NUTRITIONAL ISSUES IN LONG-TERM CARE: PRE-TEST

1. The medical record is inaccurate about which information related to nutrition?
a) Feeding assistance care delivery during meals □ b) Residents' daily food and fluid intake □ c) Oral liquid nutritional supplement delivery □ d) a,b, and c □
e) Weight loss episodes
2. Rank the following interventions for weight loss from 1 (most preferable) to 6 (least preferable) according to family members of long-term care residents:
Oral liquid nutritional supplements (e.g., Resource, High Protein Nourishment) Snack foods/fluids between meals or multiple small meals per day Quality staff assistance to eat during meals Medications to stimulate appetite (e.g., Megace) Attractive food choices
Dining environment that meets resident's preference
3. Most long-term care residents do not receive enough staff assistance to encourage an adequate amount of food and fluid intake during meals: True □ False □
4. Long-term care residents are likely to receive the <u>least</u> amount of staff assistance to eat during which meal? Breakfast Lunch Dinner
5. Which residents are at higher risk for poor oral intake and weight loss?
a) Those rated by staff on the MDS as requiring extensive or complete physical assistance to eat \Box b) Those rated on the MDS as independent or requiring supervision or limited assistance only \Box
6. What resident : staff ratio is necessary in most long-term care facilities to provide quality feeding assistance during meals to all residents who need it?
a) 5 residents to 1 staff b) 7 residents to 1 staff c) 9 residents to 1 staff d) 10 residents to 1 staff
7. Most (80% or more) long-term care residents will eat significantly more of their meals if nursing staff spends enough time providing help and encouragement to eat: True □ False □
8. If a resident does not eat an adequate amount of meals with 20 minutes of staff assistance, what should be tried next to prevent weight loss?
a) Offer food and fluid snack items (e.g., juice, pudding) multiple times per day between meals \Box b) Provide oral liquid nutritional supplements (e.g., Resource) with or immediately after the meal \Box c) Order an appetite stimulant medication (e.g., Megace) \Box d) Some combination of a, b, and c \Box

	What is the best way to determine a resident's preference for where they like to eat ., dining room or in their own room)?
	a) Ask the family \Box b) Ask resident on two separate occasions to see if s/he reports the same preference \Box c) Both a and b \Box d) Encourage resident to eat in the dining room, or other group setting, for a few days then ask \Box
10.	A resident at risk for weight loss should <u>not</u> be allowed to eat most meals in their room because:
	a) S/he will receive inadequate assistance to eat unless there is a large number of staff b) S/he will receive little to no social interaction c) S/he may prefer to stay in their room because of depression d) All of the above (answers a,b, and c) e) None of the above; a resident's preference should be respected in daily care, regardless
	Rank the following measures in order of importance from 1 (most important) to 4 (least important) successful quality improvement program for weight loss:
	Prevalence of weight loss (5% or more in 30 days; 10% or more in 180 days) Quality of feeding assistance provided by staff Percentage of foods and fluids consumed by residents
12.	What is the major problem with supervisors watching staff care provision during meals?
	a) Nurse aide staff will provide residents with better assistance to eat when they are being watched □ b) Residents will be bothered by the observations □ c) It requires too much time to observe enough staff/residents to inform quality conclusions □ d) There are no major problems with supervisors conducting observations of mealtime care □
13.	How frequently should a supervisor observe mealtime feeding assistance to maintain quality care
	a) Daily b) Once per week c) Twice per week d) Once per month