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STATE OF OHIO
DINING ASSISTANT
PROGRAM
STANDARDS AND GUIDELINES

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DEFINITIONS

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Classroom Instruction

Means the training and information, excluding clinical experience, provided by a facility. Classroom instruction may include laboratory demonstration/return demonstration.

Clinical Experience

Means a program through which the competency of a Dining Assistant provides feeding assistance to residents in an Ohio LTCF as part of the training process and under the supervision of the approved instructor.

Instructor

Means an individual who is responsible for providing the instruction and performing the skills testing for the dining assistant as defined in Paragraph (F) of rule 3701-17-07.2 of the Administrative Code.

Laboratory Demonstration/Return Demonstration

Means the use of individuals and equipment in a classroom setting for instructional purposes to approximate residents in a long-term care facility.

Minimum Hours

Means the least amount of time required to cover each subject matter component contained in a topic area.

Dining Assistant (3701-17-07.2) (A) (2)

"Dining Assistant" means an individual who meets the requirements specified in this rule and who is paid to feed residents by a long term care facility or who is used under an arrangement with another agency or organization.

Nursing and Nursing-Related Services (Paragraph (4) of Rule 3701-17-07.1)

Means activities including attending to the personal care needs of residents, and providing personal care services and activities delegated by a nurse which may include implementation of portions of the nursing regimen, as defined in section 4723.01 of the Revised Code, for residents whose care does not require nursing assessment or the judgment of a nurse during the performance of the delegated activity. Nursing and nursing-related services does not include activities that are part of the nursing regimen which require the specialized knowledge, judgment, and skill of a registered nurse or the application of the basic knowledge and skill required of a licensed practical nurse licensed under Chapter 4723. of the Revised Code or any other activities that are required to be performed by a licensed nurse under Chapter 4723. of the Revised Code. Nursing and nursing-related services does not include assisting residents with feeding when performed by a Dining Assistant pursuant to rule 3701-17-07.2 of the Administrative Code.

Performance Objective

Means a statement that is specified, in measurable terms, what the Dining Assistant trainees and participants are expected to know and execute as a result of successfully completing a training program.

Required Hours

Means the total number of clock hours that are necessary to cover the content of a specific topic area.

Skills Testing

Means the program coordinators or instructors observing the Dining Assistant's ability to perform a specified task by determining the presence or absence of those critical elements essential for its successful execution.

Standard

Means a statement that specifies the subject matter that is required to be taught for each specific topic area in a training program.

Dining Assistant Training Course or Program

Means a program of Dining Assistant training and evaluation of competency to provide feeding assistance.

Trainee

Means an individual who is enrolled in a Dining Assistant training course approved by the Director pursuant to Chapter 3701-17-07.2 of the Administrative Code.

INTRODUCTION

Application

A long term care facility may use the services of Dining Assistants to feed certain residents. A long term care facility that uses Dining Assistants must meet the requirements of Rule 3701-17-07.2 of the Administrative Code. Dining Assistant Training Courses must be approved by the Director of Health pursuant to paragraph (H) of the above rule. Such training courses may be based either in a long-term care facility or be non-long term care facility based. In the case where a Dining Assistant Training course is not based in a long-term care facility, the program may make arrangements with the long-term care facility for the provision of the clinical experience.

It is strongly suggested that persons who intend to provide a Dining Assistant Training Course approved by the Ohio Department of Health consider the trainee mix before they start the Dining Assistant Course. People who will attend the Dining Assistant training course come from a variety of educational backgrounds and levels of experience. Whenever possible, it is preferable to group the individuals who will be attending the program into groups of persons with similar backgrounds. This allows the person providing the program to better target subject matter to the group than if the group has a wide variation of educational levels and experience.

If you have questions concerning the Dining Assistant Training Courses, or if you wish to obtain an application, please contact: The Ohio Department of Health, ATTENTION: NATCEP Unit, 246 North High Street, 1st Floor, Columbus, Ohio 43216, or 614-752-8285; FAX 614-995-5085, NATCEP@odh.ohio.gov.

Introduction

Rule 3701-17-07.2 of the Ohio Administrative Code establishes the requirements for Dining Assistant Training. These requirements mandate that Dining Assistants complete a **(10)** hour training program. The objective of the Dining Assistant training requirement is to ensure the provision of quality assistance at meal times to certain residents in long-term care facilities by Dining Assistants who are able to:

1. Form a relationship, communicate and interact competently on a one-to-one basis with long-term care facility residents;
2. Demonstrate sensitivity to the residents' physical, emotional, social, and mental health needs through trained, directed interactions;
3. Assist residents in attaining and maintaining functional independence; and
4. Exhibit behavior in support and promotion of residents' rights.

The information that follows relates directly to the training of Dining Assistants in Ohio. Every effort has been made in constructing this information to follow the format for Dining Assistant training as found in rule 3701-17-07.2 of the Ohio Administrative Code. In addition, it is the intent of this document to serve as a:

-guide for persons training Dining Assistants to interpret Ohio's Standards for Dining Assistant training;

-framework for the development and implementation of Dining Assistant training curriculum; and
-basis for the development of the monitoring guidelines to be used by evaluators for on-going program review.

