State Regulations Pertaining to Paid Feeding Assistants

Note: This document is arranged alphabetically by State. To move easily from State to State, click the “Bookmark” tab on the Acrobat navigation column to the left of the PDF document. This will open a Table of Contents for the document. The relevant federal regulations are at the end of the PDF.

ALABAMA

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420-5-10-.12 Dietary Services.

...(9) Feeding Assistant Program Requirements.

(a) Facility staff who are not health care personnel, (the facility administrator, activity staff, clerical staff, laundry and housekeeping staff or other), can be used as feeding assistants upon successful completion of an approved training program.

1. Volunteers and family members may assist residents with feeding and drinking, without completing an approved training program. A feeding assistant shall only assist residents to eat or drink who have no complicated feeding problems and who have no known behaviors at meal time. If a resident is determined, by the facility, to meet the criteria of having a feeding assistant, then the facility must specify that the resident will be assisted by a feeding assistant on the care plan.

(b) Examples of complicated feeding problems include: difficulty swallowing, recurrent lung aspirations and tube or parenteral/IV feedings. Residents with a clinical condition, such as the conditions listed above, require the employee providing feeding or hydration services to be a licensed health care professional or certified nurse aide.

(c) The facility must base resident selection on the charge nurse’s assessment and the resident’s latest assessment and plan of care. A feeding assistant must work under the direct supervision of a registered nurse or licensed practical nurse in a dining room or other common area.

(d) The feeding assistant is not permitted to perform other nursing or nursing-related duties (for example, measuring or recording output, transferring and toileting). In an emergency, a feeding assistant must immediately call a supervisory nurse on the resident call system, or other appropriate means of emergency notification.

(e) Feeding Assistant Definition. Paid feeding assistant means a person who does not meet the definition of health care personnel and who is paid by a nursing home, to assist residents who have no feeding complications with the activities of eating and drinking. The feeding assistant is not permitted to provide any other nursing or nursing related service. Paid feeding assistants must be at least sixteen years old. A feeding assistant must work under the direct supervision of a registered nurse or licensed practical nurse in a dining room or other common area.
1. Nurse aides who are on the nurse aide abuse register and who have been disqualified from working as a nurse aide may not work as a feeding assistant. A feeding assistant does not include a person who is a:

(i) Licensed health professional or registered dietitian;

(ii) Volunteers without money compensation; or families. (iii) Certified nurse aide.

(f) Feeding Assistant Training Requirements.

(1) Feeding assistant training programs must require enrolled individuals to successfully complete an approved training program, which includes the following federally-mandated topics, covered during nine (9) hours of classroom instruction and hands on training.

(i) Feeding techniques
(ii) Assistance with feeding and hydration
(iii) Communication and interpersonal skills
(iv) Appropriate responses to resident behavior
(v) Safety and emergency procedures, including the Heimlich maneuver
(vi) Infection control
(vii) Resident rights
(viii) Recognizing changes in residents that are inconsistent with their normal behaviors and the importance of reporting these changes to the supervisory nurse
(ix) Abuse, neglect and misappropriation of resident property including reporting requirements
(x) Dementia

2. Training must include an experienced staff member demonstrating the correct way to feed a resident who requires minimal assistance with feeding including appropriate cueing, moderate assistance with feeding and a resident who requires total assistance with feeding.

3. The feeding assistant training program must also provide instruction on the following topics:

(i) The resident population who will be served by the feeding assistant in a facility-based program. The facility-based training program curriculum must include training specific to the identified population type(s). This training must include, but is not limited to:

I. Characteristics of the population, such as the population member's physical, social and mental health needs, and specific medications or treatment needed by the residents,

II. Meeting the needs of persons with a dual diagnosis (co-occurrences of mental health disorders and alcohol and/or drug dependence or abuse), and maintaining or increasing his or her social participation

4. Feeding assistants who have been trained by another facility's training program, must be trained for the specific needs of a facility's population
5. Programs may choose to add increased training requirements.

6. Training programs must stress the only direct, hands-on duty a feeding assistant is permitted to perform is assisting residents to eat or drink who have no complicated feeding problems and who has no known behaviors at meal time.

7. Feeding assistant training programs must use a training curriculum, which has been pre-approved by the Department and determined to comply with the federal requirements. Entities are allowed to choose one of the following pre-approved, standardized curriculum models:


8. In addition to the pre-approved, standardized curriculum models facilities must also utilize the following Dementia Education Training Act Care Series videotapes:

Tape 1 - Understanding Dementia
Tape 2 - Staff Communication
Tape 4 - Feeding Techniques and Nutrition
Tape 5 - Assuring Proper Hydration
Tape 11 - Recognizing Changes in Health Status
Tape 12 - Keeping Dementia Residents Within the Safety of the Facility

9. Although the pre-approved standardized training curriculums include additional skill information (e.g., output, special care needs for resident with dysphagia, etc.), the instructor must stress the feeding assistant will not be permitted to perform any other hands-on duty, beyond assisting residents to eat and drink who have no complicated feeding problems and who have no known behaviors at meals.

10. An individual may not provide hands-on assistance with feeding or hydrating residents unless the individual has successfully competed the following:

(i) A State-approved training program for feeding assistants, including additional instruction on any selected resident population.

(ii) After completing the training course, the individual must pass a State-approved standardized written quiz with a minimum score of 80%. The individual may request the quiz to be administered orally. Instructors should consider the needs of persons who have limited English proficiency or reading difficulties

(iii) Successfully completing demonstration of

1) feeding residents with minimal assistance/moderate assistance with cueing and total feeding of resident;
2) Heimlich maneuver; and

3) Appropriate hand washing techniques

11. Programs may choose to add increased testing requirements.

12. Students who do not successfully pass the initial competency evaluation will be allowed the opportunity to review the training materials and retake the test a maximum of two additional times. Therefore, the student may only take the test a total of three times. The program must document the failure, opportunity for review and subsequent retake testing date.

G. Feeding Assistant Instructor Requirements.

Only the following licensed health care professionals can serve as lead instructors: RN, LPN, RD, ST, OT. These individuals must have experience in LTC with six months experience in the management of persons with dementia. Experienced CNAs and other individuals may assist with the training and feeding demonstrations, if appropriately supervised.

H. Records. Feeding assistants must receive an annual inservice on relevant feeding assistant topics (any topic area included in the curriculum is appropriate). In addition, feeding assistants must be evaluated on a yearly basis to document that skill performance and feeding competence is satisfactory.

1. Feeding assistant training programs must maintain the following records:

(i) For a minimum of three (3) years, all students’ written examinations, (skills checklists) and other relevant training records

(ii) Documentation of the training conducted and identification of the instructor conducting the training

(iii) Record of all individuals who have successfully completed the feeding assistant training and competency testing program.

2. Training programs must maintain the security of the test materials to ensure disclosure or forgery does not occur.

3. Facilities employing feeding assistants must maintain the following records:

(i) Feeding assistants must have in their personnel file evidence of the following:

I. Evidence of having successfully completed an approved feeding assistant training and competency testing program

II. Evidence of annual inservice sessions(s), relating to feeding assistant duties

III. Evidence of an annual evaluation, determining a feeding assistant’s continued competence in feeding residents.

(ii) Feeding assistant roster, recording all individuals employed by the facility as feeding
assistants who successfully completed the feeding assistant training and competency evaluation.

(iii) The selected resident’s medical record, documenting no complicated feeding condition exists.

(i) Approval Process of Feeding Assistant Training Programs. A facility must submit to the Division of Health Care Facilities (DHCF) in writing the curriculum the facility will utilize in their feeding assistant training program.

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ALASKA

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Alaska regulations do not contain specific content for Paid Feeding Assistants.

ARIZONA

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Arizona regulations do not contain specific content for Paid Feeding Assistants.

ARKANSAS

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Arkansas regulations do not contain specific content for Paid Feeding Assistants.

CALIFORNIA
California regulations do not contain specific content for Paid Feeding Assistants.

COLORADO

Part 5 - Resident Care

5.6 NUTRITIONAL CARE PLANNING.

(b) In the event the facility elects to utilize paid feeding assistants or feeding assistant volunteers pursuant to Part 11.001 of this Chapter V, as part of the history and assessment conducted pursuant to paragraph (a) of this 5.6, the interdisciplinary team shall evaluate each resident regarding the suitability of the resident to be fed and hydrated by a feeding assistant. Such evaluation shall include, but need not be limited to each resident's level of care, functional status concerning feeding and hydration, and, the resident's ability to cooperate and communicate with staff.

Part 11.001 - Feeding Assistants

11.001.1 Definitions.

Unless otherwise indicated, as used in Part 11.001:

(1) (a) “Feeding assistant” means an individual who assists residents by performing feeding assistant tasks, meets the requirements of Section 11.001.2 and 11.001.3; and, is paid as an employee of a facility; used by a facility under arrangement with another agency or organization; or, who is an unpaid volunteer.

(b) The following individuals may provide feeding assistance to residents without meeting the requirements of section 11.001.2 and 11.001.3:

(i) Registered or licensed nurses;

(ii) Certified nurse aides;

(iii) Registered dietitians;

(iv) Licensed health care practitioners with appropriate experience in feeding and hydrating residents;

(v) Private duty aides and students in nursing education programs and other allied health programs who utilize facilities as clinical practice sites; or,

(vi) Resident family members.
(2) "Employing facility" means a facility that employs paid feeding assistants or utilizes the services of volunteer feeding assistants.

(3) “Feeding assistant tasks” include and are limited to the provision of feeding and hydration services provided in accordance with this Section 11.001. A feeding assistant may not perform or be assigned to perform any task that constitutes: the practice of professional nursing as defined in §12-38-103 (10), C.R.S.; the practice of practical nursing as defined in §12-38-103 (9), C.R.S.; or the practice of a nurse aide as defined in §12-38.1-102 (5), C.R.S.

(4) “Training program provider” means, an employing facility or other training entity approved by the department pursuant to 11.001.6 to administer a feeding assistant training program.

11.001.2 Authorization; Qualifications

(1) A facility may employ or use an individual as a volunteer feeding assistant if: the individual meets all applicable requirements of this Chapter V; and, the facility first verifies that the individual:

(a) Has successfully completed a feeding assistant training program in accordance with 11.001.5; and,

(b) Is at least sixteen 16 years of age.

(2) (a) An employing facility must screen prospective feeding assistants to ensure individuals have no history that would preclude their interaction with residents.

(b) In addition to applicable facility pre-employment screening procedures, an employing facility shall obtain from each prospective paid and volunteer feeding assistant a copy of the recognition of completion document evidencing successful completion of the feeding assistant training program issued in accordance with 11.001.5 (1)(b)(II). Additionally, an employing facility shall verify the following:

(I) In the case of an individual who has not previously been employed or volunteered as a feeding assistant and who has received feeding assistant training administered by an entity other than the employing facility, successful completion of the feeding assistant training program with the training entity that provided such training;

(II) In the case of an individual who has been previously employed as a feeding assistant, feeding assistant employment history with the prospective employee's previous long-term care facility employer;

(III) In the case of an individual who has previously volunteered as a feeding assistant, feeding assistant volunteer history with the long-term care facility that previously utilized the services of that individual.

(3) Feeding assistants may not be counted toward meeting or complying with any requirement for nursing care staff and functions of a facility, including minimum nurse staffing requirements.

11.001.3 Supervision; emergencies
(1) A feeding assistant shall work under the supervision of and shall report to a registered or licensed practical nurse. Each feeding assistant shall be given instruction by a registered nurse, licensed practical nurse or registered dietitian concerning the specific feeding and hydration needs of each resident the feeding assistant will be assigned to assist.

(2) (a) Feeding assistants may perform feeding assistant tasks in congregate dining areas. A nurse shall be immediately available in case of an emergency during meals.

(b) Upon a determination by the charge nurse pursuant to 11.001.4 that it is safe to do so, based on assessments conducted pursuant to 11.001.4(1), a feeding assistant may perform feeding assistant tasks in a resident room for a resident who is unable or unwilling to dine in a congregate dining area.

(3) In an emergency, a feeding assistant must immediately secure the assistance of a supervisory nurse or physician. Feeding assistants shall know how to use resident call systems. This includes use of call light systems and other methods of immediately securing the assistance of supervisory nurses and physicians.

11.001.4 Resident Selection

(1) The facility must base resident selection on the charge nurse’s assessment of the resident’s present condition and the following provisions of this Chapter V:

(a) Most recent resident assessment performed pursuant to Section 5.2; (b) Nutritional care plan developed pursuant to Section 5.6; and,

(c) Plan of care developed pursuant to Section 5.7.

(2) A feeding assistant may perform feeding assistant tasks for those residents who require assistance or encouragement with feeding and hydration. Consistent with the assessments and care plans specified in (1) of this section 11.001.4, a facility must ensure that a feeding assistant feeds only residents who do not have a complicated feeding problem. Such problems include, but are not limited to, difficulty with swallowing, recurrent lung aspirations, and tube or parenteral/intravenous feedings.

11.001.5 Feeding Assistant Training Program

(1) (a) The feeding assistant training program shall be administered by a training program provider approved in accordance with 11.001.6 and shall consist of not less than twelve (12) actual clock hours of classroom instruction. Class size shall be limited to twenty (20) enrollees. Classroom instruction shall be conducted in accordance with current standards of practice and shall conform to the “Feeding Assistant Curriculum Specifications and Program Requirements” available from the department. Curriculum subjects shall include, but need not be limited to, the following:

(I) Feeding techniques;

(II) Assistance with feeding and hydration;

(III) Communication and interpersonal skills;
(IV) Appropriate responses to resident behavior;

(V) Safety and emergency procedures, including the Heimlich maneuver; (VI) Infection control;

(VII) Resident rights; and,

(VIII) Recognizing changes in residents that are inconsistent with their normal behavior and the importance of reporting those changes to the supervisory nurse.

(b) (I) Successful completion of the feeding assistant training program requires each individual enrolled to obtain a score of eighty (80) percent or greater in a written examination provided at the conclusion of classroom instruction. Written examination questions shall be of an appropriate level of difficulty to reflect proficiency in each module of the “Feeding Assistant Curriculum Specifications and Program Requirements” and, at the discretion of the training program provider, may include ancillary feeding assistant-related curriculum subjects. Written examination questions shall not be disclosed to candidates in advance and shall be varied in format and content from test-to-test.

(II) Within ten (10) calendar days from successful completion of a feeding assistant training program, a training program provider approved in accordance with 11.001.6 shall furnish each individual who successfully completes the program with a uniform recognition of completion document. Said document shall be in the format designated by and available from the department to be used by the individual to whom it is issued for the purpose of establishing successful completion of the training program. The document shall bear the notarized signature of an authorized representative of the training program provider.

(III) An individual who successfully completes a feeding assistant training program is not required to repeat the program upon employment or upon providing volunteer feeding assistant services at another facility unless the individual has not worked or volunteered in a long term care facility as a feeding assistant for a period of twenty-four (24) consecutive months. In such case, the individual shall not be employed or used as a volunteer feeding assistant by a facility as a paid feeding assistant until the person successfully repeats the feeding assistant training program.

