to a great year for ICD-HCF.

Carol J. Hill RD, LD



HOD MEMBER FACT SHEET: The Long View - Revising Dietetics Education to Meet Future Needs

Mega Issues are overriding issues of strategic (critical) importance to the future of the dietetics profession. They articulate the questions that will need to be asked and answered by the Association in the next 5-10 years. Addressing the need to revise dietetics education to meet future needs was proposed as a mega issue in 2002.



The House Leadership Team presented a potential timeline for addressing the revision of dietetics education during the Spring 2006 HOD Meeting. The beginning of the timeline is realistic because it has already happened. The rest of the timeline was devised to show the shortest possible time needed to develop a plan, come to consensus on the plan and implement the plan.

Timeline of Previous Actions

Fall 2003: The House of Delegates conducted a dialogue on the mega issue question "How will the demands of the marketplace reshape the entry-level dietetics practitioner and how entry-level education will need to evolve to prepare students for the future?" The outcome was to form the Dietetics Education Task Force.

Spring 2005: The Dietetics Education Task Force issued recommendations for revising dietetics education in February 2005. The HOD received member feedback on the recommendations and conducted a face-to-face dialogue during the Spring 2005 HOD Meeting. The outcome was to request the Task Force to continue investigating future changes to dietetics education. The Task Force was requested to consider responses about the recommendations, HOD dialogue comments and obtain input from RD practitioners, RD educators, DTRs and advanced-level practitioners. A final report was to be submitted by spring 2006 to the House of Delegates.

Spring 2006: The HOD received an update about the work of the Task Force, a vision of a time-line for revising dietetics education (HOD Member Fact Sheet: The Long View) and provided input about the possibility of forming a Phase 2 Task Force to review the Dietetics Education Task Force recommendations and to provide additional input on the vision of future practice and educational needs from educators, practitioners, employers, futurists, etc. (4-30-06). The HOD will consider forming a Phase 2 Task Force.

Projected Timeline of Actions

Summer 2006: The final report of the Dietetics Education Task Force will be submitted in early summer. Delegates will share the task force recommendations with members. Member feedback will be shared with the Phase 2 Task Force.

Spring 2007: The HOD will receive the report and recommendations from the Phase 2 Task Force. The HOD will conduct electronic dialogue over the summer.

Fall 2007: The HOD will conduct a dialogue on the recommendations from the Phase 2 Task Force. If there is consensus about the recommendations, HOD will ask CADE to develop an implementation plan. If consensus has not been reached, a new timeline for addressing unresolved issues will be developed to continue the process.

Imagining there is consensus the following will happen:

Spring or Fall 2008: The HOD will conduct a dialogue about the implementation plan developed by CADE. The HOD will provide input to CADE for refining the implementation plan.

2008-2018: Implementation of changes to dietetics education would begin in 2008 and be completed in 2018, the time by which all dietetics education programs will be required to have fully implemented the plan. HOD will review the status of the implementation of the plan on a yearly basis.



Questions...

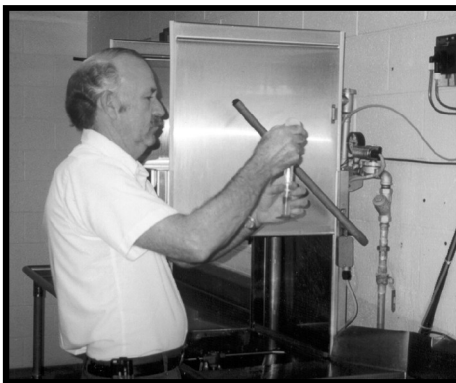
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ICD-HCF 2005-2006 Board and Council

Past Chair

Char Kooima
H(712) 722-0820
E-mail: rbaxc@mtcnet.net

Chair

Carol Hill
(515) 223-1223
E-mail: cjhillrd@aol.com

Chair-Elect

Anne Sposato
W(319) 863-3937
H(319) 665-2891
E-mail: asposato@wchc.org
E-mail: jabs8@msn.com

Secretary

Cathy Pollock
712-722-4140
E-mail: bc4cy@mtcnet.net

Treasurer

Nadine Fisher

E-mail: rf0619@mchsi.com

Newsletter Coordinator

Lucinda Scandrett
H (515) 233-3365
E-mail: icdnewsletter@yahoo.com

Public Relations Chair

Alicia Vance Aguiar
W(319) 861-3427
E-mail: alicia783@mchsi.com

Legislative

Dorothy Riddle
(515) 231-8995
E-mail: dfrwiz@aol.com

Education

Beth Samuelson
(515) 545-4814
E-mail: bsamuelson@wccta.net

Nominating

Robin Maharry
H(712) 200-1666
E-mail: frmahary@alta-tec.net

Theresa Eberhardt
E-mail:

Dietary Manager's Assn. Liaison

Deb Dawson
H(515) 278-7092
W(515)527-1100
E-mail: ddawson@mercydesmoines.org

Betty Barton
H(515) 232-1824
W(515)964-6576
E-mail: bartonbet@msn.com

North West Area Rep.

Roxane Patton
H (712) 277-2885
cell (712) 253-3356
Fax same as phone
E-mail: roxane.patton@longlines.com

Mississippi Area Representative

Bonnie Moeller
(563) 359-1923
E-mail: brmoellerRDL@dmchsi.com

South West Area Rep.

Open

North Iowa Area Rep.

Open

North Central Area Rep

Shawn Welter

E-mail: jswelter@evertek.net
(515) 379-2404

Central Area Representative

Open

Upper Iowa Area Representative

Theresa Eberhardt
H 319--245--1530
bonnie@alpinecom.net

North East Area Representative

Mid East Area Representative

Kathleen Niedert
(319) 988-4636
E-mail: kniedert@aol.com

Hawkeye Area Representative

Anne Sposato
W(319) 863-3937
H(319) 665-2891
E-mail: asposato@wchc.org
E-mail: jabs8@msn.com

South East Area Representative

Sue Schinstock
H(319)469-7941
Fax(319)469-2015
E-mail: schinsto@interl.net

Mid West Nutrition Team Area Representative

Terri Romey
(712) 669-3357
E-mail: romey4@netins.net

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Iowa Consulting Dietitians in Health Care Facilities

Lucinda Scandrett, RD, LD
ICD-HCF Newsletter Coordinator
1021 Top-O-Hollow Road
Ames, IA 50010