TRAINING PROGRAM OF RULE 3701-17-07.2 OF THE OAC

The training course is designed to ensure that Dining Assistants have a basic understanding of the nutritional needs of the residents, communication and interactions involving the residents and facility staff, behavior challenges and safety procedures of the long-term care facility in which they are employed.
The training course must include:

(1) Feeding techniques;
(2) Assistance with feeding and hydration, including the use of assistive devices;
(3) Communication and interpersonal skills;
(4) Appropriate responses to resident behavior;
(5) Safety and emergency procedures, including the Heimlich maneuver;
(6) Infection control;
(7) Resident rights;
(8) Recognizing changes in residents that are inconsistent with their normal behavior and the importance of reporting those changes to the supervisory nurse;
(9) Special diets;
(10) Documentation of type and amount of food intake; and
(11) Meal observation and actual feeding assistance to a resident.

CURRICULUM

The Dining Assistant Program is composed of a **(10)** hour curriculum. The curriculum is composed of the following topic areas.

Topic Areas
Introduction to the Dining Assistant Program
Communication and Interpersonal Skills
Infection Control
Safety and Emergency Procedures
Respecting Residents' Rights
Mealtime, Nutrition and Fluid Needs

Pre-Resident Contact
9 total hours classroom (including lab simulation)

Resident Contact
1 hour clinical experience

The following is a chart on the required hours for a Dining Assistant Program in Ohio. Please use this as a guide for your Dining Assistant program. You may have more than the required amount of hours, but you cannot have less.

Topic Area	Required Classroom Hours
I. Overview	0.5
II. Communication & Interpersonal Skills	2.0
III. Infection Control	1.5
IV. Safety and Emergency Procedures	1.5
V. Respecting Residents' Rights	1.0
VI. Nutrition and Fluid Needs	0.5
VII. Mealtime	2.0
Clinicals	1.0

Organization of the Standards, Objectives and Content

The Topic Areas are broken up into Standards. Below is an outline of the Topic Areas with each Standard that is contained within. The language at the beginning of each Standard specifically outlines the State of Ohio's requirements which must be contained in or addressed through the Dining Assistant Training Course. The objectives specify in behavioral terms what the trainees in the Dining Assistant Training Course are expected to be able to do as a result of successfully completing the Dining Assistant Training course. Each Dining Assistant Training course may enhance the content by using textbooks, handouts, and audiovisual materials.

Pre-Resident Contact (9 Hours) Topic Areas I-VII

Topic Area I Introduction to Dining Assistant Program

Standard I.1 Program Overview

Topic Area II Communication and Interpersonal Skills

Standard II.1 Communication and Interpersonal Skills
Standard II.2 Communicating and Interacting with Residents with Impairments

Topic Area III Infection Control

Standard III.l Infection Control
Standard III.2 Practices which Prevent the Growth and Spread of Pathogenic Micro-organisms

Topic Area IV Safety and Emergency Procedures

Standard IV.1 General Safety Practices and Procedures

Topic Area V Respecting Residents' Rights

Standard V.1 The Residents' Rights

Topic Area VI Nutrition and Fluid Needs

Standard VI.1 Nutrition and Fluid Needs

Topic Area VII Mealtime

Standard VII.1 Mealtime

Topic Area I – Introduction to the Dining Assistant Program
Standard I.1

Ohio's Dining Assistant Training Course has been designed to meet the requirements of Rule 3701-17-07.2 of the Administrative Code as well as provide a meaningful, practical skill development opportunity for persons wishing to be a Dining Assistant in Ohio's long-term care facilities.

The Dining Assistant Training Course is composed of **(10)** hours curriculum of instruction which is balanced between classroom and skills training. All hours of instruction must be completed before any clinical experience is undertaken. Additionally, no Dining Assistant will perform direct care on a resident. At the conclusion of a Dining Assistant program the Dining Assistant will be required to pass a test conducted by the instructor before being approved to work as a Dining Assistant in Ohio's long-term care facilities.

A Dining Assistant shall only be assigned to feed those residents who do not have complex feeding problems such as IV or parenteral feedings, swallowing problems, or recurrent aspiration problems.

After successful completion of the Dining Assistant Training Course conducted by the instructor the facility shall be responsible for maintaining all Dining Assistant training and employment records and make available for review to the surveyors during the survey process. This helps to ensure that employers can verify that a Dining Assistant is approved to work as a Dining Assistant in an Ohio long-term care facility.

Topic Area II – Communication and Interpersonal Skills
Standards II.1 – II.2

Communication and interpersonal skills are critical to the well-being of residents, the people who care for, or about them, and to the flow of information within the long-term care facility. Because of their contact with the residents, Dining Assistants play an important role in the flow of information in the long-term care facility. The ability of the Dining Assistant to communicate changing conditions of the resident to proper staff may be critical to the resident's well-being. The Dining Assistant must also interact effectively with

other members of the health care team including staff from other departments. Therefore, the Dining Assistant should receive training in basic verbal and nonverbal communication techniques, identification of factors which may impair communication, methods to enhance interpersonal skills and communication with appropriate staff regarding change in resident behavior.

Topic Area III – Infection Control
Standards III.1 – III.2

Residents, by the very nature of their living environment and physical/emotional status are prone to a variety of infections. The Dining Assistant is in a unique position to assist residents and to prevent infection. The Dining Assistant needs to recognize and report signs and symptoms of infection quickly should these symptoms appear. The Dining Assistant must also be able to identify behaviors which prevent the spread of infection.

Topic Area IV – Safety and Emergency Procedures
Standards IV.1

Knowledge and the ability to act properly regarding safety and emergency procedures are critical to the well-being of residents and care givers in the long-term care facility. Residents are largely dependent on the staff of the long-term care facility to provide a safe environment for them, and to see to their safety in the event of fire or natural disaster. Therefore, the Dining Assistant must not only be aware of proper safety and emergency techniques but must be able to perform the correct procedures when necessary.