(c) An individual who fails to score eighty (80) percent or greater in the written knowledge test may be retested one time by a training program provider. An individual who fails to pass on the second attempt shall not be retested without the individual first repeating the twelve (12) actual clock hours of classroom instruction specified in subparagraph (1) (a) of this section.

11.001.6 Feeding Assistant Training Program Provider Approval

(1) A feeding assistant training program may be administered by an employing facility or other training entity approved pursuant to this 11.001.6. As used in this 11.001.6, “other training entity” includes: an accredited college, university or vocational school; or, a program, seminar or in-service training sponsored by an organization, association, corporation, group or agency with specific expertise concerning the provision of feeding and hydration services.

(2) Feeding assistant training programs shall use as instructors only individuals who have appropriate experience in feeding and hydrating residents and who hold: a valid Colorado license to practice as a registered or practical nurse; a certificate of registered dietitian through the commission
on dietetic registration; a certificate of speech-language pathologist through the American speech-
language-hearing association; or, a certificate of registered occupational therapist through the
national board for certification in occupational therapy.

(3) (a) An employing facility or other training entity seeking approval to administer a feeding
assistant training program shall complete and submit to the department an initial attestation in the
format designated by the department certifying that the feeding assistant training program conforms
to the “Feeding Assistant Curriculum Specifications and Program Requirements.” Program approval
may be granted, for a period not to exceed one year to those programs that meet minimum
requirements. Department approval is required prior to initiating feeding assistant training.

(b) A training program provider approved to administer a feeding assistant training program
pursuant to this section shall submit annual renewal attestation forms in the format designated by the
department in the following manner:

(I) For employing facilities, annually with the facility's annual license renewal application. (II) For
other training entities, not less than sixty (60) days in advance of the date department approval
expires.

(4) Training program providers approved to administer a feeding assistant training program shall
maintain the training record of each individual who attends the feeding assistant training program for
a period of not less than three (3) years. Based on such records, training program providers shall
verify successful completion of the feeding assistant training program pursuant to a request by an
employing facility in accordance with 11.001.2 (2)(b) (I).

(5) The department may deny, suspend, or withdraw approval granted under this 11.001.6 upon a
determination by the department, that good cause exists to do so. Good cause may include, but is not
limited to, a determination that a feeding assistant training program is not operated in compliance
with applicable regulations.

11.001.7 Policies and Procedures
An employing facility shall develop and implement policies and procedures concerning the use of paid
feeding assistants developed in accordance with this section.

11.001.8 Records Maintenance

(1) (a) An employing facility shall maintain a record of all individuals employed as feeding assistants
and all individuals who serve as volunteer feeding assistants, including but not limited to records
evidencing successful training program completion. Such records shall be maintained for not less
than three (3) years from the date of separation or completion of volunteer service.

(b) Based on such records, a facility shall verify previous feeding assistant employment and volunteer
history pursuant to a request by an employing facility in accordance with 11.001.2 (2)(b) (II).

11.001.9 Reporting Requirements

(1) Periodically, facilities and training program providers may be required to submit information
regarding their feeding assistant program and feeding assistant training program. Such reports may
include, but not be limited to:

(a) The number of feeding assistants routinely utilized by the facility to assist residents;

(b) The number of residents identified as benefiting from the feeding assistant program; and,

(c) Information concerning the feeding assistant training program administered by the training program provider

CONNECTICUT

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Connecticut regulations do not contain specific content for Paid Feeding Assistants.

DELAWARE

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3000 Division of Long Term Care Residents Protection

3215 Training of Paid Feeding Assistants (Formerly Regulation No. 73)

1.0 Introduction

These regulations allow for the use of Paid Feeding Assistants, as single task workers, to provide feeding assistance in nursing facilities and assisted living facilities. To ensure consistency in the training of Feeding Assistants, the Division of Long Term Care Residents Protection has developed minimum requirements for Feeding Assistant training programs. Each Feeding Assistant training program shall be approved by the Division of Long Term Care Residents Protection. The intent of these regulations is to provide more residents with help in eating and drinking, or encouraging the resident so that more of the meal is consumed, making mealtime a more pleasant experience, and potentially reducing the incidence of unplanned weight loss and dehydration. The determination of which residents may receive assistance from a Feeding Assistant shall be based on the needs and potential risks to a resident as observed and documented in the resident’s plan of care and the comprehensive assessment of the resident’s functional capacity. While these regulations are not applicable to volunteers and family members, those individuals are encouraged to complete a Feeding Assistant training program.

2.0 Definitions

“Division” The Division of Long Term Care Residents Protection.
“Feeding Assistant” An unlicensed, uncertified person trained to assist residents with nutrition and hydration who has successfully completed an initial training program and has demonstrated competency.

“Feeding Assistant Program” Policies and procedures established by a facility to provide supervision of Feeding Assistants, resident selection criteria, and implementation of Section 3.0 of these regulations.

“Instructors:” registered nurses, advanced practice nurses, dietitians, speech pathologists, or a combination of such professionals, who train Feeding Assistants. Occupational therapists may be defined as instructors for purposes of training in special needs as described in Section 3.0 of these regulations

“Resident” A person admitted to a nursing facility or assisted living facility licensed pursuant to 16 Del.C. Ch. 11.

“Student” A person enrolled in an approved Feeding Assistant training program.

“Supervision” Direct oversight by a registered nurse or licensed practical nurse who is in the unit or on the floor where feeding assistance is furnished.

“Supervisory Nurse” The nurse who is responsible for a specific area of a facility such as a floor or unit.

3.0 General Requirements

3.1 Facilities implementing Feeding Assistant programs shall have written policies and procedures in place that include each item in Section 3.1.

3.2 Facilities implementing Feeding Assistant Programs shall strictly limit the responsibilities of each Feeding Assistant.

3.2.1 The facility shall ensure that each Feeding Assistant performs only those duties for which he/she has been specifically trained.

3.2.2 The facility shall ensure that each Feeding Assistant seeks assistance from other members of the resident care team for all resident needs other than nutrition/hydration.

3.3 Each Feeding Assistant employed by any facility either as facility or contract/agency staff shall be required to meet the following:

3.3.1 Each unlicensed or uncertified individual who feeds and hydrates residents in a facility, with the exception of family members and volunteers, shall successfully complete a Feeding Assistant training program approved by the Division of Long Term Care Residents Protection.

3.3.2 Feeding Assistants shall be required to successfully complete an approved Feeding Assistant training program before providing nutrition/hydration to residents.

3.3.3 A Feeding Assistant may provide nutrition/hydration to a resident only under the supervision of a registered nurse or licensed practical nurse who is present in the unit or on the floor where the task
is performed and is readily available to provide assistance to the Feeding Assistant when needed.

3.3.4 A Feeding Assistant may provide nutrition/hydration only for those residents who have been assessed and approved by the supervisory nurse for such assistance. The resident assessment shall be based on the needs of, and potential risks to, the resident as observed and documented in the resident's written plan of care and the latest comprehensive assessment of the resident's functional capacity.

3.3.5 A Feeding Assistant shall not feed residents who are assessed to have complicated feeding problems such as recurrent lung aspirations, difficulty swallowing, feeding tubes, parenteral/IV feedings, chronic coughing or choking.

3.4 Participating facilities shall maintain records regarding the following:

3.4.1 The names of Feeding Assistants hired solely to provide nutrition and hydration.

3.4.2 The names of Feeding Assistants performing additional paid tasks in the facility.

3.4.3 The names of residents served by the Feeding Assistants.

3.5 The facility shall have policies and procedures in place to assure that Feeding Assistants report and record appropriate observations made while providing nutrition and hydration to nursing staff.

3.6 The resident's record shall have documentation that the residents may be fed by a Feeding Assistant. Examples of such documentation include care plans, minimum data sets, uniform assessment instruments and flow charts.

3.7 The supervisory nurse shall request a physician referral to a speech pathologist for an assessment of a resident served by a Feeding Assistant when indicated, e.g., when there has been a change in the resident's swallowing ability.

3.8 The facility shall maintain a list of facility staff qualified to train Feeding Assistants.

3.9 Feeding Assistants shall not be counted toward meeting any minimum staffing requirements.

4.0 Feeding Assistant Training Program Requirements

4.1 General Training Requirements

4.1.1 Each Feeding Assistant training program shall be approved by the Division.

4.1.2 To obtain approval, the curriculum content for the Feeding Assistant training programs shall meet each of the following requirements:

4.1.2.1 The program shall be a minimum of 12 hours to include classroom instruction and demonstrated competency.

4.1.2.2 Classroom instruction and demonstrated competency in each requirement shall be completed prior to students providing resident nutrition/hydration. Programs shall maintain documentation of completion of requirements.
4.1.2.3 At the completion of training, each student who has satisfactorily completed a Feeding Assistant training program shall be provided with documentation of completion of a Delaware Feeding Assistant Program which shall be transferable among facilities with Feeding Assistant programs.

4.1.2.4 The instructor shall directly supervise students at all times while students are demonstrating competency.

4.1.2.5 Programs shall notify the Division in writing when changes to the program or the instructors are made.

4.2 Curriculum Content

4.2.1 Feeding Assistant Role and Function

4.2.1.1 On-the-job conduct, appearance, grooming, personal hygiene and ethical behavior.

4.2.1.2 Responsibilities and limitations of a Feeding Assistant.

4.2.1.2.1 A Feeding Assistant shall perform only those duties for which he/she has been specifically trained.

4.2.1.2.2 A Feeding Assistant shall seek assistance from other members of the resident care team for all resident needs other than nutrition/hydration.

4.2.1.3 Reporting and documenting incidents.

4.2.1.4 Knowledge of the "chain of command" in the facility.

4.2.1.5 Importance of punctuality and commitment to the job.

4.2.2 Resident Rights

4.2.2.1 Providing dignity and maintaining confidentiality.

4.2.2.2 Promoting the resident’s right to make personal choices to accommodate individual needs.

4.2.2.3 Maintaining care and security of resident’s personal possessions.

4.2.2.4 Providing care which ensures that the resident is free from abuse, mistreatment, neglect or financial exploitation.

4.2.3 Psychosocial Factors

4.2.3.1 Verbal and non-verbal communication and interpersonal skills with residents, including those with dementia.

4.2.3.2 Religious, ethnic and personal food preferences.

4.2.4 Appropriate Responses to Resident Behaviors
4.2.4.1 Identifying behaviors which require assistance from professional staff.

4.2.4.2 Recognizing and reporting changes in residents that are inconsistent with their normal behavior.

4.2.4.3 Distinguishing between normal eating and drinking behaviors and those which need to be reported.

4.2.5 Safety and Emergency Procedures

4.2.5.1 Recognizing emergencies which require assistance from other members of the resident care team.

4.2.5.2 Learning appropriate use of the resident call system.

4.2.5.3 Identifying when a resident is choking.

4.2.5.4 Learning how to perform the Heimlich maneuver.

4.2.6 Nutrition/Hydration

4.2.6.1 Understanding of therapeutic diets, supplements and dietary restrictions, including consistency restrictions.

4.2.6.2 Understanding of fluid needs and restrictions.

4.2.6.3 Understanding tips to encourage intake.

4.2.6.4 Understanding of food substitution policy.

4.2.6.5 Understanding use of special feeding devices, including use of straws when deemed appropriate and beneficial to a resident.

4.2.6.6 Understanding the components of a healthy diet.

4.2.6.7 Understanding factors that cause higher risk for nutrition and hydration problems.

4.2.7 Infection Control

4.2.7.1 Knowledge of proper hand washing and hygiene.

4.2.7.2 Knowledge of disease transmission and infection prevention.

4.2.8 Monitoring and Reporting Intake

4.2.8.1 Fluids

4.2.8.1.1 Identifying amounts consumed according to facility policy and procedures.

4.2.8.1.2 Identifying items that are liquid or classified as liquid.

4.2.8.1.3 Recording liquid intake accurately.
4.2.8.2 Foods

4.2.8.2.1 Identifying percentage of food consumed according to facility policy and procedure.

4.2.8.2.2 Recording amount eaten accurately.

4.2.8.2.3 Reporting food-related resident problems.

4.3 Competencies

4.3.1 Feeding Techniques

4.3.1.1 Check resident’s identification and diet card to ensure that resident has received the correct tray.

4.3.1.2 Provide resident with napkin and clothing protector, as needed.

4.3.1.3 Describe selection and location of foods on tray.

4.3.1.4 Assist resident with food preparation, as needed.

4.3.1.5 Observe to make sure each mouthful of food is swallowed before more is ingested.

4.3.1.6 Offer liquids at intervals with solid food.

4.3.1.7 Record food and fluid intake separately and accurately.

4.3.2 Social/Environmental Factors

4.3.2.1 Encourage resident to eat independently, if appropriate.

4.3.2.2 Provide cuing and prompting during meals as needed.

4.3.2.3 Make pleasant conversation, but refrain from asking questions while the resident has food in his/her mouth or asking questions that require lengthy answers.

4.3.2.4 Never rush the resident while feeding.

4.3.2.5 Sit next to the resident to convey an unhurried feeling.

4.3.2.6 Keep the resident focused on eating. Avoid distractions.

4.3.2.7 Be aware of infection control techniques, including avoidance of blowing on hot food and sharing or sampling resident’s meal.

4.3.3 Special Needs

4.3.3.1 Use hand on hand to assist resident, as needed.

4.3.3.2 Help resident to grasp eating utensils and beverage containers.

4.3.3.3 Help resident with assistive devices such as plate guards and adaptive eating utensils.
District of Columbia regulations do not contain specific content for Paid Feeding Assistants.

Florida regulations do not contain specific content for Paid Feeding Assistants.

The term "Dining Assistant" means an individual employed or compensated by the nursing home, or who is used under an arrangement with another agency or organization, to provide assistance with feeding and hydration to residents in need of such assistance. Such individual shall not provide other personal care or nursing services unless certified as a nurse aide or licensed as a registered nurse or practical nurse.

Dining Assistants.

(1) Dining assistants shall work under the direct supervision of a registered nurse or a licensed practical nurse. Direct supervision means that the registered nurse or licensed practical nurse is present in the same room and available to respond to the need for assistance.

(2) Dining assistants are to be used to supplement, not replace, existing nursing staff requirements and as such are not considered nursing staff and are not to be included in computing the required minimum hours of direct nursing care.

(3) Dining assistants shall:
(a) Be at least 16 years of age; and

(b) Have successfully completed the dining assistant training program in accordance with these rules.

