ADULT DAY STAY: FACT SHEET



Mealtimes and Feeding Techniques for Adult Day Stay Participants

INTRODUCTION

The effects of disabilities and aging can make mealtime frustrating for many adult day stay participants. Focusing on the mealtime experience can help create a positive experience. Implementing measures that emphasize respect, promote independence, and encourage eating can make mealtimes more pleasurable for adults. Here are some good practices for promoting positive experiences at mealtimes.

APPLICATION

Create a Pleasant Dining Atmosphere

- Use light, solid colors in the dining room to make it inviting.
- Use soft lighting without glare or shadows.
- Use bright, solid colors for placemats, napkins, and dishes because they are easier to see.
- To create a home-like setting, use a simple centerpiece and plates rather than trays.
- Avoid clutter and keep the noise to a minimum.
- Maintain a comfortable room temperature.
- When possible, eat meals with the participants through family style meal service.

Maintain Proper Positioning

Correct positioning is the key to maximizing eating independence, and it is essential for participants with swallowing difficulties or impaired motor control.

- A standard dining chair with armrests that slide under the table provides the best eating position. If a participant uses a wheelchair, adjust the table's elevation to allow the wheelchair arm supports to roll under the table.
- Lock wheelchairs into position at meals.
- Ensure participants are sitting up straight with the head upright and tilted slightly forward.
- Adjust chairs so that feet can easily rest on the floor or foot supports if needed.
- Ask a rehabilitation therapist to suggest support aids for participants with poor seating balance or neck control.



Provide Special Foods and Eating Aids

- Have a registered dietitian (RD) and rehabilitation therapist observe the eating participants.
- Provide any special diets or dietary preferences the RD or medical doctor recommends, such as consistency-modified diets.
- When appropriate, involve the participant and caregivers in choosing a food texture acceptable to the participant.
- Provide any eating aids the rehabilitation therapist recommends, such as a nose cut-out cup or a weighted plate.

Know the Verbal Cues

Some participants may need verbal cueing to identify the steps in the eating process, such as picking up a utensil or scooping the food. Here are some good practices for verbal cues.

- Address the participant by their last name and title, such as "Mrs. Lyons."
- Speak in a calm, soothing voice, and use words appropriate for adults.
- Maintain eye contact while speaking.
- Use brief, simple directions. Avoid medical or other unfamiliar jargon.
- Talk the participant through each step and repeat all the directions at each mealtime.
- Offer choices by asking yes/no questions or other two-choice questions.
- Redirect or restate the cue if the participant does not understand what to do.
- Be patient and do not expect immediate results.
- · Give praise freely.

Know the Physical Cues

Some participants can self-feed but need help to keep their hands steady or to hold a utensil.

- If a participant cannot hold a utensil, place your hand over the participant's hand to provide support through all the eating steps.
- If a participant can hold a utensil, provide support at the wrist or elbow.
- Use verbal cues at the same time as physical cues to reinforce the eating steps.
- Do not provide more assistance than is needed. The goal is to gradually decrease the physical support while the participant is increasing strength and improving eating skills, thus enabling greater independence.

Use the Team Approach to Identify and Solve Mealtime Problems

- At mealtimes, have day stay staff sit with participants who struggle to eat.
- Have the staff offer verbal, physical, and emotional support to participants to increase food intake. By working together, you will improve the quality of care provided and the quality of life for the participant.

REFERENCES

National Institute of Aging. (2017). *Tips for improving communication with older patients*. <u>www.nia.nih.</u> <u>gov/health/tips-improving-communication-older-patients</u>

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