Topic Area V – Respecting Residents' Rights
Standard V.1

Residents of long-term care facilities are protected by the same rights as any American citizen under the United States Constitution. However, residents of long-term care facilities by virtue of entrusting their lives to others have gained through federal statute and the State of Ohio's Resident Bill of Rights specific rights which are designed to afford them additional protection. The additional protection helps to ensure that their dignity, human rights and lives will be honored. Because of the relationships they build with residents and the amount of direct contact they have with the individual, Dining Assistants play a key role in implementation of the residents' rights.

Topic Area VI – Nutrition and Fluid Needs
Standard VI

The amount and quality of foods and fluids in the resident's diet affect physical and mental well-being. The Dining Assistant needs to be aware of the factors affecting the nutritional state of the resident. There are modified diets to meet the special nutritional needs of the resident. The Dining Assistant will be aware of the various therapeutic diets and will insure that the resident is fed according to the dietary plan.

Topic Area VII – Mealtime
Standard VII

The Dining Assistant interacts with the resident on a daily basis in the long-term care facility. Therefore, the Dining Assistant needs to be competent in the assistance with providing proper feeding and nutritional care. The resident depends on the Dining Assistant to perform these skills, to seek help for the resident when help is needed, and to accurately report a change in the resident's condition to the proper authority. The correct performance of basic feeding skills provides comfort to the resident and is a factor in the resident's need to live in a long term care facility. The instructor shall provide a curriculum which will result in the trainee obtaining the skills necessary to competently perform basic feeding procedures.

Standard I.1 Program Overview

Section 3701-17-07.2 of the Administrative Code requires the training of Dining Assistants. This is done through a Dining Assistant Training Course (Dining Assistant program). The Dining Assistant Training Course shall contain subject matter designed to ensure that the Dining Assistant will be able to state the:

—Purpose of the Dining Assistant program
—Role and responsibilities of the trainer and Dining Assistant
—Reporting and recording process in Ohio for abuse, mistreatment and neglect of a resident by a Dining Assistant.

Objective	Content Curriculum	Hours Class	Title of Teacher	Method of Evaluation Teaching Method
The Dining Assistant trainee will be able to: 1. Identify the purpose of the Dining Assistant Training Program	1. Purpose of Dining Assistant Training Program a. Prepare Dining Assistant in LTCFs to feed the residents b. Prepare the Dining Assistant to function as part of the team c. Make Dining Assistant aware of the principles of nursing as it applies to "nursing related" delegation.			
2. List the role and responsibilities of the Instructor and Dining Assistant	2. Role and Responsibility a. Instructor 1) Provide classroom and clinical knowledge and experience to train 2) Follow rules to maintain compliance with state 3) Provide each student with appropriate handouts and training tools 4) Facilitate learning and evaluate Dining Assistant competency in skill performance 5) Utilize the impact of cultural, age, gender diversity issues with the Dining Assistant trainees b. Dining Assistant Trainee			

	1) Attend class 2) Follow program rules 3) Provide feeding for LTC residents under the direction and supervision of the Instructor 4) Maintain safe environment 5) Review all handouts and obtain and review skills checklists for classroom testing			
3. Explain the Ohio Nurse Aide Registry	3. NAR Information a. NA registry includes all NAs who have completed STNA Training and State Tested b. Dining Assistant cannot be listed on the NA Registry			
4. Discuss issues related to abuse, mistreatment, neglect and misappropriation of funds according to State Law	4. Abuse, neglect, and misappropriation a. Definition of terms according to State Law: 1) abuse 2) neglect 3) misappropriation A finding of abuse is never removed from Nurse Aide Registry (NAR) b. Findings of abuse or neglect of a resident or misappropriation of the property of a resident is included in the NA registry c. Results of allegation: 1) investigation 2) reporting 3) consequences d. If a Dining Assistant observes abuse, neglect, or misappropriation of funds, it should be reported to the charge nurse			

Standard II.1 Communication and Interpersonal Skills

Basic communication techniques and behaviors which can be effective for Dining Assistants when communicating with residents, family members and fellow employees in the long-term care facility shall be presented. Classroom demonstrations and exercises shall be used to ensure acquisition of communication skills by the trainees. Subject matter covered shall include:

-Attitudes and behaviors which promote effective communication;
-Factors which promote as well as block effective communication with residents, the resident's family, friends and nurse.

Objective	Content Curriculum	Hours Class	Title of Teacher	Method of Evaluation Teaching Method
The Dining Assistant trainee will be able to: 1. Define communication	1. Communication a. Two-way process b. Sender, receiver and message are needed for communication c. Communication can be oral, written or by body language d. Dining Assistant's communicate with healthcare team, residents, families and visitors A. Verbal Communication 1. May be oral or written 2. Tips for oral communication a. Control volume and tone of voice b. Speak slowly, clearly, and distinctly c. Avoid slang, profanity, and vulgar words d. Repeat information as needed e. Ask questions one at a time f. Position yourself at resident's eye level B. Non-Verbal Communication 1. More accurately reflects a person's feelings 2. Gestures, postures, touch, facial			**Teaching Alert** Use a current Dining Assistant text, workbook and/or audio-visual aid as a resource. See bibliography. **Integrate Into Future Clinical Experience** Identify various communication strategies observed during the feeding experience. Dining Assistant needs permission to answer a resident's phone Show examples or situations of how