(4) Dining assistants shall provide feeding and hydration assistance only to those residents who have been determined to meet the following criteria:

(a) A nursing home’s registered professional nursing staff shall determine which residents a dining assistant may safely assist with feeding and hydration. The determination shall be based on the resident’s latest nursing assessment and plan of care, which is performed in accordance with generally accepted standards of practice and applicable laws and regulations;

(b) The resident’s plan of care shall clearly reflect the nurse’s determination that the resident may be safely assisted with feeding and hydration by a dining assistant; and

(c) Dining assistants shall not provide feeding and hydration assistance to residents who have complicated feeding problems, including, but not limited to, difficulty swallowing, recurrent lung aspirations, and tube or parenteral/IV feedings.

(5) The nursing home’s dining assistant training program shall be conducted under the direction of a registered nurse and shall require participants to perform return demonstrations, as applicable, to demonstrate competencies on program components.

(6) The minimum requirements of the dining assistant training program shall include a minimum of 16 hours of training. The training shall include practical application of feeding and hydration skills and shall include at least the following components:

(a) Feeding techniques;

(b) Assistance with feeding and hydration;

(c) Communication and interpersonal skills;

(d) Appropriate responses to resident behavior;

(e) Safety and emergency procedures, including the Heimlich Maneuver; (f) Infection control;

(g) Recognizing changes in residents that are inconsistent with their normal behavior and the importance of reporting such changes to the supervisory nurse;

(h) Reporting requirements as specified by Article 4 of Chapter 8 of Title 31 of the Official Code of Georgia Annotated, the "Long-term Care Facility Resident Abuse Reporting Act"; and

(i) Resident rights, including abuse and neglect prevention.

(7) The nursing home shall maintain a written record of all individuals who have successfully completed the dining assistant training program. At a minimum, such written record maintained by the nursing home must include the dining assistant’s complete name and address, the name and address of the nursing home, the name and signature of the registered nurse directing the training program, and the date the training program was successfully completed. The nursing home shall
provide a copy of such written record in a timely manner to any dining assistant who has successfully completed the training program upon the dining assistant’s written request.

(8) A copy of the written record of the satisfactory completion of the dining assistant training program may be used by a subsequent nursing home hiring the dining assistant in lieu of repeating the training, provided that the dining assistant satisfactorily performs return demonstrations of the minimum skills required of dining assistants as specified in these rules for the hiring nursing home. Such satisfactory demonstrations of skills shall be documented by a registered nurse and retained by the nursing home in the dining assistant's record along with a copy of the initial documentation of successful completion of the training program as specified in these rules.

(9) In addition to all other documents required by state or federal regulations, the nursing home shall maintain the following records:

(a) A copy of the nursing home's dining assistant training program; and

(b) Documentation of successful completion of the training program for each dining assistant. Authority: O.C.G.A. Sec. 31-7-1 et seq.


HAWAII

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Hawaii regulations do not contain specific content for Paid Feeding Assistants.

IDAHO

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Idaho regulations do not contain specific content for Paid Feeding Assistants.

ILLINOIS

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Section 300.662 Resident Attendants
a) As used in this Section, "resident attendant" means an individual who assists residents in a facility with the following activities:

1) eating and drinking; and 

b) The term "resident attendant" does not include an individual who:

1) is a licensed health professional or a registered dietitian;
2) volunteers without monetary compensation;
3) is a nursing assistant; or
4) performs any nursing or nursing-related services for residents of a facility. (Section 3-206.03(b) of the Act)

c) A facility may employ resident attendants to assist the nurse aides with the activities authorized under subsection (a) of this Section. The resident attendants shall not count in the minimum staffing requirements under this Part. (Section 3-206.03(b) of the Act)

d) Each person employed by the facility as a resident attendant shall meet the following requirements:

1) Be at least 16 years of age; and
2) Be able to speak and understand the English language or a language understood by a substantial percentage of the facility’s residents.

e) Resident attendants shall be supervised by and shall report to a nurse.

f) The facility shall develop and implement policies and procedures concerning the duties of resident attendants in accordance with this Section, and shall document such duties in a written job description.

g) As part of the comprehensive assessment (see Section 300.1220), each resident shall be evaluated to determine whether the resident may or may not be fed, hydrated or provided personal hygiene by a resident attendant. Such evaluation shall include, but not be limited to, the resident’s level of care; the resident’s functional status in regard to feeding, hydration, and personal hygiene; the resident’s ability to cooperate and communicate with staff.

h) A facility may not use on a full-time or other paid basis any individual as a resident attendant in the facility unless the individual:

1) has completed a Department-approved training and competency evaluation program encompassing the tasks the individual provides; and
2) is competent to provide feeding, hydration, and personal hygiene services. (Section 3-206.03(c) of the Act) The individual shall be deemed to be competent if he/she is able to perform a hands-on return demonstration of the required skills, as determined by a nurse.
i) The facility shall maintain documentation of completion of the training program and determination of competency for each person employed as a resident attendant.

j) A facility-based training and competency evaluation program shall be conducted by a nurse and/or dietician and shall include one or more of the following units:

1) A feeding unit that is at least five hours in length and that is specific to the needs of the residents, and that includes the anatomy of digestion and swallowing; feeding techniques; developing an awareness of eating limitations; potential feeding problems and complications; resident identification; necessary equipment and materials; resident privacy; handwashing; use of disposable gloves; verbal and nonverbal communication skills; behavioral issues and management techniques; signs of choking; signs and symptoms of aspiration; and Heimlich maneuver;

l) Each resident attendant shall be given instruction by a nurse or dietician concerning the specific feeding, hydration, and/or personal hygiene care needs of the resident whom he or she will be assigned to assist.

m) Training programs shall be reviewed and approved by the Department every two years. (Section 3-206.03(d) of the Act)

n) Training programs shall not be implemented prior to initial Department approval.

o) Application for initial approval of facility-based and non-facility-based training programs shall be in writing and shall include:

1) An outline containing the methodology, content, and objectives for the training program. The outline shall address the curriculum requirements set forth in subsection (h) of this Section for each unit included in the program;

2) A schedule for the training program;

3) Resumes describing the education, experience, and qualifications of each program instructor, including a copy of any valid Illinois licenses, as applicable; and

4) A copy or description of the tools that will be used to evaluate competency.

p) The Department will evaluate the initial application and proposed program for conformance to the program requirements contained in this Section. Based on this review, the Department will:

1) Grant approval of the proposed program for a period of two years;

2) Grant approval of the proposed program contingent on the receipt of additional materials, or revision, needed to remedy any minor deficiencies in the application or proposed program, which would not prevent the program from being implemented, such as deficiencies in the number of hours assigned to cover different areas of content, which can be corrected by submitting a revised schedule or outline; or

3) Deny approval of the proposed program based on major deficiencies in the application or proposed program that would prevent the program from being implemented, such as deficiencies in the qualifications of instructors or missing areas of content.
q) Programs shall be resubmitted to the Department for review within 60 days prior to expiration of program approval.

r) If the Department finds that an approved program does not comply with the requirements of this Section, the Department will notify the facility in writing of noncompliance of the program and the reason for the finding.

s) If the Department finds that any conditions stated in the written notice of noncompliance issued under subsection (r) of this Section have not been corrected within 30 days after the date of issuance of such notice, the Department will revoke its approval of the program.

t) Any change in program content or objectives shall be submitted to the Department at least 30 days prior to program delivery. The Department will review the proposed change based on the requirements of this Section and will either approve or disapprove the change. The Department will notify the facility in writing of the approval or disapproval.

u) A person seeking employment as a resident attendant is subject to the Health Care Worker Background Check Act (Section 3-206.03(f) of the Act) and Section 300.661 of this Part.

(Source: Added at 24 Ill. Reg. 17330, effective November 1, 2000)

INDIANA

Downloaded January 2011

410 IAC 16.2-3.1-53 Dining assistants

Authority: IC 16-28-1-7; IC 16-28-1-12

Affected: IC 16-28-5-1; IC 16-28-13-3; IC 25-23-1-1 Sec. 53.

(a) Each dining assistant shall successfully complete a sixteen (16) hour training program for dining assistants that has been approved by the department.

(b) A dining assistant training program must obtain approval from the department prior to providing instruction to individuals.

(c) The facility shall do the following:

(1) Ensure that resident selection for dining assistance is based on the charge nurse’s assessment and the resident’s most recent assessment and plan of care.

(2) Not allow the dining assistant to assist more than two (2) residents at any one (1) time.

(3) Ensure the dining assistant is oriented to the following: (A) The resident’s diet, likes, and dislikes.
(B) Feeding techniques appropriate to the individual resident.

(4) Document the use of a dining assistant on the resident's care plan and review at each care plan conference.

(5) Check the nurse aide registry prior to training an individual as a dining assistant.

(6) Use only individuals as dining assistants who have successfully completed a department-approved training program for dining assistants.

(d) The scope of practice for dining assistants is as follows:

(1) A dining assistant shall work under the supervision of a licensed nurse who is on the unit or floor where the dining assistance is furnished and is immediately available to provide assistance as needed.

(2) In an emergency, a dining assistant shall call the supervising nurse using the resident call system or any other method available.

(3) A dining assistant shall assist only residents who do not have complicated eating problems, which include, but are not limited to, the following:

(A) Difficulty swallowing.

(B) Recurrent lung aspirations.

(C) Tube or parenteral/IV feedings.

(e) The dining assistant training program shall consist of, but is not limited to, the following:

(1) Eight (8) hours of classroom instruction prior to any direct contact with a resident that includes the following:

(A) Feeding techniques.

(B) Regular and special diets.

(C) Reporting food and fluid intake.

(D) Assistance with feeding and hydration.

(E) Communication and interpersonal skills.

(F) Infection control.

(G) Safety/emergency procedures including the Heimlich maneuver.

(H) Promoting residents' independence.

(I) Abuse, neglect, and misappropriation of property.

(J) Nutrition and hydration.
(K) Recognizing changes in residents that are inconsistent with their normal behavior and the importance of reporting these changes to the supervising nurse.

(L) Mental health and social service needs including how to respond to a resident’s behavior.

(M) Residents’ rights including the following:

(i) Privacy.

(ii) Confidentiality.

(iii) Promoting residents’ right to make personal choices to accommodate their needs.

(iv) Maintaining care and security of residents’ personal possessions.

(v) Dignity.

(2) Eight (8) hours of clinical instruction that consists of, but is not limited to, the following:

(A) Feeding techniques.

(B) Assistance with eating and hydration.

(f) The dining assistant training program and training facility, if applicable, must ensure that clinical instruction provides for the direct supervision of the dining assistant by a licensed nurse.

(g) Each training program shall have a qualified instructor responsible for program oversight who at a minimum:

(1) possesses a valid Indiana registered nurse license under IC 25-23-1-1;

(2) possesses two (2) years of licensed nursing experience, of which at least one (1) year of experience is in the provision of long term care services; and

(3) completed a department-approved training program.

(h) An approved program director of a department nurse aide training program constitutes a qualified instructor under subsection (g) and may conduct dining assistant training without additional training.

(i) Dining assistant training may only be provided by:

(1) a registered nurse;

(2) a licensed practical nurse;

(3) a qualified dietician;

(4) an occupational therapist; or

(5) a speech-language pathologist.
Certified nurse aide and qualified medication aide personnel shall not participate in or provide any dining assistant training.

(j) In order to issue a certificate or letter of completion to the dining assistant, the dining assistant training program shall ensure that the dining assistant demonstrates competency in all areas of instruction using a checklist approved by the department.

(k) Each approved program shall maintain a student file that:

(1) is retained for a minimum of three (3) years; and

(2) contains:

(A) individualized documentation of the:

(i) classroom training that includes dates of attendance and areas of instruction; and

(ii) clinical instruction that includes dates of attendance and areas of instruction including procedures and activities completed during the clinical experience; and

(B) a copy of the certificate or letter confirming successful completion of the dining assistant training program, which shall be signed and dated by the instructor and bear the name and address of the training program.

(l) The department may revoke an approved dining assistant training program if evidence exists that the program has not been administered in accordance with this section.

(m) For purposes of IC 16-28-5-1, a breach of:

(1) subsection (a), (b), (c), (d), (e), (f), (g), or (j) is a deficiency;

(2) subsection (h) or (i) is a noncompliance; and

(3) subsection (k) is a nonconformance.

(Indiana State Department of Health; 410 IAC 16.2-3.1-53; filed Aug 11, 2004, 11:00 a.m.: 28 IR 192)
A paid nutritional assistant means an individual who meets the requirements of this subrule and who is an employee of the facility or an employee of a temporary employment agency employed by the facility. A facility may use an individual working in the facility as a paid nutritional assistant only if that individual has successfully completed a state-approved training program for paid nutritional assistants. (I, II, III)

a. Training program requirements.

(1) A state-approved training program for paid nutritional assistants must include, at a minimum, eight hours of training in the following areas:

1. Feeding techniques.
2. Assistance with feeding and hydration.
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 reporting these changes to the supervisory nurse.

(2) In addition to the training program requirements specified above, the training program must include at least four hours of classroom study, two hours of supervised laboratory work, and two hours of supervised clinical experience.

(3) A facility that offers a paid nutritional assistant training program must provide sufficient supplies in order to teach the objectives of the course.

(4) All paid nutritional assistant training program instructors shall be registered nurses. Other qualified health care professionals may assist the instructor in teaching the classroom portion and clinical or laboratory experiences. The ratio of students to instructor shall not exceed ten students per instructor in the clinical setting.

(5) Each individual enrolled in a paid nutritional assistant training program shall complete a 50-question multiple choice written test and must obtain a score of 80 percent or higher. In addition, the individual must successfully perform the feeding of a resident in a clinical setting. A registered nurse shall conduct the final competency determination.

(6) If an individual does not pass either the written test or competency demonstration, the individual may retest the failed portion a second time. If the individual does not pass either the written test or competency demonstration portion the second time, the individual shall not be allowed to retest.

b. Program approval.
A facility or other entity may not offer or teach a paid nutritional assistant training program until the department has approved the program. Individuals trained in a program not approved by the department will not be allowed to function as paid nutritional assistants.

(1) A facility or other institution offering a paid nutritional assistant training program must provide the following information about the training program to the department before offering the program or teaching paid nutritional assistants:

1. Policies and procedures for program administration.

2. Qualifications of the instructors.

3. Maintenance of program records, including attendance records.


5. Program costs and refund policies.

6. Lesson plans, including the objectives to be taught, skills demonstrations, assignments, quizzes, and classroom, laboratory and clinical hours.

(2) The facility or other institution offering a paid nutritional assistant training program must submit the materials specified above for department review. The department shall, within ten days of receipt of the material, advise the facility or institution whether the program is approved, or request additional information to assist the department in determining whether the curriculum meets the requirements for a paid nutritional assistant training program. Before approving any paid nutritional assistant training program, the department shall determine whether the curriculum meets the requirements specified in this subrule. The department shall maintain a list of facilities and institutions eligible to provide paid nutritional assistant training. (I, II, III)

(3) A facility shall maintain a record of all individuals who have successfully completed the required training program and are used by the facility as paid nutritional assistants. The individual shall complete the training program with a demonstration of knowledge and competency skills necessary to serve as a paid nutritional assistant. (I, II, III)

(4) Upon successful completion of the training program, the facility or other institution providing the training shall, within ten calendar days, provide the individual with a signed and dated certificate of completion. A facility that employs paid nutritional assistants shall maintain on file copies of the completed certificate and skills checklist for each individual who has successfully completed the training program. (I, II, III)

c. Working restrictions.

