

## What is a Main Diet and what is a Modification?

The main diet bank is the list of priority diets that are able to be selected for a patient to enable the kitchen to prepare the patient's meal. Only one selection can be made from this list for each patient.

The modification list provides a list of modifications that can be made to any main diet. Multiple modifications can be selected for any patient.

The contents of the main diet bank and the modifications bank should be decided by the multidisciplinary team. The diet banks available in TrendCare are listed below.

**Main Diet:** A list of main diets – only one can be selected, e.g. Australia / New Zealand; full diet, diabetic, vegetarian, nil by mouth, clear fluids, etc. Asia; Chinese, Halal, Indian, Western, vegetarian, etc.

**Diet Modifications:** A list of modifications to the main diet – users may make multiple selections from this list, e.g. soft, thickened fluids, puree, low salt, low fat, high protein, etc.

**Diet Additive/Supplements:** Additives/supplements clinically prescribed /ordered by Allied Health or Medical staff. Multiple selections may be made.

**Diet Infant Formulas:** All Infant Formulas available. Multiple selections may be made.

**Diet Comments:** Regularly used diet comments. Usually in relation to tray setup, special cutlery requirements etc. Multiple selections can be made.

**Diet Mid Meals:** Special clinical Mid Meal requirements. Multiple selections can be made, e.g. Diabetic snacks, high protein drinks, etc.

**Food Allergies:** A list of common food allergies – multiple selections can be made, e.g. Nuts, dairy products, shellfish, etc.

**What is the cut off time / shift for changes to a patient's diet when running the Ward Diet Order Form or Ward Diet Summary Report.**

The cut off time for reviewing the patient diets for each meal is determined by the kitchen. A final review for each meal is made as follows:

- Breakfast – on the night duty screen
- Lunch – on the day shift screen
- Evening Meal – on the evening shift screen

## Where in the world is TC?



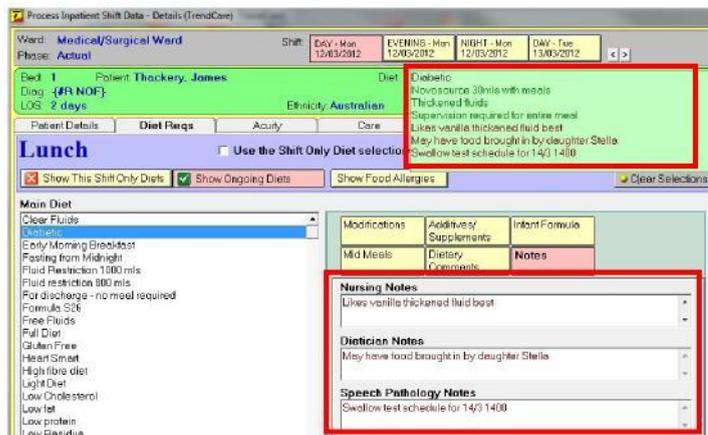
TC travels the world again. Pictured here at the Hard Rock Cafe in Vegas. Photo supplied by Logan Hospital, Brisbane - Australia

This month's Flyer is a refresher of the Diet Module, its related functionality and support issues that have arisen since the Version 3.4 upgrade.

It is recommended that the TrendCare diet banks are reviewed by a multidisciplinary team which includes representatives from the kitchen, dieticians, speech therapists and nursing.

Nursing staff should check the diet order at the time they complete their acuity predictions and actuals. The current diet can be viewed by hovering over "Diet" at the top of the acuity screen. Changes can be made by clicking on the "Diet" tab.

Alternatively the diet orders for all patients can be reviewed and changed by the multidisciplinary team via the allocate patient diet screen.



Diet Definitions and Diet Ordering Policies can be attached by hyperlink to the Diet Definition button at the bottom of the diet ordering screen.

## FREQUENTLY ASKED QUESTIONS

**Where a patient is transferred from one ward to another requiring a change to their patient type, does the diet need to be re-entered?**

No. All diets details are retained with the patient record as they are transferred around the hospital.

If the patient is discharged and readmitted, the diet is lost. This may occur when patients are clinically transferred to Rehab but administratively discharged and readmitted, or when an administrative discharge and admission is performed during a patient's episode of care (SNAP). TrendCare is currently working on a solution to retain the diet in this situation.

**Does changing the diet selection from 'Mandatory' to 'Remind' have any unexpected impact on patient's diets?**

Options in hospital maintenance enable the hospital to ensure that: i. A warning message is displayed if the patient doesn't have a diet order, or, ii. The user is forced to order a diet before being able to leave the acuity screen. The positive impact achieved by using these options is that all patients have a diet ordered. A routine checking of diets at the time of predicting and actualising acuity will ensure that all diets remain updated.