	expressions, eye contact, body movement and appearance 3. Non-verbal communication is involuntary and more difficult to control 4. Understand the importance of touch			to handle conflict, anger and stress. Differentiate between empathy and sympathy.
2. Describe behaviors which promote communication between people	2. Behavior which promotes effective communication between the Dining Assistant and residents a. Understand and respect the resident as a person 1. Look at the resident as an individual 2. Respect the resident's condition and limitations 3. Accept the resident's culture and religion 4. Be aware of resident's primary language b. Provide an opportunity for the resident to express thoughts and feelings 1. Listen to the resident's comments 2. Allow enough time for communication c. Observe non-verbal behavior during interaction 1. Body position 2. Facial expression d. Listen carefully to expressed thoughts and feelings and to the tone of voice 1. Express acceptance of the resident 2. Be an attentive, sympathetic listener e. Encourage focus on the resident's concerns 1. Don't criticize other staff 2. Be responsive to the resident's needs f. Avoid gossip g. Assist the resident with personal communication by reporting the resident's			

	wishes to the charge nurse h. Control your emotions i. Develop empathy j. Be courteous k. Be gentle			
3. Identify factors which promote good interpersonal relationships with the resident; resident's family and friends	3. Factors which promote good interpersonal relationships a. Kindness b. Patience c. Listening to family members d. Non-interference in private family business			
4. Identify factors which may block effective communication between the resident and their family and friends	4. Factors which block effective communication a. The family's feeling of guilt or grief at institutionalizing the resident b. The resident's feelings of anger, guilt at being institutionalized c. The resident, resident's friends, and/or family's concerns including money, provision of care, the future, separation from loved ones, etc. d. Using unfamiliar language e. Cultural differences f. Changing subject g. Interrupting when the other person is speaking h. Giving your opinion when not asked i. Excessive talking j. Continuing to work or do other tasks while others are talking k. Giving pat answers as "don't worry" l. Illness m. Stressed about something else			

5. Identify factors which promote effective communication between the Dining Assistant and the nurse	5. Factors which promote effective communication a. Report the following information promptly to the nurse 1) Information about a resident that could result in their harm 2) Changes in the resident's behavior or physical condition 3) Personal information about the Dining Assistant which could interfere with their performance 4) Complaints from residents and/or visitors			

Standard II.2 Communicating and Interacting with Residents with Impairments

Dining Assistants must be prepared to communicate and interact effectively with residents who have a variety of impairments. The Dining Assistant Training Course shall contain subject matter and classroom demonstration of techniques which are appropriate for communication and interaction with residents who are:

-Vision, hearing, speech and/or physically impaired;
-Confused, depressed, agitated or restless; and
-Withdrawn or combative.

Objective	Current Curriculum	Hours Class	Title of Teacher	Medthod of Evaluation Teaching Method
The Dining Assistant trainee will be able to: 1. Define impairment. 2. Describe appropriate communication techniques for vision, hearing, speech and/or physically impaired residents	1. Definition of impairment 2. Methods to overcome communication barriers with residents a. Vision impaired 1. Keep eyeglasses clean and in place 2. Keep environment clear and free of clutter 3. Do not rearrange the environment 4. Put everything away where it was found 5. Introduce self and offer explanation of what you are about to do when entering the room 6. Always tell the resident what you are doing while caring for him 7. Tell resident when you are going to leave the room 8. Talk directly to the resident and not to his companion 9. Lighting of a room is important 10. Position yourself directly in front of the			**Teaching Alert** Use demonstration, modeling and role play techniques. Describe alternative to oral communications such as communication boards, cards, gestures, modeling Don't change anything in resident's environment, without checking with nurse

	person –face to face for conversation 11. When serving the meal, arrange food and utensils on the tray. Try using the positions of the clock for arrangement and tell resident where food items are located 12. Remember a guide dog is not a pet but rather a working dog, do not distract or play with the dog b. Hearing Impaired 1. Face the resident who is hearing impaired and on the same level whenever possible 2. The light should shine on the speaker's face rather than in the eyes of the hearing impaired 3. Speak in a normal voice without shouting or elaborately mouthing words. Words spoken slowly are clearer than those shouted or exaggerated 4. Keep hands away from your face while talking 5. Do not chew gum, smoke, or eat while speaking 6. Remember that everyone, even the hearing impaired, hear less when tired or ill 7. Avoid lengthy sentences or sudden topic changes 8. The hearing impaired may be very sensitive to loud sounds, even though the individual does not hear faint ones 9. Turn the television, radio, or other sources of noise volume down if			

	necessary to be heard 10. If the resident wears hearing aids, check for placement of hearing aids. 11. Stand or sit on the side of the better ear 12. Say things in a different way if the resident does not appear to understand 13. Provide aids such as picture cards, slates and notepad c. Speech-impaired 1. Listen and give the resident your full attention 2. Ask the resident questions to which you know the answer so you can become familiar with the sound of their speech 3. Watch the resident's lip movement 4. Watch the resident's facial expressions for clues to the meaning of their communication 5. Ask the resident to write down their messages if necessary 6. Ask the resident to repeat as needed 7. Repeat what you think the message is for clarification 8. Provide aids to communication such as picture cards, slates, notepad 9. Be patient; it is important to encourage resident to speak 10. If resident wears dentures, check to see if they are in place d. Physically Impaired 1. Verify the physical impairment with the nurse 2. Listen carefully and patiently to resident 3. Speak directly to the resident 4. Be sensitive to non-verbal cues the resident may give			