(1) A paid nutritional assistant must work under the supervision of a registered nurse or a licensed practical nurse. In an emergency, a paid nutritional assistant must call a supervisory nurse for help on the resident call system. (I, II, III)

(2) A facility must ensure that a paid nutritional assistant feeds only residents who have no complicated feeding problems. Complicated feeding problems include, but are not limited to, difficulty swallowing, recurrent lung aspirations, and tube, parenteral or intravenous feedings. The facility must
base resident selection on the charge nurse's assessment and the resident's latest assessment and plan of care. (I, II, III)

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KANSAS


(a) As used in this act:

(27) "Paid nutrition assistant" means an individual who is paid to feed residents of an adult care home, or who is used under an arrangement with another agency or organization, which is trained by a person meeting nurse aide instructor qualifications as prescribed by 42 C.F.R. 483.152, 42 C.F.R. 483.160 and paragraph (h) of 42 C.F.R. 483.35, in effect on October 27, 2003, and who provides such assistance under the supervision of a registered professional or licensed practical nurse.


The following definitions shall apply to all adult care homes except nursing facilities for mental health and intermediate care facilities for the mentally retarded.

(tt) Paid nutrition assistant” has the meaning specified in K.S.A. 39-923, and amendments thereto. In addition, each paid nutrition assistant shall meet the following requirements:

(1) Have successfully completed a nutrition assistant course approved by the Kansas department of health and environment;

(2) provide assistance with eating to residents of an adult care home based on an assessment by the supervising licensed nurse, the resident's most recent minimum data set assessment or functional capacity screening, and the resident's current care plan or negotiated service agreement;

(3) provide assistance with eating to residents who do not have complicated feeding problems;

(4) be supervised by a licensed nurse on duty in the facility; and

(5) contact the supervising licensed nurse verbally or on the resident call system for help in case of an emergency.

KY regulations do not contain specific content for Paid Feeding Assistants.

LOUISIANA

§9820. Feeding Assistants

A. Prior to assisting nursing facility residents with feeding, the assistant must have successfully completed the state-approved training course published by the American Health Care Association, Assisted Dining: The Role and Skills of Feeding Assistants.

1. Licensed personnel qualified to teach the course include:
   a. registered nurses;
   b. licensed practical nurses;
   c. dieticians; and
   d. speech therapists.

2. The competency of feeding assistants must be evaluated by course instructors and supervisory nurses.

3. If feeding assistants transfer between facilities, the receiving facility must assure competency.

B. Feeding assistants must be registered on the Direct Service Worker Registry (DSW) unless they are volunteers.

1. Volunteers must complete the training course except in cases where a family member or significant other is feeding the resident.
2. If verification of completion of training cannot be obtained from the DSW Registry, the training course must be taken.

C. The clinical decision as to which residents are fed by a feeding assistant must be made by a registered nurse (RN) or licensed practical nurse (LPN). It must be based upon the individual nurse’s assessment and the resident's latest assessment and plan of care.

1. A physician or speech therapist may override the nurse’s decision, if in their professional opinion, it would be contraindicated.

D. The use of a feeding assistant must be noted on the plan of care.

E. There must be documentation to show that the residents approved to be fed by feeding assistants have no complicated feeding problems.

1. Feeding assistants may not feed residents who have complicated feeding problems such as difficulty swallowing, recurrent lung aspirations and tube or IV feedings.

F. There must be documentation of on-going assessment by nursing staff to assure that any complications that develop are identified and addressed promptly.

G. A feeding assistant must work under the supervision of a RN or LPN and the resident's clinical record must contain entries made by the supervisory RN or LPN describing services provided by the feeding assistant.

H. Facilities may use feeding assistants at mealtimes or snack times, whenever the facility can provide the necessary supervision.

1. A feeding assistant may feed residents in the dining room or another congregate area.

I. Facilities may use their existing staff to feed residents as long as each staff member successfully completes the state-approved training course.

J. Facilities must maintain a record of all individuals used as feeding assistants who have successfully completed the training course.

K. Residents have the right to refuse to be fed by a feeding assistant.


HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 32:1067 (June 2006).
CHAPTER 1: DEFINITIONS

The following terms shall have the meanings as specified:

“Feeding Assistants” are paid staff, who have successfully completed a State-approved training program and who assist residents with their meals. Feeding assistants are not considered direct care staff.

CHAPTER 8: PERSONNEL

8.D. Personnel Records

8.D.1. Employee Record on File

e. Feeding Assistants

All nursing facilities shall maintain a record of the individuals who have successfully completed a State-approved feeding assistance program. Feeding assistants shall not feed residents who require the assistance of staff with more specialized training, such as residents with recurrent lung aspirations, difficulty swallowing, on feeding tubes, and parenteral or IV feedings.

CHAPTER 9: RESIDENT CARE STAFFING

9.B. Assignment of Tasks

9.B.5. Feeding Assistants

All trained feeding assistants shall work under the supervision of a registered or licensed practical nurse. The decision to allow a feeding assistant to feed a resident is based on the charge nurse’s assessment and the resident’s latest assessment and plan of care. Facilities are responsible for any adverse actions resulting from the use of feeding assistants.

MARYLAND

10.07.02.41  Paid Feeding Assistants.

A. A facility may use a paid feeding assistant who has successfully completed a State approved training course as described in §E of this regulation.

B. Supervision.

(1) A paid feeding assistant shall work under the supervision of a licensed nurse.

(2) In an emergency, when the resident is fed in the resident’s room, a paid feeding assistant shall use
the resident call system to call a supervisory nurse for help.

C. A facility that uses a paid feeding assistant shall ensure that the paid feeding assistant feeds only residents who do not have complicated feeding conditions including, but not limited to:

(1) Difficulty swallowing;

(2) Choking;

(3) Recurrent lung aspirations; or

(4) Tube or parenteral intravenous feedings.

D. Protocol. The facility shall develop a protocol for selecting residents who are appropriate for feeding by a paid feeding assistant. The facility shall select a resident based on the:

(1) Charge nurse's current assessment of the resident;

(2) The resident's latest Minimum Data Set (MDS) assessment; and

(3) The resident's plan of care.

E. State-Approved Training. A State-approved training course for paid feeding assistants shall consist of at least 8 hours of training that includes:

(1) Feeding techniques;

(2) Assistance with feeding and hydration;

(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 a resident's behavior that are inconsistent with the resident's normal behavior and the importance of reporting these changes to a supervisory nurse; and

(9) Successful completion of a two-part test that includes a: (a) Written test with a passing score of 80 percent; and

(b) Demonstration of proper feeding skills performed on a resident under observation.

F. The feeding assistant training may be taught by a:

(1) Registered nurse and supplementary professional instructors;
(2) Licensed dietitian-nutritionist;
(3) Licensed physical therapist;
(4) Licensed speech therapist; or
(5) Licensed occupational therapist.

G. The facility shall maintain a record of all paid feeding assistants who have successfully completed a feeding assistance course.

Regulations .40 and .41 recodified to Regulations .43 and .44, respectively, Appendix recodified as Regulation .40 and amended, and new Regulations .41 and .42 adopted effective October 1, 1990 (17:19 Md. R. 2320)

Regulation .41 repealed and new Regulation .41 adopted effective September 13, 2004 (31:18 Md. R. 1350)


### MASSACHUSETTS

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Massachusetts regulations do not contain specific content for Paid Feeding Assistants.

### MICHIGAN

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Michigan regulations do not contain specific content for Paid Feeding Assistants.

### MINNESOTA

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Minnesota regulations do not contain specific content for Paid Feeding Assistants.
General Comments

There are no known legal barriers in Mississippi that would prevent the State Agency from choosing to implement a feeding assistant training program. The State Agency will implement an approval program for feeding assistants using Federal requirements as minimum standards. This will allow facilities in Mississippi the option to use paid feeding assistants to supplement the services of certified nurse aide to help residents with eating and drinking. Feeding Assistants must successfully complete a State-Approved training program that meets Federal requirements prior to performing feeding assistant tasks, and work under the supervision of a registered nurse or licensed practical nurse. Although the effective date of the final rule is October 27, 2003, the approval date for facilities will be based upon the date that the State Agency determines that the facility has met the requirements for approval. Once all documentation required by the State Agency has been received, reviewed, and approved, the facility will be notified in writing of the facility’s effective approval date.

Definition of Paid Feeding Assistant

The State Agency requires that the term “Feeding Assistant” be used since it is the term used in the regulations. Paid feeding assistants must not feed any residents with complicated feeding problems or perform any other nursing or nursing-related tasks. The State Agency believes that residents in isolation should be fed by nurse aides and/or nurses; therefore, feeding assistants are prohibited from feeding residents in isolation.

Revised Definition for Nurse Aide

Nurse aide means any individual providing nursing or nursing-related services to residents in a facility who is not a licensed health professional, a registered dietitian, or someone who volunteers to provide such services without pay. Nurse aides do not include those individuals who furnish services to residents only as paid feeding assistants as defined in Section 488.301.

Who Can Be A Feeding Assistant

Any individual can act as a feeding assistant if he or she meets the training and supervision requirements. Facilities may use existing staff and/or hire additional staff to assist at mealtimes. Each facility’s administrator is responsible for allocating available staff to perform necessary tasks and the decision is left to the administrator to decide whether to use as feeding assistants staff who are not health care personnel. Existing Staff might include the administrator, activity staff, clerical, laundry, housekeeping staff, or others who see residents on a daily basis.
Use of Volunteers & Family Members

The final rule exempts volunteers and family members from the training requirements. CMS does allow voluntary training and does encourage volunteers and family members to take the training for feeding assistants. Each facility must determine whether or not to require volunteers and family members to complete feeding assistance training. Private duty aides and students in nursing education programs and other allied health type programs who use facilities as clinical practice sites are considered volunteers. Facilities are responsible for the care and safety of residents, even if the resident is fed by a relative, friend, or volunteer.

Feeding Assistant Training Requirements

The State Agency has determined that the Federal minimum requirement of 8 hours of training is not sufficient to properly train feeding assistants to feed residents; therefore, the minimum number of hours of training required by the State Agency is sixteen (16). This increase in hours would provide training time for additional subjects required by the State; time for observation of other staff members (or other feeding assistants after successful completion of training) feeding residents; and time for demonstration of several tasks by the feeding assistant student in a lab and/or clinical setting as deemed appropriate by the facility in determining the competency of the feeding assistant. The State Agency program requirements meet minimum Federal requirements. In addition to the minimum Federal requirements, the State Agency requires that the following topics be included in the training program:

- Role (Definition) and responsibilities of the Feeding Assistant (Emphasis on performing only feeding tasks for which training has been provided and being able to state that he or she is not allowed to feed residents with complicated feeding problems).

- Supervision and who feeding assistants will call in case of an emergency.

- How and from whom feeding assistants will receive their resident assignments.

- Facility policies and procedures on determining % of Intake (liquids and food) and method of reporting or recording resident intake.

- Specialized feeding & intake problems associated with residents with dementia and with Alzheimer’s disease.

- Proper procedures for serving fresh water, ice, beverages and snacks from hydration cart. (e.g., avoid contamination of ice by using and storing ice scoop properly, by not allowing ice to touch hand and fall back into container, by lacing scoop in appropriate receptacle after each use, etc.).

- Instruction on before meal/after meal nursing related tasks to be completed by CNA (e.g., mouth care, toileting, washing resident’s face and hands before and after meals, making sure dentures are in properly, positioning resident properly, placement, removal and/or replacement of lap buddy, rolling wheelchair up to table and locking wheelchair, etc.).

- Instruction on the Mississippi Vulnerable Adults Act and signing of statement acknowledging understanding of the Act (see Section 43-47-1, et seq. Mississippi Code of 1972, as amended).

Minimum Federal course requirements are listed below and include only services that are nonnursing
related. Facilities may require additional subjects or hours of training; however, feeding assistants may not perform any duties beyond those associated with the regulations.

Communication and Interpersonal Skills and Appropriate Responses to Resident Behavior

-Good communication skills - verbal - words (e.g., speak clearly & use short words/ sentences); nonverbal (e.g., body language - facial expression, gestures, tone of voice, posture, eye contact, silence, touch, etc.); be a good listener (listen for facts and feelings); interact on one-on-one basis with resident; overcoming physical barriers/communicating with special needs residents (e.g., visually impaired residents, hearing impaired, cognitively impaired; residents who have loss the ability to speak or understand words); ways to build a good/friendly relationship; introduce self; make feeding a social event; controlling your negative feelings –recognizing a resident’s cultural, social, ethnic, or religious background; and dealing with difficult behavior, etc.

-Communication with the dementia resident and dealing with behavioral disturbances.

Residents Rights

Must be knowledgeable of resident’s rights and be able to give examples of promoting residents rights during meals while feeding or assisting a resident with eating (e.g., promoting resident’s dignity; allowing residents to make personal choices; right to eat or not eat; stop feeding resident when verbally or non-verbally (hand gesture or turning head); order of food; alternative menu; right to have visitors eat with them; right to sit where they want to sit, etc.). Right of the resident to be cared for in a manner free from abuse, neglect, or misappropriation of resident’s property. Safety & Emergency Procedures, including the Heimlich maneuver Must be able to identify signs and symptoms of choking. Must be able to demonstrate the Heimlich Maneuver. Check temperature of food to make sure it’s not too hot. Discuss swallowing problems and foods that are hard to swallow. Must understand importance of reporting any feeding concerns to the charge nurse. What to do in case of fire. Infection Control Basics on how germs are spread. Why residents are at high risk for infections. When hands must be washed. Instructions on basic infection control principles and proper hand washing techniques during meal service and feeding of a resident. Don’t mix clean & dirty trays. Must be able to demonstrate proper hand washing techniques.

Feeding Techniques

Must be able to demonstrate proper feeding techniques (e.g., wash hands - self; identify self to resident; address resident by name & with respect & dignity; make sure environment is neat, clean and free from unpleasant orders; make sure resident is comfortable - in proper upright feeding position - if not, request nursing personnel to correct; offers and/or assist with placement or removal of clothing protector versus bibs to protect resident’s dignity; check resident’s identification bracelet with dietary card or request nursing personnel to verify resident’s name to ensure resident is getting tray prepared for him/her; make sure resident has all utensils and straw for liquid; make sure hot food is hot & cold food is cold; do not rush resident - feed slowly; prepare food for serving - cut up meat and/or larger goods, open cartons, butter bread/toast, season food; sit next to resident in order to maintain eye contact and promote resident dignity; interact with resident in pleasant and appropriate manner - make meal social event; encourage independence - special adaptive utensils may be necessary; sit at eye level; feed small amounts of food; don’t mix foods together unless resident ask you to, feed food in order of preference of resident; offer fluids first to moisten mouth;
feed foods in logical order and alternate between solids and liquids; make sure resident’s mouth is empty before next bite of food or sip of beverage; allow adequate eating time to chew food thoroughly; encourage resident to eat as much as possible; test food for appropriate temperatures; identify or describe foods items for vision impaired resident, using clock-hours hand positions to describe where food is located on plate; note amount of food and liquids consumed and record; and observe and report swallowing difficulties, choking, coughing, chewing difficulties, changes in appetite or thirst to charge nurse, etc.; wipe food from resident’s mouth and hands as necessary during and at the end of meal; note, report or record intake prior to removing food tray. Must be knowledgeable of different diets and be able to identify (e.g., clear, full liquid, soft, mechanical soft - regular, regular with chopped meat, regular with NCS/no concentrated sweets, regular with NSP/no salt packet, and pureed). Feeding assistants are to know that dietary supplements are not snacks and residents should be encouraged to eat/drink the supplement. Supplements are available as drinks, puddings, granola bars, and “pudding pops”, etc. Except in rare cases, supplements do not replace the meal but are given in addition to it, often between meals.

Assistance with feeding and hydration

Adaptive self feeding devices (e.g., divided plate, scoop dish, fat handle spoon, cup with lid on it.) Make sure feeding assistant understands why many nursing home residents cannot feed themselves (frailty, mental impairment, swallowing difficulties, poor control of their hands and arms). Encourage resident to feed self as much as possible (progressive self feeding program).

Existing Facility Staff Training

Existing facility staff may be excluded from the following Feeding Assistant Training Program courses provided that documentation of prior related training is available:

-MS Vulnerable Adults Act.

-Communication/interpersonal skills and appropriate responses to resident behavior. -Resident rights.

-Infection control.

-Safety & emergency procedures, including the Heimlich maneuver.

Existing facility staff with evidence of prior training in the above subjects may successfully complete the Feeding Assistant Training Program in less than 16 hours as verified by the instructor.

Competency Evaluation

There is no Federal/State requirement for a competency test. However, facilities are encouraged to develop and administer some type of competency test for use in assessing the competency of the feeding assistant student. The test could include demonstration by the feeding assistant student of several tasks (e.g., a simulated demonstration of the Heimlich maneuver in a lab setting; return demonstration of safe and proper feeding of a regular and/or pureed diet to another student - acting as a dependent resident who cannot feed self - while promoting residents rights and infection control; demonstration of proper hand washing techniques, etc.).
Successful Program Completion

“Successful Completion” is to be determined by the instructor or the supervisory nurse.

Feeding Assistant Training Program Approval Process

The State Agency has chosen to initially approve feeding assistant training programs via a paper review and may conduct an onsite review of the Feeding Assistant Training Program (FATP) during any visit by the State Agency. The State Agency program requirements exceed minimum Federal requirements. Facilities must meet or exceed the State Agency requirements. Documents that facilities must submit to the State Agency for review for determining whether or the facility’s feeding assistant training program will be approved are as follows: Outline of facility’s feeding assistant course content/topics, indicating hours each topic will be taught. Names of Instructor(s) and Qualification Information Example of training certificate to be issued to feeding assistant upon successful completion of training. Upon review and approval of the facility’s application for approval of a Feeding Assistant Training Program (FATP), the State Agency will date stamp the application “APPROVED” and return a copy to the facility for maintenance in the facility’s FATP training records. Facilities are responsible for notifying State Agency of any changes to their program (e.g., course content, instructors, etc.).

Feeding Assistant Training Program (FATP) Renewal/Re-approval Process

Oversight review may be conducted as deemed necessary. The State Agency may withdraw approval of a FATP if the facility fails to comply with State and/or Federal requirements.

Supervision

A feeding assistant must work under the supervision of a registered nurse (RN) or licensed practical nurse (LPN). Facilities must develop policies and procedures addressing supervision, how feeding assistants will receive resident assignments, and how feeding assistants will contact a nurse for help in case of an emergency.

Where May Feeding Assistants Feed Residents

Feeding Assistants may feed residents in the dining room and may feed residents that are unable or unwilling to go to a congregated dining area in their own room if it is determined by the nurse in charge that it is safe for them to be fed in their own rooms.

Criteria for Selecting Residents to be Fed by Feeding Assistants

A facility must ensure that a feeding assistant feeds only residents who have no complicated feeding problems. Residents who have a clinical condition would require the individual who is feeding to have received the training of a nurse or nurse aide. Complicated feeding problems include, but are not limited to, difficulty swallowing, recurrent lung aspirations, and tube or parenteral/IV feedings. The facility must base resident selection on the charge nurse’s assessment and the resident’s latest assessment and plan of care.

Informed Consent From Resident

Facilities are not required to obtain informed consent from the resident or resident’s representative.
that the resident agrees to be fed by a feeding assistant and accepts the risks and benefits.

Individualized Resident Feeding Plan

An individualized feeding plan is not required by CMS since it would very likely duplicate part of the care planning process.

Posting Numbers of Feeding Assistants Used by the Facility

Facilities are prohibited from counting paid feeding assistants toward minimum staff requirements.

Requirements for Maintenance/Retention of Feeding Assistant Records

Facilities must maintain a record of all individuals used by the facility as feeding assistants that have successfully completed the training course for paid feeding assistants. Facilities are required to issue a Feeding Assistant Training Certificate to each individual that successfully completes the feeding assistant training program and keep a copy of the certificate on file. The certificate must (1) contain the name of the facility and location (city/state) conducting the training, (2) the same of the individual that completed the training, (3) a statement that the individual successfully completed a State-approved Feeding Assistant Program, (4) the date the training course was completed, and (5) signature of instructor. The facility is required to keep on file documentation of the training that was conducted, identification of the Instructor (e.g., name of RN, LPN, RD) that conducted the training. Facilities are required to keep on file a copy of the facility's Feeding assistant Training Program (FATP) application, which has been stamped approved by the State Agency, a copy of their training session outline indicating the time (i.e., minutes and/or hours) allotted for each topic; copies of all examinations, checklists, and any other relevant training records.

Requirements for Reporting Misconduct

Facilities must report to the State agency any incident of abuse, neglect or misappropriation of resident property by a paid feeding assistant and requires States to maintain records of all reported incidents. No requirements for States to establish procedures for review of allegations of abuse, neglect, and misappropriation of property, and for procedures for investigation of complaints because such requirements/provisions already exist.

Federal Oversight - State Survey Process

The survey process will provide the Federal/State oversight of facilities' use of feeding assistants, as it does for other participation requirements. Facilities that request to use or use feeding assistants should be surveyed in the same way as any other facility. No annual inspection of the FATP is planned; however, the State Agency may conduct an onsite visit to inspect the FATP if deemed necessary. The State Agency may withdraw approval for the FATP if the facility fails to comply with Federal and/or State requirements.

Registry for Feeding Assistants

The State Agency does not plan to establish a separate registry nor place the names of feeding assistants on the Mississippi Nurse Aide Registry. The State Agency does recommend that facilities check the Nurse Aide Registry before hiring any individual to make sure that there are no adverse
findings of abuse, neglect, and/or misappropriation of resident property on the nurse aide registry against the individual.

Fingerprinting and Criminal Background History Checks for Paid Feeding Assistants

Facilities must comply with current State laws (see Section 43-11-13, Mississippi Code of 1972) that require fingerprinting and criminal background history checks for any employees hired by a licensing facility on or after July 1, 2003, that performs direct hands-on medical patient care and services that are directly employed by the facility or employed on a contractual basis.

Retraining and/or Reciprocity

Feeding Assistant Training Programs approved by the State are required to issue a training certificate to those students that successfully complete the FATP. Hiring facilities are responsible for making sure that any individual used as a Feeding Assistant in their facility is competent to provide feeding assistant tasks. In other words, the burden of proof is on the facility to ensure that any feeding assistant it uses is properly trained. The State Agency has not established a requirement for annual in-service training for feeding assistants; however, facilities are encouraged to develop their own requirements to address additional training needs of feeding assistants on an individual basis.

NATCEP Prohibition

The State Agency does not plan to prohibit a facility with a NATCEP restriction from training feeding assistants; however, the State Agency does reserve the right to prohibit a facility from conducting a Feeding Assistant Training Program (FATP) and the right to withdraw approval of a program per State Agency’s discretion.

Payment/Reimbursement Issued

All reimbursement questions should be directed to the Division of Medicaid.

Facility Contract with Feeding Assistants

With regard to a facility entering into a contract with a feeding assistant that would require that individual to work for a certain period of time, there is nothing in the regulation that would prohibit this practice. This is strictly between the facility and the feeding assistant.

MISSOURI

Downloaded January 2011

Missouri regulations do not contain specific content for Paid Feeding Assistants.
An Association of Montana Health Care Providers (MHA) (h) Paid feeding assistants-State-approved training course.

Definition: A paid feeding assistant means an individual employed by, or under contract to, a nursing facility to feed or assist with the feeding of nursing facility residents.

1. Curriculum. Any facility that wishes to use paid feeding assistants must provide the State Survey and Certification Bureau with a copy of their complete curriculum, teacher guide, student workbooks and learning materials and training schedule for review. Following the review, the Bureau will notify the facility of its findings by letter. Any recommendations for additions and/or changes to the submitted materials will be contained in this letter. If any additions or changes are required, the facility must submit documentation of how these additions and/or changes will be incorporated into their program. The facility must notify the Bureau of the date of planned implementation prior to final approval. Final approval will by letter from this Bureau. Any substantial changes to a program after it has been approved must be submitted to the Bureau for review and re-approval.

2. Instructors. The primary instructor(s) of the course must be a licensed health care professional with experience in nutrition and feeding of nursing facility residents. Licensed health care professionals could include licensed nurses, dietitian, and speech and occupational therapists. Supplemental instructors may be utilized to instruct trainees in those portions of the curriculum for which they have expertise (e.g., Heimlich maneuver, resident rights).

Note: Certified nurse aides and feeding assistants may not be used as instructors.

(i) Successful completion of a State-approved training course means that the trainee has successfully passed the training course. The instructor must verify in writing the successful completion of the course, including a competency evaluation (test). Testing materials must be included in the training materials submitted to the Bureau for approval. Verification of competency must be filed in the trainee’s personnel or training file. The State Agency has developed a skills checklist that may be utilized to verify competency. (ii) State law does not address the use of feeding assistants in nursing homes. Federal requirements are being adopted by the Department to promote quality of care to residents of nursing homes, by allowing nursing homes to utilize paid feeding assistants to enhance their dining programs.

(2) Supervision.

(i) A feeding assistant must work under the supervision of a registered nurse (RN) or licensed practical nurse (LPN). Supervision means the general supervision of the feeding assistant by licensed nurses who are working on the premises of the facility during the times the feeding assistant(s) is performing feeding tasks.

(ii) In an emergency, a feeding assistant must call a supervisory nurse for help on the resident call system. When feeding residents in their rooms, the feeding assistant must call a supervisory nurse on the call system when any problems occur. The facility must have a system in place to notify a...
supervisory nurse when feeding assistants are feeding residents in areas of the facility (e.g., dining rooms/areas) that have no resident call system.

(3) Resident selection criteria.

(i) A facility must ensure that a feeding assistant feeds only residents who have no complicated feeding problems.

(ii) Complicated feeding problems include, but are not limited to, difficulty swallowing, recurrent lung aspirations, and tube or parenteral/IV feedings.

(iii) The facility must base resident selection on the charge nurse's assessment and plan of care.

(a) Minimum training course contents. A State-approved training course for paid feeding assistants must include no less than 8 hours of training, 6 hours of which must be in classroom instruction and 2 hours in clinical demonstrations. Course content must include:

(1) Feeding techniques and

(2) Assistance with feeding and hydration. Content meet these areas of instruction should include:

- Proper nutrition (basic food groups, general and therapeutic diets, mechanically altered diets).
- Food likes and dislikes; obtaining substitutions.

- Adaptive feeding equipment (sippy/nosey cups, lidded mugs, weighted utensils, scoop plates, plate guards, non-slip pads, braces/splints, etc.)

- Consistency of foods and fluids, alternating solids and liquids, bite size and rate of feeding.

- Proper positioning of resident and feeding assistant at meals.

- Encouraging independence.

- Assisting residents who need supervision and cueing.

- Assisting residents with partial physical assistance.

- Feeding the totally dependent resident.

- Assisting the blind.

(3) Communication and interpersonal skills to include:

- Verbal and non-verbal communication.

- Focusing conversations toward residents.

- Individualizing communication with each resident.

- Reporting refusals to eat.

- Reporting amounts of food and fluids consumed (% of meals eaten: measurement of liquids).

(4) Appropriate responses to resident behavior.

- Factors relating to inappropriate behavior; i.e. (confusion, depression, anxiety, disruption,
disorientation, wandering)

- Techniques to gain residents’ cooperation.

(5) Safety and emergency procedures.

- Heimlich maneuver

- Safe food temperatures

(5) Infection Control.

- Hand washing techniques

- Proper use of gloves

- Proper handling of food, utensils, and dishware.

(7) Resident Rights.

Instruction in resident’s rights must include:

- the rights specified in CFR 483.10 of the Long Term Care requirements, and

- the rights specified in the Montana Codes Annotated, Sections 50-5-1101 through 50-51106.

(8) Recognizing changes in residents that are consistent with their normal behavior and the importance of reporting these changes to the supervisory nurse.

- Identifying change in eating patterns.

- Reporting observations while feeding residents. (i.e., pocketing food, poor fitting dentures/edentulous, vomiting, choking while eating, acute illness).

(9) Maintenance of records. A facility must maintain a record of all individuals used by the facility as feeding assistants, who have successfully completed the training course for paid feeding assistants. The record must be kept on file in either the trainee’s personnel or training file.

NEBRASKA

Downloaded January 2011

12-006.04C 7b Paid Dining Assistants:

When the facility utilizes persons other than a licensed registered or practical nurse or a nursing assistant for the feeding of residents, the facility must follow 172 NAC 105. Each facility must establish and implement policies and procedures:
1. To ensure that paid dining assistants providing assistance with feeding to residents in the facility meet the qualification, training and competency requirements specified in 172 NAC 105;

2. To ensure that competency assessments and/or courses for paid dining assistants have been completed in accordance with the provisions of 172 NAC 105;

3. That specify how the facility will meet the role requirements at 172 NAC 105-004, which state that paid dining assistants must:
   a. Only feed residents who have no complicated feeding problems as selected by the facility based on the resident’s latest assessment, plan of care, and determinations by the charge nurse that the resident’s condition at the time of such feeding meets that plan of care and that the paid dining assistant is competent to feed that particular resident;
   b. Work under the supervision of a licensed registered or practical nurse who is on duty, physically present in the facility, and immediately available; and
   c. Call a supervisor for help in an emergency;

4. That specify how the facility will meet the requirements at 172 NAC 105-007, which state that the facility must maintain:
   a. A listing of all paid dining assistants employed at the facility and the number of hours worked;
   b. For each individual paid dining assistant:
      (1) Verification of successful completion of an approved paid dining assistant training course and competency evaluation, and
      (2) Verification that the facility has made checks with the Nurse Aide Registry, the Adult Protective Services Central Registry, and the central register of child protection cases maintained by the Department of Health and Human Services if applicable; and

5. That address how supervision of paid dining assistants will occur and how paid dining assistants will be identified as single-task workers.