	5. Avoid giving own non-verbal cues of impatience, annoyance, or dislike 6. Be patient, allow extra time			**Teaching Alert** Consult with nurse before approaching residents not known to Dining Assistant
3. Identify techniques to communicate with the confused , withdrawn, depressed, restless, agitated or combative resident	**3.** a. Methods of communicating with the confused, withdrawn, depressed, restless, agitated or combative resident 1. Use simple sentences 2. Identify self and call resident by name 3. Communicate at eye level 4. Maintain a pleasant and calm facial expression 5. Place a hand on their arm if this does not cause agitation or anxiety 6. Make sure resident can hear you 7. Use a lower tone of voice 8. Give resident one question at a time and time to respond 9. Ask resident to do one thing at a time 10. May eventually need to use pictures; point, and touch, objects 11. Respect the residents' feelings 12. Do not over explain things b. Communicating with the withdrawn and depressed patient/resident 1. Spend (quality goal oriented) time with the resident 2. Be a good listener 3. Be patient, allow resident time to speak 4. Do not act in a pitying way 5. Report any complaint to nurse for evaluation 6. Provide a safe environment c. Communicating with the restless, agitated or combative resident			**Teaching Tip** Explain that behavior may be related to pain and other conditions

	1. Stay calm and use a low-pitch tone of voice 2. Avoid agitation with the following approach: a. Show a positive attitude b. Remain calm c. Stay flexible d. Be patient e. Stay neutral 3. Remember emotions are contagious between you and the resident 4. Do not use gestures that could startle or frighten the resident 5. Stay at a safe distance from the resident and respect need for personal space 6. Do not confront or accuse the resident of wrong-doing 7. Do not argue or try to reason with the resident 8. Ask for assistance to have resident taken away from the triggering event or person to a quiet, controlled space 9. Offer reassurance through gentle touch and express support when the resident can hear you			
4. Identify techniques to communicate with non-English speaking residents	4. Communicating with non-English speaking residents a. Speak slowly and clearly b. Keep messages short and simple c. Be alert for words the resident may understand d. Use gestures, pictures, photos e. Seek the assistance of family members, friends, staff, other residents who speak the resident's first language			**Teaching Alert** Learn or have cards with written basic words available in the resident's language

	f. Be patient and calm g. Avoid using medical terms, abbreviations, slang h. Be alert for signs the resident is pretending to understand			

Standard III.1 Infection Control

The Dining Assistant Training Course subject matter shall contain the basics of infection control, and factors which promote the growth and spread of pathogenic microorganisms.

Objective	Content Curriculum	Hours Class	Title of Teacher	Method of Evaluation Teaching Method
The Dining Assistant trainee will be able to: 1. Identify the basic principle of infection control	1. Basic principle of infection control a. To reduce the number and hinder the transfer of disease producing micro-organisms from one person to another or from one place to another			. **Teaching Alert** Utilizes a current text, workbook, and/or handouts for examples of practices.
2. Define terms related to infection control	2. Definitions related to infection control: a. Micro-organisms b. Contamination c. Pathogens d. Carrier e. Nosocomial infection f. Infection g. Clean			
3. Identify reasons why infection prevention and control are important	3. The importance of infection control and prevention a. Micro-organisms are always present in the environment. Some of these micro-organisms can cause disease (pathogens) 1. Names of possible pathogens include: bacteria, streptococcus, staphylococcus, and viruses. b. Elderly people and individuals with chronic diseases are often more susceptible to pathogens c. Reducing the number of micro-organisms and hindering their transfer increases the safety of the environment			**Teaching Alert** You may wish to ask trainees to identify and name micro-organisms. **Teaching Alert** Refer to current pathogens (flu virus, etc)

	d. The actions of the healthcare team are to protect residents, family and staff from infection			**Teaching Alert**
4. Identify ways pathogenic microorganisms are spread	4. Factors which promote the spread of pathogenic micro-organisms a. Lack of hand washing b. Use of artificial nails c. Direct contact with body secretions: 1) Blood 2) Urine 3) Feces 4) Semen 5) Mucous 6) Vaginal secretions/excretions 7) Wound drainage 8) Any other secretion/excretion of the human body except oral secretions and sputum that do not contain blood d. Indirect contact: Touching objects, dishes, linens, instruments, equipment, tubing, etc., which may contain body secretions e. Through the air by droplets spread from coughing or talking, or by dust particles in the air f. Through a vehicle: Contaminated food, drugs, water, or blood g. Vector borne – Insect bites or stings			You may want to give examples of specific conditions to illustrate modes of transmission. **Clinical Alert** The Dining Assistant trainee should understand the micro-organisms are spread from resident to resident, staff to resident, staff to staff and resident to staff. **Integrate Into Future Clinical Experience** Emphasize these practices throughout the course. Refer to OAC 3717-01-02.1 (A)(1)(2)
5. Identify diseases which are transmissible through food	5. Diseases that are transmissible through food: a. Salmonella ssp. b. Shigella ssp. c. Escherichia coli 0157:H7 d. Hepatitis A virus e. Entamoeba histolytica			

	f. Campylobacter ssp. g. Vibrio cholerae h. Cryptosporidium i. Cyclospora j. Giardia k. Versinia			
6. Identify symptoms caused by illness, infection or other source that can be related to food borne illnesses	6. Symptoms of illness, infection or other source include: a. Diarrhea b. Fever c. Vomiting d. Jaundice e. Sore throat f. Lesion containing pus or infected wound that is open or draining			

Standard III.2 Practices Which Prevent the Growth and Spread of Pathogenic Micro-organisms

The key to preventing infection is to know and practice techniques which prevent pathogenic micro-organisms from growing and spreading. The Dining Assistant Training Course shall contain subject matter and demonstrations of practices which prevent the growth and spread of pathogenic micro-organisms including:

-Proper hand washing technique;
-Methods to control or eliminate pathogenic micro-organisms on supplies and equipment; and
-The concepts of clean, and contaminated as applied to micro-organisms.

Objective	Content Curriculum	Hours Class	Title of Teacher	Method of Evaluation Teaching Model
The Dining Assistant trainee will be able to: 1.Identify practices which hinder the spread of infection 2.Identify method used to control or eliminate micro-organisms on supplies and equipment 3.Discuss reasons for correct hand washing	1.Practices which hinder the spread of infection a. Washing your hands b. Disposing of contaminated articles correctly c. Keeping yourself and the resident clean 2. Methods of controlling microorganisms a. Disinfect b. Sterilize 3. Reasons for correct hand washing a. Everything you touch has micro-organisms on it b. In your work you use your hands constantly c. Your hands carry micro-organisms from resident to resident and from resident to you. Washing your hands will help prevent this transfer of micro-organisms d. Hand washing is the first line of defense against spreading micro-organisms			**Teaching Alert:** Hand washing is not specifically mentioned in other parts of the guidelines which describes personal care products. The instructor should re-emphasize the need for hand washing and other infection control practices throughout the course Demonstrate hand washing and practice hand washing technique Emphasize keeping clean and dirty items separate Example: Transport clean trays with cover Don't place used trays with clean trays

4. Demonstrate effective hand washing techniques	4. Hand washing routine a. Wash your hands before and after contact with each resident b. Use enough soap to produce adequate lather c. Rub soap vigorously over the surface of your hands for 10-15 seconds (including fingers and wrists) to help remove micro-organisms d. Hold your hands lower than your elbows while washing e. Rinse hands thoroughly under running water with fingertips pointed downward f. Dry your hands with clean paper towels g. Use clean dry paper towels to turn off the faucet h. If hand washing facilities are not readily available use a waterless alcohol base product.			Refer to OAC 3701-17-11 Infection Control Refer to Skill Check List
5.State the purpose of standard precautions	5.Standard Precautions - Concepts and Terminology of Standard Precautions as identified in the OAC: Each LTCF shall establish and implement appropriate written policies and procedures to assure safe, sanitary and comfortable environment for residents and to control the development and transmission of infections and disease.			
6.Demonstrate standard precaution techniques.	6. Each LTCF shall use standard precautions in caring for all patients and residents a. At a minimum, individuals working in a LTCF shall wash their hands immediately after patient contact, after removing gloves, after handling potentially contaminated objects and before caring for another patient or resident			Discuss the proper use of gloves during the feeding process Refer to skill check list on gloves

	b. Place articles contaminated with body substances (including linens) in a container impervious to moisture. Reusable items contaminated with body substances shall be bagged, then sent for decontamination. Wear gloves for contact with any patient or resident's body substances, non-intact skin or mucous membranes. The gloves shall be changed before contact with another patient or resident and if contaminated.			

Standard IV.1 General Safety Practices and Procedures

The residents of the long-term care facility are largely dependent on the facility staff for the maintenance of a safe environment. Many residents are wheelchair bound, have vision or balance problems and may have problems with confusion. The Dining Assistant Training Course shall contain subject matter which:

-Presents reasons why safety is important in the long-term care facility;
-Demonstrates techniques and precautions Dining Assistants can take to prevent residents from falling;
-Demonstrates techniques aimed at preventing residents from being burned by hot liquids etc.; and
-Describes or demonstrates techniques to prevent residents from choking or ingesting harmful substances and the procedures to use should a resident choke or ingest a harmful substance.

Objective	Content Curriculum	Hours Class	Title of Teacher	Method of Evaluation Teaching Method
The Dining Assistant trainee will be able to: 1. Identify safety concerns in LTCFs 2. Identify safety pre-cautions which help to prevent residents from falling 3. Identify precautions the Dining Assistant should take to prevent residents from being burned	1. Reasons for safety precautions for the elderly a. Mental confusion: Alzheimer's and dementia b. Impaired mobility c. Diminished senses: sight, hearing, touch, taste, smell 2. Safety precautions the Dining Assistant should know to help residents prevent falls a. Wipe up all liquid spills immediately b. Notify nurse if resident needs to be repositioned in bed, chair or wheelchair c. Keep traffic areas clear of objects and furniture d. Observe the resident frequently e. Make sure the residents shoe laces are tied 3. Safety precautions the Dining Assistant should know to prevent the residents from being burned a. Assist a resident when they are given hot liquids and/or foods to eat or drink (especially if resident is confused or has tremors). b. Monitor carefully any equipment which produces			**Teaching Alert** **(GIVE DEFINITIONS) of Alzheimer's and Dementia** Use a current text, or workbook and/or handouts.