Approved by: the Attorney General on November 12, 2004 Approved by: the Governor on December 29, 2004

Filed by: the Secretary of State on December 29, 2004

Effective Date: January 3, 2005

Paid Dining Assistant

Nursing Home Requirements

Each nursing home must maintain:

1. A listing of all paid dining assistants employed at the facility and the number of hours worked;
2. For each individual paid dining assistant:
   
a. Verification of successful completion of an approved paid dining assistant training course and competency evaluation; and

b. Verification that the facility has made checks with the Nurse Aide Registry, the Adult Protective Services Central Registry, and the Child Central Registry if applicable.

Facilities who utilize paid dining assistants must have policies and procedures that address how supervision of paid dining assistants will occur and how paid dining assistants will be identified as single task workers for the purposes of the paid dining assistant regulations.

NEVADA

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Nevada regulations do not contain specific content for Paid Feeding Assistants.

NEW HAMPSHIRE

Downloaded January 2011

Nevada regulations do not contain specific content for Paid Feeding Assistants.

NEW JERSEY

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New Jersey regulations do not contain specific content for Paid Feeding Assistants.

NEW MEXICO

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New Mexico regulations do not contain specific content for Paid Feeding Assistants.

NEW YORK

(k) Feeding Assistant Training Course.

(1) The feeding assistant training program shall consist of a minimum of 15 hours of education and training and must include all of the topics and lessons specified in the state-approved feeding assistant training program curriculum.

(2) The state-approved feeding assistant training program shall include, but not be limited to, training in the following content areas:

(i) Resident rights;

(ii) Infection control;

(iii) Safety and emergency procedures, including Heimlich Maneuver;

(iv) Communications and interpersonal skills;

(v) Changes in resident’s condition;

(vi) Appropriate response to resident behavior;

(vii) Assistance with eating and hydration; and

(viii) Feeding techniques.

(3) The facility shall issue a certificate of completion to each individual who successfully completes the state-approved feeding assistant training program. The certificate shall include the full name of the feeding assistant and the facility-issued trainee or employee ID number, signature of feeding assistant, name and address of the facility, date the individual successfully completed the feeding assistant training program, name, title and signature of the training program instructor, and name and signature of the nursing home administrator.

(4) The facility shall retain records of each individual who completes their state-approved feeding assistant program. Such records shall include, but not be limited to:

(i) the full name of the feeding assistant, facility-issued trainee or employee ID number, name and address of the facility, dates on which each content area of the feeding assistant training program was delivered and successfully completed, the date on which the individual successfully completed the feeding assistant training program, and the name, title and signature of the training program instructor.
North Carolina regulations do not contain specific content for Paid Feeding Assistants

North Dakota

Definitions. The following terms are defined for this chapter, chapter 33-07-04.2, and North Dakota Century Code chapter 23-16:

16. "Paid feeding assistant" means an individual who has successfully completed a department-approved paid feeding assistant training course and is paid to feed or provide assistance with feeding residents of a nursing facility. History: Effective July 1, 1996; amended effective May 1, 2001; July 1, 2004.

General Authority: NDCC 23-01-03, 28-32-02

Law Implemented: NDCC 23-16-01, 28-32-02

33-07-03.2-16.1. Paid feeding assistants.

Any individual employed by a facility, or under contract, to feed or assist with the feeding of nursing facility residents must either have successfully completed a department-approved paid feeding assistant training course or be a certified nurse aide.

1. Instructors of a department-approved paid feeding assistant course must meet the following requirements:

   a. The primary instructor of the program must be a licensed health care professional with experience in the feeding of nursing facility residents.

   b. Certified nurse aides and paid feeding assistants may not be used as instructors in a department-approved paid feeding assistant course.

2. A department-approved paid feeding assistant course must have a curriculum which contains, at a minimum, eight hours of training.

3. The course must, at a minimum, include the following:
a. Feeding techniques.

b. Assistance with feeding and hydration.

c. Communication and interpersonal skills.

d. Appropriate responses to resident behavior.

e. Safety and emergency procedures, including the Heimlich maneuver.

f. Infection control.

g. Resident rights.

h. Recognizing changes in residents that are inconsistent with their normal behavior and the importance of reporting those changes to the supervisory nurse.

4. The instructor must verify in writing the successful completion of the course, including a competency evaluation of feeding skills, by the individual. The process for evaluation of successful completion of the course must be included in the materials submitted to the department for review and approval.

5. The nursing facility must maintain a record of all individuals used by the nursing facility as paid feeding assistants who have successfully completed a department-approved paid feeding assistant training course.

6. The nursing facility must ensure that paid feeding assistants feed only residents who have no complicated feeding problems. Complicated feeding problems include difficulty swallowing, recurrent lung aspirations, and tube or parenteral intravenous feedings.

7. The charge nurse must assess the residents to determine which residents may be fed by a paid feeding assistant. This assessment must be documented and the use of the paid feeding assistant to feed the resident must be included in the residents’ plan of care.

8. The nursing facility must ensure that paid feeding assistants work under the supervision of a registered nurse or a licensed practical nurse. In an emergency, a paid feeding assistant must call a supervisory nurse for help using the resident call system if the nurse is not present during the feeding of a resident.

9. The nursing facility must ensure that the ongoing competency of paid feeding assistants is evaluated and documented at least annually.

10. The initial department approval of a paid feeding assistant course shall be determined based on the review of the information submitted by the nursing facility for compliance with these requirements.

11. The nursing facility must notify the department and receive approval of any subsequent changes in the curriculum or primary instructor of the course.

12. The department shall determine continued compliance with these requirements during an onsite visit to the nursing facility.
13. Failure to comply with these requirements may result in loss of department approval for a paid feeding assistant course to be offered by the nursing facility.

History: Effective July 1, 2004.

General Authority: NDCC 28-32-02

Law Implemented: NDCC 23-16-01

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OHIO

3701-17-07.2 Dining assistants.

(A) For purposes of this rule:

(1) "Long term care facility" has the same meaning as in rule 3701-17-07.1 of the Administrative Code.

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

(3) "Supervision" means that the nurse is in the unit where the feeding assistance is furnished and is immediately available to provide help in an emergency.

(4) "Suspension of approval" means that a dining assistant training course is prohibited from providing training to individuals under this rule until the suspension is lifted pursuant to paragraph (K) of this rule.

(5) "Withdrawal of approval" means that a dining assistant training course is no longer eligible to provide training under this rule, but does not prohibit the submission of a new application for approval.

(B) A long term care facility may use dining assistants to feed residents who, based on the charge nurse's assessment of the resident and the most recent resident assessment performed pursuant to rule 3701-17-10 of the Administrative Code and plan of care developed pursuant to rule 3701-17-14 of the Administrative Code, meet the following conditions:

(1) Need assistance or encouragement with eating and drinking;

(2) Do not have a complicated feeding problem, such as the need for tube or parenteral feeding, recurrent lung aspirations or difficulty swallowing that requires assistance with eating and drinking by a registered nurse, licensed practical nurse, or nurse aide.
(C) If a facility uses a dining assistant the facility must ensure that the dining assistant meets the following requirements:

(1) Except as provided in paragraph (D) of this rule, has successfully completed a dining assistant training course approved by the director as specified in paragraph (G) of this rule;

(2) Is not the subject of a finding of abuse or neglect of a resident or misappropriation of the property of a resident on the nurse aide registry, established pursuant to section 3721.32 of the Revised Code; and

(3) Performs duties only for residents who do not have a complicated feeding problem, and under the supervision of a registered nurse or licensed practical nurse.

(D) A person who has successfully completed a training course for dining assistants and has not worked in a long term care facility as a dining assistant for a period of twelve consecutive months shall not be used as a dining assistant in a long term care facility until the person successfully retakes the training course. The facility must maintain a record of all individuals, used by the facility as dining assistants.

(E) The training course for dining assistants shall provide a combined total of at least ten hours of instruction, including a one hour clinical portion. The clinical portion shall be provided for no more than eight participants at one time. The training course shall follow the curriculum specified in the appendix attached to this rule and address the following topics:

(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) Residents 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.

(F) The instructor or instructors for a dining assistant course shall have appropriate experience and one of the following qualifications:
A current valid license to practice as a nurse, as defined in paragraph (S) of rule 3701-17-01 of the Administrative Code;

A current valid license issued under Chapter 4759. of the Revised Code to practice as a dietitian.

A current valid license issued under Chapter 4753. of the Revised Code to practice as a speech-language pathologist; or

A current valid license issued under Chapter 4755. of the Revised Code to practice as an occupational therapist.

A long term care facility, employee organization, person, governmental entity, or an approved TCEP seeking approval of a dining assistant training course shall make an application to the director on a form prescribed by the director and shall provide any documentation or additional information requested by the director. The application shall include:

1. An attestation that the information contained in the curriculum attached as appendix A of this rule is understood and will be adhered to; and

2. The name and documentation of the qualifications of the instructor or instructors, as specified in paragraph (F) of this rule.

The director shall approve an application of a dining assistant training course that demonstrates compliance with the requirements of this rule and, if the course is operated by or in a long term care facility, the facility is not the subject of an action listed in paragraph (I)(2) of this rule. An approved dining assistant training course is not required to renew an approval provided that the director is notified of any changes to the information provided in the original application.

The director may suspend or withdraw approval of a dining assistant training course if at least one of the following applies:

1. The course is not operated in compliance with this rule; or

2. The course is operated by or in a long term care facility and one of the following applies:

   a. The director has notified the facility of a real and present danger under section 3721.08 of the Revised code;

   b. An action has been taken against the facility under section 5111.51 of the Revised Code; or

   c. The license of the facility is revoked under section 3721.03 of the Revised Code.

Suspension or withdrawal of approval is not subject to appeal. If the director determines that one of the criteria listed in paragraph (I) of this rule applies to a dining assistant training course the director may, upon written notice, immediately suspend the approval of the training course. The written notice to the dining assistant training course shall provide the following:

1. The criteria listed in paragraph (I) of this rule giving rise to the suspension or proposed withdrawal of approval;
(2) An opportunity to submit documentation demonstrating that the matter giving rise to the suspension has been corrected;

(3) An opportunity to request an informal review;

(4) An indication of whether the director proposes to withdraw the approval.

(K) If the director determines that the training course has satisfactorily demonstrated that the matter which gave rise to the suspension has been satisfactorily corrected or otherwise does not apply to the training course, the director shall lift the suspension and, if applicable, rescind the proposal to withdraw.

(L) If the director determines that the training course has not satisfactorily demonstrated that the matter which gave rise to the suspension has been corrected the director shall withdraw the training course approval.


OKLAHOMA

Downloaded January 2011

Subchapter 19 - Feeding Assistants

310:675-19-1. Purpose

This Subchapter establishes standards for training and registration of feeding assistants in Oklahoma in accordance with 42 Code of Federal Regulations Parts 483 and 488. The intent is to give nursing, specialized nursing, and skilled nursing facilities the option to use paid feeding assistants, allowing them to provide more residents with help in eating and drinking and reduce the incidence of unplanned weight loss and dehydration. [Source: Added at 23 Ok Reg 557, eff 12-22-05 (emergency); Added at 23 Ok Reg 2415, eff 6-25-06]

310:675-19-2. Definitions

The following words and terms, when used in this Subchapter, shall have the following meaning, unless the context clearly indicates otherwise:

"Feeding assistant" means an individual who is paid to feed residents by a facility or who is used under an arrangement with another agency or organization and meets the requirements cited in 42 CFR Parts 483 and 488 [63:1-1951(F)(1)].

[Source: Added at 23 Ok Reg 557, eff 12-22-05 (emergency); Added at 23 Ok Reg 2415, eff 625-06]

310:675-19-3. Training course

(a) The following training curricula are approved as training courses and meet the requirements specified
in 42 CFR 483.160(a):


(b) A feeding assistant training course must consist of at least eight (8) hours of training in the required areas of instruction.

(c) A feeding assistant training course instructor must hold a current valid license as:

(1) A registered nurse;
(2) A licensed practical nurse;
(3) A registered dietitian;
(4) A speech-language pathologist or speech therapist; or
(5) An occupational therapist.

(d) Successful completion of a training course is based upon the instructor's assessment using a staff competency checklist that conforms to OAC 310:675-19-8.

(e) The training course must provide a certificate of completion within 30 days of course completion to each individual who successfully completed the course. The certificate shall conform to OAC 310:675-19-8.

(f) The Department will not restrict an individual from repeating a training course. The training course may establish limits on the number of times an individual may repeat the course after unsuccessful attempts.

[Source: Added at 23 Ok Reg 557, eff 12-22-05 (emergency); Added at 23 Ok Reg 2415, eff 6-25-06]

310:675-19-4. Facility requirements

(a) The nursing facility, specialized nursing facility, or skilled nursing facility must maintain a record of each individual who has successfully completed the approved training course. For each individual feeding assistant employed by the facility, the facility must maintain:

(1) A copy of a staff competency checklist completed and signed by the instructor on the form specified in OAC 310:675-19-8;
(2) A copy of a certificate of completion signed by the instructor on the form specified in OAC 310:675-19-8;
(3) Verification that the facility checked with the Feeding Assistant Registry to ensure the individual is eligible for employment; and
(4) Verification of compliance with the Criminal History Background Check in 63 O.S. Supp. 2004, Section 11950.1.

(b) Each feeding assistant must work under the supervision of a registered nurse or licensed practical nurse. In an emergency, the feeding assistant must call a supervisory nurse for help using the resident call system if the nurse is not present during the feeding of a resident.
(c) The facility must ensure that a feeding assistant only assists residents who have no complicated feeding problems. The facility must base resident selection on the charge nurse’s assessment and the resident’s latest assessment and plan of care. Complicated feeding problems include but are not limited to:

1. Difficulty swallowing;
2. Recurrent lung aspirations; or
3. Tube or parenteral/IV feedings.

(d) Instructor time shall not count toward minimum staffing requirements.

(e) The facility shall check the Feeding Assistant Registry before hiring a person to work as a feeding assistant. If the registry indicates that the individual has been found to be personally responsible for abuse, neglect, exploitation, or misappropriation of resident property, that individual shall not be hired by the facility.

(f) The facility must maintain proof of compliance with this subchapter at all times at the facility site.

[Source: Added at 23 Ok Reg 557, eff 12-22-05 (emergency); Added at 23 Ok Reg 2415, eff 6-25-06]

310:675-19-5. Feeding assistant registry

The Department shall maintain a feeding assistant registry consistent with the registry operation described in OAC 310:677-5-2(c). The registry shall contain information consistent with that described in 63 O.S. Supp. 2004, Section 1-1951(D)(3).