	heat when in use (i.e. plate warmers). Residents sometimes have decreased sensation and may not feel that the skin is being burned.			
4. Identify the safety precautions the Dining Assistant should take to help prevent the resident from choking	4. Safety precautions that Dining Assistant should know to help prevent a resident from choking a. Make sure the resident received the accurate and appropriate diet b. Check with the nurse before changing or offering foods that are not on the tray c Make sure food is cut or chopped in small enough pieces for the resident to swallow d. Notify the nurse if the resident is not positioned properly for feeding e. Alternate solid foods and liquids f. Feed the resident slowly, allowing time for the resident to chew and swallow g. Stop feeding the resident immediately if any problems arise, notify the nurse.			**Teaching Alert** Use demonstration, modeling and role-playing techniques to describe proper positioning of resident in chair, wheelchair and bed
5. Demonstrate the steps of the Abdominal Thrust procedure (Heimlich Maneuver)	5. Abdominal Thrust/Heimlich Maneuver a. Know universal signs of choking b. Do not leave victim; notify charge nurse immediately; perform abdominal thrusts. **Key points to include:** a. Hand placement b. Stance behind person c. Never practice on a LIVE person due to injury to ribs, abdominal organs.			Handout and demonstrate first aid for choking Refer to skills check list
6. Identify measures the Dining Assistant should take to prevent ingestion of harmful substances	6. Precautions the Dining Assistant should take to help prevent ingestion of harmful substances by residents. a. Never leave potentially poisonous or harmful substances in the residents' reach.			

	b. Remove styrofoam and plastic wrap from the trays of confused residents c. Monitor the placement of house plants, leaves can be poisonous.			
7. Identify measures the Dining Assistant should take should a resident ingest a harmful substance	7. Measures to take should a resident ingest a harmful substance a. Notify nurse immediately b. Identify the ingested substance, if possible			Describe methods to prevent elopement
8. Identify measures to protect resident from elopement, and other potential harm	8. A. Elopement 1. Elopement: wandering from a supervised environment 2. Always know where the resident is 3. Follow the facilities policy and procedures for missing residents 4. Report to the nurse when a resident is missing B. USE OF ALARMS To warn individuals of a pending harm 1. Facility wide alarms a. Fire b. Tornado 2. Personal protective alarms 3. When alarm is heard, investigate where and why and act.			Review facility policy & procedure re: elopement Always follow facility policy and procedures regarding alarms

Standard V.1 The Residents' Rights

The Dining Assistant must be familiar with the specific rights enumerated by the Ohio Resident Bill of Rights for residents of long-term care facilities. The Dining Assistant Training Course shall contain a discussion of the resident's rights contained in the Ohio Resident Bill of Rights. A copy of those rights shall be available for the trainee's review.

Objective	Content Curriculum	Hours Class	Title of Teacher	Method of Evaluation Teaching Method
1. Identify legal rights of the resident contained in the Ohio Resident Bill of Rights (ORBR)	1. Resident's Rights a. Residents of LTCFs have legal rights. These are enumerated in the ORBR of which must be posted in the LTCF. A copy of these rights must be read and signed by each resident and/or legal representative and included in the chart b. Types of rights which are found in the ORBR of which the Dining Assistant should be aware c. Ways to respect residents' rights 1) Know the ORBR 2) Encourage residents to exercise their rights 3) Report infractions to the nurse			**Teaching Alert** The State of Ohio Resident Bill of Rights (ORBR) should be used as an example Refer back to statement from page 17 – Topic V There is an inherent tension between the need for protection because of impaired function or status and the protection of the resident's autonomy.

Standard VI.1 Nutrition and Fluid Needs

Nutrition and fluid needs are essential to maintain and/or restore a resident's sense of well-being. The Dining Assistant program shall contain content which:

-Discusses factors that affect the nutritional state of the resident;
-Explains and provides examples of modified diets;

Objective	Content Curriculum	Hours Class	Hours Clinical	Title of Teacher	Method of Evaluation Teaching Method
The Dining Assistant trainee will be able to: 1. Discuss factors which affect the nutritional state of the resident	1. Factors which affect the nutritional state of the elderly a. Tooth loss, poorly fitting dentures and a sore mouth b. Loss of muscle control over part of the mouth and throat as the result of a stroke c. Diminished hand and arm muscle strength or control from paralysis or tremor d. Diminished sense of smell, taste, and vision e. Decreased activity resulting in a decreased requirement for calories f. Serving foods the resident may not like				Discuss culture and religious influences **Teaching Alert**
2. Name examples of a modified diet	2. Modified diets a. Low sodium and salt restricted 1) Contains limited amounts of food containing sodium (Na) and salt. No salt used in cooking. No salt at the table or on the tray. Salt substitutions may be used by some residents				Some dietary departments prepare all food without added salt. Explain the use of dietary tray cards

	2) Used for residents with fluid retention, heart or kidney disease b. Diabetic diet 1) Contains a balance of carbohydrates, protein, and fat according to individual needs. Designed to be as similar to regular diet as possible 2) Used for residents with diabetes. Food intake is balanced with the insulin need. Residents should eat only food which is part of the intake and should be encouraged to eat all the food served to them c. Other diets as needed 1) Soft 2) Pureed				Review the importance of dietary control. Explain that specific foods are not forbidden to diabetic residents, but that the total intake must be balanced **Teaching Alert** Report intake deficits to the charge nurse so appropriate substitutions may be made if necessary Discuss appearance of pureed and common types of pureed foods
3. Identify the Dining Assistant's responsibility for residents who require a therapeutic diet	3. A resident may require a therapeutic diet, which is prescribed by the physician, and planned by the dietitian a. Do not interchange food from one resident's tray to another b. Report resident's request for diet substitutions to the nurse				
4. Describe the role of the dietary department in providing nutrition for the resident	4. Responsibilities of dietary in providing nutrition for the resident a. It is the responsibility of the dietary or food service dept. to plan the meals for all residents b. The diet should be balanced and have adequate nutrients to meet the				