[Source: Added at 23 Ok Reg 557, eff 12-22-05 (emergency); Added at 23 Ok Reg 2415, eff 625-06]

310:675-19-6. Feeding assistant registration

(a) An individual may perform the services of a feeding assistant upon successful completion of an approved training course and shall submit a Feeding Assistant Registration Application to the Department on the form specified in 310:675-19-8.

(b) Each registered feeding assistant shall renew individual registration once every twenty-four (24) months. The individual shall submit a Feeding Assistant Renewal Application with proof that within the past twenty-four (24) months they have:

1. Worked at least eight (8) hours for compensation as a feeding assistant; or
2. Completed another eight (8) hour training course that complies with OAC 310:675-19-3.

[Source: Added at 23 Ok Reg 557, eff 12-22-05 (emergency); Added at 23 Ok Reg 2415, eff 625-06]

310:675-19-7. Revocation, suspension and denial

(a) The State Health Department’s procedure afforded a feeding assistant for purposes of investigating, hearing, and making findings on allegations of abuse, neglect, exploitation, or misappropriation of resident property, shall be not less than the process afforded nurse aides pursuant to Title 63 O.S. Supp. 2004 Section 1-1951(D)(4) through (12).

(b) A feeding assistant’s registration may be revoked, suspended or denied if the Department determines with clear and convincing evidence that an individual has been responsible for any of the following:

1. Abuse;
(2) Neglect;

(3) Exploitation; or

(4) Misappropriation of resident or client property.

[Source: Added at 23 Ok Reg 557, eff 12-22-05 (emergency); Added at 23 Ok Reg 2415, eff 625-06]

310:675-19-8. Feeding assistant forms

The forms used for this subchapter are the following.

(1) **Staff competency checklist.** A training course using the curriculum specified in 310:675-19-3(a)(1) may use the checklist provided with that curriculum or the checklist provided by the Department. Other training courses shall use the checklist provided by the Department. The competency checklist provided by the Department requires the following:

(A) The name of the person being trained;

(B) Evaluation of skills task performances including:

(i) Safety and emergency procedures including the Heimlich maneuver;

(ii) Sanitation and washing hands;

(iii) Serving a meal tray;

(iv) Assistance with resident requiring total feeding;

(v) Serving supplemental nourishments; and

(vi) Serving fresh drinking water;

(C) The date of the evaluation; and

(D) Name and signature of the instructor.

(2) **Certificate of completion.** A training course using the curriculum specified in 310:675-19-3(a)(1) may use the certificate of completion provided with that curriculum or the certificate provided by the Department. Other training courses shall use the certificate provided by the Department. The certificate of completion provided by the Department requires the following:

(A) Name of the person being trained;

(B) Name of the curriculum;

(C) Location where the training occurred;

(D) Date training was completed;

(E) A statement that the person successfully completed eight hours of training to become a feeding assistant; and

(F) Name and signature of the instructor.

(3) **Feeding assistant registration application.** The application form requires the following for each
individual:
(A) Name;
(B) Date of birth;
(C) Contact information;
(D) Information sufficient to identify the individual including social security number;
(E) A copy of the certificate of completion from a training course that meets the requirements of OAC 310:67519-3; and
(F) Applicant's signature affirming the truthfulness and completeness of the application.

(4) Feeding assistant renewal application. The application form requires the following for each individual:
(A) Name;
(B) Date of birth;
(C) Contact information;
(D) Information sufficient to identify the individual including social security number;
(E) Proof of work experience or retraining as required in OAC 310:675-19-6(c); and
(F) Applicant's signature affirming the truthfulness and completeness of the application.

[Source: Added at 23 Ok Reg 557, eff 12-22-05 (emergency); Added at 23 Ok Reg 2415, eff 625-06]
(B) The facility Director of Nursing Services, RN Care Manager or RN Charge Nurse must assess and document resident selection for dining assistance. The resident assessment be based on, but is not limited to:

(i) the resident's appropriateness for dining assistance;

(ii) the resident's feeding and hydration needs;

(iii) the resident's communication, behavior and interpersonal skills;

(iv) Risk factors including nausea (acute and ongoing), difficulty swallowing, seizure disorders, acute gastrointestinal issues, vomiting; and

(v) the resident's latest MDS assessment and plan of care.

(C) The documented assessment must be updated promptly after any significant change of condition and reviewed quarterly.

(b) Scope of Duties

(A) Permitted Duties

(i) Assist residents with eating and drinking

(ii) Transport residents to and from dining area;

(iii) Distribute meal trays

(iv) Ensure accurate meal delivery by verification with accompanying meal card;

(v) Provide assistance in preparing residents for meals including, but not limited to, placement of eye glasses, washing hands and face and placement of clothing protector;

(vi) Assist with insertion of dentures for residents that can self direct care;

(vii) Set up meal tray for residents including but not limited to, opening food packets, positioning and cutting the food;

(viii) Provide minimal assistance with positioning, as needed, for feeding and hydration and;

(ix) Measure and record food and fluid intake.

(x) Measure and record food and fluid intake.

(B) Prohibited Duties

(i) Transfer residents;

(ii) Assist with tube feeding or IV nutrition;

(iii) Assist with insertion of dentures for residents unable to self direct care;
(iv) Provide standby assistance with ambulation or activities requiring gait belt;

(v) Assist with food containing medication;

(vi) Turn, lift or extensively reposition residents; and

(vii) Other CNA tasks including oral care.

(c) Training. A Department-approved facility Dining Assistant training course must include, at a minimum, 16 hours of training and evaluation in the following topics and subject matters and as identified in Exhibit 86-2, which is attached to and made a part of these rules

(A) Training Topics

(i) Scope of authorized duties and prohibited tasks.

(ii) Feeding and hydration techniques.

(iii) Skills for assisting with feeding and hydration.

(iv) Communication and interpersonal skills.

(v) Appropriate responses to resident behavior.

(vi) Recognizing changes in residents that are inconsistent with their normal behavior and the reporting of those changes to the registered nurse (RN) or licensed practical nurse (LPN).

(vii) Safety and emergency procedures including the abdominal thrust. (viii) Infection control.

(ix) Assisting residents with dementia.

(x) Resident rights.

(xi) Abuse prevention and reporting.

(B) Instructors of the Department-approved facility Dining Assistant training course must be licensed/certified in one of the following disciplines: registered nurse, registered dietician, occupational therapist or speech language pathologist.

(C) “Successful completion” means a passing score on a written exam for a Department approved facility Dining Assistant training course and satisfactory completion of competency evaluation as determined by the instructor. A Department-approved certificate will be issued to each dining assistant upon successful completion.

(D) The Department will evaluate, select and approve at least one Dining Assistant training course curriculum which includes the topic and subject matters contained in Exhibit 86-2. The Department will periodically re-evaluate its selection and approval.

(d) Supervision of dining assistants
(A) Dining assistants must work under the supervision of a registered nurse or licensed practical nurse. A registered nurse or licensed practical nurse must be readily available to respond to urgent or emergent resident needs.

(B) In an emergency, dining assistants must immediately obtain appropriate staff assistance including the use of the resident call system.

(e) Facilities must ensure that dining assistants perform only those tasks for which they are trained and permitted to perform.

(f) It is the responsibility of the facility Director of Nursing Services, RN Care Manager or licensed Charge Nurse to ensure that dining assistants are oriented to the specific residents to whom they are assigned prior to providing dining assistance.

(g) Maintenance of records. Facilities must maintain a record of all facility dining assistants. The record must contain a copy of each dining assistant’s certificate for successful completion of a Department-approved Dining Assistant training course. Upon request, a facility will share copies of dining assistant training certificates with other facilities.

Stat. Auth: ORS 410 & 441

Stats. Implemented: ORS 441.055 & 441.615

EXHIBIT 86-2: Dining Assistant Training Curriculum

1. Definition of Dining Assistant and Permitted and Prohibited Duties.

2. Dining, Hydration and Other Techniques.

a. Hand over hand

b. Cuing and prompting

c. Use of proper utensils and assistive devices (rim plates, weighted spoons, nose and sippy cups, straws, etc.)

d. Proper positioning of dining assistant and residents

e. Visually Impaired Clock Method

f. Setting up the meal

g. Pace of feeding methods

h. Preparation of dentures for application (not to include oral care)

i. Proper transportation techniques to and from dining area (wheelchair, walker, gerichair and meriwalker)

3. Dining and Hydration Concepts.
a. Diet types, textures and fluid consistencies
b. Food pyramid
c. Importance and promotion of fluid intake
d. Environmental considerations while feeding
e. Measurement and recording of foods and fluids
f. Accessing information regarding specific feeding directives
g. Basic anatomy of chewing and swallowing (introduction of Dysphasia, aspiration, choking and signs of difficulty swallowing)
h. Methods of serving trays

   a. Definitions of communication (verbal, nonverbal, etc.)
   b. Techniques and adaptations to resident needs (cuing, prompting)
   c. Significance of positive and negative communication on nutrition
d. Residents with sensory deficits
e. Resident social interactions during dining
f. Access and use of plan of care

5. Appropriate Responses to Resident Behaviors.
   a. Understanding resident behaviors (refusing to eat, taking of other residents' food, biting down on spoon, etc.)
   b. Responding to expected and unexpected behaviors
   c. How to describe resident behavior(s)
   d. What to report regarding resident behavior(s)
   e. Understanding and Feeding Residents with Dementia.
   f. Characteristics of Dementia
   g. Causes of Dementia (head injury, alcohol abuse, Parkinson's, etc.)
   h. Progression of Dementia and how it may affect dining and hydration
   i. Approaches and techniques for assisting residents with Dementia

a. Definition of observation and opinion
b. How and to whom changes in condition are reported
c. Identify types and timing of information that needs to be reported.

7. Safety and Emergency Procedures.
a. Introduction to safety and emergency procedures
b. Finger sweep and Abdominal Thrust emergency techniques
c. Choking prevention and detection
d. What not to do during a choking episode
e. Scalds and burns

8. Infection Control.
a. Standard Precautions
b. Proper glove use (when and how to use)
c. Food sanitation
d. How infections spread
e. Reporting of open wounds or illness

9. General Food Safety.
a. Basics of food borne illnesses
b. Understanding and maintaining safe and palatable food temperatures

10. Resident Rights, Abuse and Reporting Abuse.
a. Resident Rights in general
b. Rights specific to dining and hydration (right to refuse, choice, dignity, etc.)
c. Abuse definition and reporting
d. Abusive conduct
e. Requirements for reporting abuse and to whom
f. Consequences of abuse findings
g. Roles of Office to Long Term Care Ombudsman, Protective Services, Client Care Monitoring Units, and surveyors.
h. Confidentiality and how it applies to dining assistants.

   a. Hand washing
   b. Assisting a Resident with Dining

PENNSYLVANIA

Pennsylvania regulations do not contain specific content for Paid Feeding Assistants.

RHODE ISLAND

Assistance with Eating and Hydration

25.11 Nursing facilities may employ resident attendants to assist residents with activities of eating and drinking. The resident attendant shall not be counted in the direct care staffing levels (see also section 24.4 herein).

25.12 A nursing facility shall not use any individual on a paid or unpaid basis in the capacity of a resident attendant, as defined herein, in the nursing home unless the individual:

   a) has satisfactorily completed a training program approved by the Director, as described in section 25.14 of these regulations;

   b) continues to provide competent eating and hydration assistance as determined by the facility’s professional nursing staff.

25.13 The facility shall ensure:

   a) the resident attendant works in congregate dining areas under the supervision of a registered nurse (RN) or licensed practical nurse (LPN);

   b) the resident attendant wears a photo identification badge in accordance with section 14.14 of these regulations;

   c) the resident attendant only assists residents selected by the professional nursing staff, based on the

   

Page 62 of 77
charge nurse’s assessment and the resident’s latest assessment and plan of care;

d) the resident attendant assists with eating and drinking for residents who have no complicated eating/feeding problems, including but not limited to:

i. Tube or Parenteral/IV feedings;

ii. Recurrent lung aspirations;

iii. Difficulty swallowing;

iv. Residents at risk of choking while eating or drinking;

v. Residents with significant behavior management challenges while eating or drinking;

vi. Residents presenting other risk factors that may require emergency intervention.

e) maintenance of records regarding individuals acting as resident attendants and the training program attended.

**SOUTH CAROLINA**

Downloaded January 2011

South Carolina regulations do not contain specific content for Paid Feeding Assistants.

**SOUTH DAKOTA**

Downloaded January 2011

44:04:01:01. Definitions.

Terms defined in SDCL 34-12-1.1 have the same meaning in this article. In addition, terms used in this article mean:

(15) "Dining assistant," a person who has successfully completed a dining assistant program approved pursuant to § 44:04:07:17;

Source: SL 1975, ch 16, § 1; 6 SDR 93, effective July 1, 1980; 14 SDR 81, effective December 10, 1987; 15 SDR 155, effective April 20, 1989; 17 SDR 122, effective February 24, 1991; 19 SDR 95, effective January 7, 1993; 21 SDR 118, effective January 2, 1995; 22 SDR 70, effective November 19, 1995; 24 SDR 90, effective January 4, 1998; 26 SDR 96, effective January 23, 2000; 27 SDR 59, effective December 17, 2000; 28 SDR 83, effective December 16, 2001; 29 SDR 81, effective December 11,

General Authority: SDCL 34-12-13.

Law Implemented: SDCL 34-12-13, 34-12-32.

Note: National Certification Council of Activity Professionals, 520 Stewart, Park Ridge, IL 60068. Phone (708) 698-4263.

44:04:07:17. Nursing facility dining assistance program.

A nursing facility may develop a program to train dining assistants. The program must be approved by the department. To be approved by the department, the program must include instruction from a speech therapist and registered dietitian and consist of ten hours of training and clinical experience.


Law Implemented: SDCL 34-12-13.

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**TENNESSEE**

Downloaded January 2011

Tennessee regulations do not contain specific content for Paid Feeding Assistants.

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**TEXAS**

Downloaded January 2011

Texas Administrative Code

**TITLE 40: SOCIAL SERVICES AND ASSISTANCE**

**PART 1: DEPARTMENT OF AGING AND DISABILITY SERVICES CHAPTER 19: NURSING FACILITY REQUIREMENTS FOR LICENSURE AND MEDICAID CERTIFICATION**

**SUBCHAPTER L: DIETARY SERVICES**

**RULE §19.1113 Paid Feeding Assistants**

(a) State-approved training course. The facility may use a paid feeding assistant, if the paid feeding assistant has successfully completed a state-approved training course that meets the requirements of §19.1115 of this chapter (relating to Requirements for Training of Paid Feeding Assistants) before
feeding residents. The facility must not use any individual working in the facility as a paid feeding assistant unless that individual has successfully completed the state-approved training course for paid feeding assistants.