	resident's needs c. The food should be prepared and presented in a form which the resident can manage. d. The food should be presented in a manner which is visually appealing e. Infection control procedures need to be followed f. Tray cards provided by dietary 1) identifies type of diet (e.g. regular, soft, puree, low sodium, etc…) 2) identifies likes and dislikes 3) identifies food allergies				Demonstrate the use of assistive devices in the clinical setting **Teaching Alert** Reinforce the need for hand-washing to maintain cleanliness.
5. Identify the importance of adequate hydration	5. Importance of adequate liquid intake: a. Helps prevent constipation and urinary incontinence b. Helps dilute wastes and flush out urinary system c. Helps maintain skin turgor d. May help to prevent confusion				Instructor may choose to invite a dietitian to speak to class on the responsibility of dietary to meet the resident's nutrition needs.
6. Describe methods to encourage fluid intake	6. Methods for adequate fluid intake a. Offer water to the resident each time you feed a resident b. Be aware of resident preferences for various fluids (juices, water, milk) c. Some residents prefer fluids without ice d. Snacks of juice and other fluids may be distributed between meals e. To encourage a resident to drink fluids, one should offer small amounts frequently				**Teaching Alert** Use current textbook, workbook and/or handouts as a reference.

Standard VII.1 Mealtime

Many residents of long-term care facilities will need assistance at mealtime. The Dining Assistant Training Course shall discuss ways to promote a positive atmosphere at mealtime by:

-Identifying devices and techniques to assist a resident to maintain independence while eating;
-Identifying proper techniques for feeding residents;
-Discussing ways to identify and demonstrate ways to intervene with a choking victim;
-Discusses why a resident needs to receive a therapeutic diet;
-Explains the role of the dietary department in providing nutrition for the resident; and
-Discusses the importance of hydration and how to encourage fluid intake.

Objective	Content Curriculum	Hours Class	Hours Clinical	Title of Teacher	Method of Evaluation Teaching Method
The Dining Assistant trainee will be able to: 1. Discuss how to promote a positive atmosphere at mealtime	1. Promote a positive atmosphere at mealtime. This is probably the most important social function of the resident's day. Dignity must be preserved and independence encouraged a. The resident should be physically comfortable. (Positioning, empty bladder, dry clothing, etc.) Ask for nursing assistance for positioning b. The surroundings should be pleasant and comfortable c. The social aspect of mealtime should be considered d. Whenever possible, the Dining Assistant should express positive attitudes regarding the mealtime experience e. Have conversation with resident during feeding				**Teaching Alert** Use current textbook, workbooks and/or handouts as resources.

2. Identify devices and techniques which may be used to help the resident maintain independence while eating	2. Devices and techniques to help resident with eating a. Provide food in a manageable form (i.e., bread is buttered, meat cut only when necessary) b. Visually impaired residents may require assistance in locating food and utensils. The numbers of a clock are used to help visually impaired residents c. Special eating devices, such as a plate guard or adapted spoon to aid handicapped resident in self-feeding may be used				**Teaching Alert** Describe how to assist visually impaired residents. An occupational therapist or dietitian may be able to provide examples of adaptive eating devices. Provide adaptive devices.
3. Describe and demonstrate how to feed a resident	3. Feeding a resident a. Allow time for prayer if requested b. Sit facing the resident c. Check items on resident's tray with the dietary card d. Help prevent choking by maintaining proper body alignment e. May need to protect the resident's clothing with napkin, clothing protector or towel f. Tell the resident what food and fluids are on the tray g. Serve food & fluids in the order the person prefers h. Offer fluids during the meal; fluids help resident chew and swallow i. Offer to wipe the resident's hands and face during the meal as needed j. Spoons should be used because they are less likely to cause injury and				**Teaching Alert** The students may role play this experience **Skills check list for feeding** **Skill check list for passing trays** Student should adapt facing the resident based upon the resident's physical needs

	should be no more than 1/3 full k. Encourage the resident to help by having them hold finger foods l. Season foods according to the resident's preference but not in opposition to prescribed diets m. Maintain separate flavors of foods. Do not stir all foods together before feeding n. Identify the foods as you feed them to the resident: "This is mashed potatoes. Now, I'll give you some meatloaf." o. Feed hot foods and liquids cautiously to prevent injuring the resident p. Allow adequate time for the resident to chew thoroughly q. Alternate liquids and solids as the resident prefers r. Watch carefully to see that the resident swallows s. Cut food into bite size pieces, per resident choice t. Open cartons/condiment packs for the residents if they are unable to do so u. Observe, report and record food and fluid intake as directed by nurse v. Use a feeding cup to give liquids to a resident who cannot use a straw or cup effectively w. Notify nurse if resident refuses to eat				Discuss way to identify whether food is too hot or has become too cool **Teaching Alert** Residents with dementia may be distracted during meals, difficult to sit long enough to eat meal or may throw or spit food

4. State how to identify a choking victim	4. How to identify and intervene with a choking victim a. Cannot speak b. Cannot breathe, gasps for air c. Turns blue d. Collapses if obstruction is not removed e. Intervention: 1) Get help immediately – time is of the utmost importance 2) Perform the Heimlich Maneuver				**Teaching Alert** Follow facility guidelines for monitoring food and fluid intake **Teaching Alert** **Show picture of choking victim** **Review the Heimlich maneuver.** **See Standard IV.1**