(b) Supervision. A paid feeding assistant must work under the supervision of a registered nurse or a licensed vocational nurse. In an emergency, a paid feeding assistant must call a supervisory nurse for help. A paid feeding assistant can only feed residents in the dining room.

(c) Resident selection criteria.

(1) The facility must ensure that a paid feeding assistant only feed residents who have no complicated feeding problems, which include difficulty swallowing, recurrent lung aspirations, and tube or parenteral/IV feedings.

(2) The facility must base resident selection on the charge nurse's assessment and the resident's latest assessment and plan of care.

Source Note: The provisions of this §19.1113 adopted to be effective June 1, 2004, 29 TexReg 5416

RULE §19.1115 Requirements for Training of Paid Feeding Assistants

(a) Minimum training course contents. A state-approved training course for paid feeding assistants must include, at a minimum, 16 hours of training in the following:

(1) feeding techniques;

(2) assistance with feeding and hydration;

(3) communication and interpersonal skills;

(4) appropriate response to resident behavior;

(5) safety and emergency procedures, including the Heimlich maneuver;

(6) infection control;

(7) resident rights; and

(8) recognizing changes in residents that are inconsistent with their normal behavior and the importance of reporting those changes to the supervisory nurse.

(b) Maintenance of records. The facility must maintain a record of all individuals used by the facility as paid feeding assistants who have successfully completed the state-approved training course for paid feeding assistants. At a minimum, documentation must include the date and location of the course, the name of the trainer, and a statement that the course was successfully completed.

(c) Repeat training. If paid feeding assistants seek employment at a facility other than the facility at which they were trained, they will not be required to repeat the state-approved training course if documentation of successful course completion, as outlined in subsection (b) of this section, is given to the hiring facility.
10) A nursing care facility may use trained dining assistants to aid residents in eating and drinking if:

a) a licensed practical nurse-geriatric care manager, registered nurse, advance practice registered nurse, speech pathologist, occupational therapist, or dietitian has assessed that the resident does not have complicated feeding problems, such as recurrent lung aspirations, behaviors which interfere with eating, difficulty swallowing, or tube or parenteral feeding; and

b) The service plan or plan of care documents that the resident needs assistance with eating and drinking and defines who is qualified to offer the assistance.

11) If the nursing care facility uses a dining assistant, the facility must assure that the dining assistant:

a) has completed a training course from a Department-approved training program;

b) has completed a background screening pursuant to R432-35; and

c) performs duties only for those residents who do not have complicated feeding problems.

12) A long-term care facility, employee organization, person, governmental entity, or private organization must submit the following to the Department to become Department-approved training program:

a) a copy of the curriculum to be implemented that meets the requirements of subsection (13); and

b) the names and credentials of the trainers.

13) The training course for the dining assistant shall provide eight hours of instruction and one hour of observation by the trainer to ensure competency. The course shall include the following topics:

a) feeding techniques;

b) assistance with eating and drinking;

c) communication and interpersonal skills;

d) safety and emergency procedures including the Heimlich maneuver;

e) infection control;
f) resident rights;
g) recognizing resident changes inconsistent with their normal behavior and the importance in reporting those changes to the supervisory nurse;
h) special diets;
i) documentation of type and amount of food and hydration intake;
j) appropriate response to resident behaviors, and)

14) The training program shall issue a certificate of completion and maintain a list of the dining assistants. The certificate shall include the training program provider and provider’s telephone number at which a long-term care facility may verify the training, and the dining assistant’s name and address.

15) To provide dining assistant training in a Department-approved program, a trainer must hold a current valid license to practice as:
   a) a registered nurse, advanced practice registered nurse or licensed practical nurse-geriatric care manager pursuant to Title 58, Chapter 31b;
   b) a registered dietitian, pursuant to Title 58, Chapter 49;
   c) a speech-language pathologist, pursuant to Title 58, Chapter 41; or
   d) an occupational therapist, pursuant to Title 58, Chapter 42a.

16) The Department may suspend a training program if the program’s courses do not meet the requirements of this rule.

17) The Department may suspend a training program operated by a nursing care facility if:
   a) a federal or state survey reveals failure to comply with federal regulations or state rules regarding feeding or dining assistant programs;
   b) the facility fails to provide sufficient, competent staff to respond to emergencies;
   c) the Department sanctions the facility for any reason; or
   d) the Department determines that the facility is in continuous or chronic non-compliance under state rule or that the facility has provided sub-standard quality of care under federal regulation.
1.0 Feeding Assistant Definition

1.1 Paid feeding assistant means a person who meets the requirements specified in § 42 CFR 483.35
(h)(2), and who is paid by a long term care facility, i.e., a nursing home or intermediate care facility for persons with mental retardation (ICFs/MR), or a person who is used under an arrangement with another agency or organization, to assist residents who have no feeding complications with the activities of eating and drinking. The feeding assistant is not permitted to provide any other nursing or nursing related service. Paid feeding assistants must be at least 16 years old. Facilities are prohibited from counting paid feeding assistants toward their minimum staff requirements.

1.2 A feeding assistant does not include a person who is a:

a. Licensed health professional or registered dietitian;
b. Volunteers without money compensation; or
c. Nurse aide.

2.0 Wisconsin Feeding Assistant Training Requirements

2.1 Wisconsin’s feeding assistant training programs must require enrolled individuals to successfully complete an approved training program, which includes the following federally mandated topics, covered during a minimum of eight (8) hours of instruction:

a. Feeding techniques.
b. Assistance with feeding and hydration.
c. Communication and interpersonal skills.
d. Appropriate responses to resident behavior.
e. Safety and emergency procedures, including the Heimlich maneuver.
f. Infection control. Resident rights.
g. Recognizing changes in residents that are inconsistent with the norm and the importance of reporting changes to the nurse.

2.2 The feeding assistant training program must also provide instruction on the following topics:

a. Wisconsin’s Caregiver Program, including background check requirements, the need to promptly report any misconduct allegations, the definitions of abuse or neglect of a client or misappropriation of a client’s property and the Rehabilitation Review requirements.
b. The resident population who will be served by the feeding assistant in a facility-based program. The facility-based training program curriculum must include training specific to the identified population type(s). This training must include, but is not limited to,

1. Characteristics of the population, such as the population members’ physical, social and mental health needs, and specific medications or treatments needed by the residents,

2. Program services needed by the residents,
3. Meeting the needs of persons with a dual diagnosis (co-occurrence of mental health disorders and alcohol and/or drug dependence or abuse), and maintaining or increasing his or her social participation;

4. Self direction, self care and vocational abilities.

c. Instruction of feeding assistants who have been trained by another facility's training program, for their specific selected population.

2.3 The program determines the number of extra hours required for the training topics listed under 2.2, a-c. However, the training must be in addition to the minimum eight (8) hours required for the federally mandated topics listed under 2.1, a-h.

2.4 Programs may choose to add increased training requirements.

2.5 Training programs must stress the only direct, hands-on duty a feeding assistant is permitted to perform is assisting residents to eat or drink who have no complicated feeding problems.

3.0 Standardized Feeding Assistant Curriculum

3.1 Feeding assistant training programs must use a training curriculum, which has been pre-approved by the Department and determined to comply with the federal requirements. Entities are allowed to choose one of the following pre-approved, standardized curriculum models: Assisted Dining: The Role and Skills of Feeding Assistants, by the American Health Care Association (exit DHFS)

a. Eating Matters-A Training Manual for Feeding Assistants, by the American Dietetic Association

b. Paid Feeding Assistant Training Program, by the Wisconsin Department of Health and Family Services

3.2 Training programs must select one of the model curriculums listed above to provide feeding assistant students instruction on the federally mandated topics (see 2.1, a-h).

3.3 Feeding assistant training programs must utilize the Department of Health and Family Services, Bureau of Quality Assurance video, The Wisconsin Caregiver Program: A Blueprint for Excellence [see Caregiver Program - Publications], to provide feeding assistant students instruction regarding the requirements of the Caregiver Program.

3.4 Facility-based training programs must submit their proposed training materials to provide feeding assistants instruction regarding the facility’s selected resident population.

3.5 Although the pre-approved standardized training curriculums include additional skill information (e.g., intake and output, special care needs for residents with dysphagia, etc.), the instructor must stress the feeding assistant will not be permitted to perform any other hands-on duty, beyond assisting residents to eat and drink who have no complicated feeding problems.

4.0 Successful Training Program Completion

4.1 An individual may not provide hands-on assistance with feeding or hydrating residents unless the individual has successfully completed the following:
a. A State-approved training program for feeding assistants, including additional instruction on the
selected resident population and the Wisconsin Caregiver Program requirements.

b. After completing the training course, a State-approved standardized written quiz with a score of
75 percent or greater. Individuals may request the quiz to be administered orally. Instructors should
consider the needs of persons who have limited English proficiency or reading difficulties.

c. A State-approved standardized skill demonstration, determining handwashing and resident
feeding competency with a score of 75 percent or greater.

4.2 The instructor must observe the trainee’s performance and initial and date each skill to verify the
satisfactory or unsatisfactory performance.

4.3 Programs may choose to add increased testing requirements.

4.4 Students who do not successfully pass the initial competency evaluation will be allowed the
opportunity to review the training materials and retake the test. Programs can establish the
number of times a candidate may retake the test. However, the program must document the failure,
opportunity for review and subsequent retake testing date.

4.5 The instructor must issue a State approved certificate to each participant who successfully
completes the program, documenting the name of the participant, the training program and the date
of successful completion.

5.0 Qualified Instructor

5.1 Feeding assistant training programs shall determine the appropriate qualifications for their
instructors (e.g., registered nurse, dietitian, speech therapist, etc.), based on the needs of the selected
resident and facility.

5.2 Training programs must provide the name and qualifications of the proposed instructor to BQA’s
Office of Caregiver Quality (OCQ).

5.3 The primary instructor may supplement the course by including other individuals for lecture or
demonstration whose qualifications or experience add benefit to the training program.

5.4 A paid feeding assistant is not permitted to lead the training of another feeding assistant students.

6.0 Feeding Assistant Training Program Approval Process

6.1 Entities wishing to operate a feeding assistant training program must submit the Wisconsin
Feeding Assistant Training Program Application form, DDE-2588, (see attached found at
http://dhfs.wisconsin.gov/forms/DDES/ DDE2588.pdf (PDF, 112 KB), with their proposed selected
resident population curriculum and proposed feeding assistant instructor information to the Office of
Caregiver Quality. Priority will be given to new program applications, as BQA has not accepted
requests to train single task workers since October 2000.

6.2 All facilities currently approved to train single task workers will also be required to submit the
Wisconsin Feeding Assistant Training Program Application form, DDE-2588 (PDF, 112 KB), along
with their proposed training curriculum, selected resident population curriculum and feeding
assistant instructor information to the Office of Caregiver Quality no later than Wednesday, June 30, 2004.

6.3 The Office of Caregiver Quality will review the application and supporting materials and will determine whether to approve or deny the feeding assistant training program. OCQ will issue a written notice regarding BQA's decision, with a copy to the appropriate Regional Field Operations Director (RFOD), within 45 calendar days of receiving a complete application.

6.4 The Department is obtaining a supply of the pre-approved feeding assistant training program curricula. Approved feeding assistant training program curricula will be issued, at no cost, one copy (instructor and student, if applicable) of their selected standardized training curriculum, a Wisconsin Caregiver Program video cassette, standardized competency evaluation materials, feeding assistant training program and grandparented certificate templates, and a feeding assistant roster template.

7.0 Wisconsin Feeding Assistant Employment Requirements

7.1 A long term care facility (nursing home or ICF/MR) may not employ or use any individual as a feeding assistant unless the individual has:

a. Successfully completed a feeding assistant training and competency evaluation program; or

b. Met the feeding assistant grandparenting requirements and has been determined competent to provide feeding and hydration services;

c. Reached 16 years of age;

d. Successfully passed a caregiver background check, having no offenses on the Offenses Affecting Caregiver Eligibility Misconduct Offenses List, HFS 12, Appendix A (exit DHFS; PDF, 205 KB), that bar employment as a caregiver.

7.2 Facilities must ensure feeding assistants only serve residents who have no complicated feeding problems with eating and hydration.

7.3 Complicated feeding problems include, but are not limited to, difficulty swallowing, recurrent lung aspirations, and tube or parenteral/IV feedings.

7.4 Residents with a clinical condition, such as the conditions listed above, require the employee providing feeding or hydration services to be a licensed health care professional or nurse aide.

7.5 The facility must base their resident selection on the charge nurse's assessment and the resident's latest assessment and plan of care.

7.6 Feeding assistants 18 years and older must work under the general supervision of a registered nurse (RN), or licensed practical nurse (LPN). While the Department anticipates most feeding assistants will serve residents in the dining room, feeding assistants are allowed to serve residents in their own rooms. The feeding assistant is not permitted to perform other nursing or nursing-related duties (e.g., measuring or recording input or output, transferring, toileting, etc.). In an emergency, a feeding assistant must immediately call a supervisory nurse on the resident call system.
7.7 Feeding assistants between the ages of 16 and 18 years must be supervised more closely than assistants who are over 18 years. Feeding assistants between 16 and 18 years must work under the direct supervision of an RN or LPN, i.e., the RN or LPN must be on the same floor or unit as the feeding assistant, but not necessarily side-by-side.

7.8 Feeding assistants must receive an annual inservice on relevant feeding assistant topics (any topic area included in the curriculum is appropriate). In addition, feeding assistants must be evaluated on a yearly basis to document that their skill performance and feeding competence is

8.0 Current Single Task Worker Grandparenting Policy

8.1 Single task worker programs that were previously approved by BQA, must verify the single task worker completed a training course that meets the federal minimum eight-hour training requirements for a feeding assistant (see 2.1, a-h). Facilities may give these employees credit for their work experience with the selected resident population to satisfy the requirements of 2.2. Facilities may issue their single task workers who meet the federal minimum training requirements a certificate to verify their grandparented status.

8.2 Single task workers, who have not met the minimum feeding assistant training requirements outlined in 2.1, a-h, covering the federally mandated topics in the eight (8) hour minimum, must be provided the necessary hours of instruction on those missing topics by Saturday, July 31, 2004.

8.3 An employee who does not meet the minimum feeding assistant training requirements by July 31, 2004, may not be used as a feeding assistant until s/he has satisfactorily completed a feeding assistant training and competency evaluation.

9.0 Feeding Assistant Training Program Operation

9.1 Approved feeding assistant training programs must submit the following information to the Office of Caregiver Quality (OCQ):

a. Substantial Change: Any substantial changes in the program must be reported to the Office of Caregiver Quality in writing within 10 calendar days. The program must not implement the change until OCQ approves the program’s proposed change in writing. "Substantial change" includes changes regarding the classroom site, clinical site, primary instructor, or curriculum.

b. Annual Report: The program must submit an annual report to the Office of Caregiver Quality on a form provided by the Department, and must indicate the number of feeding assistants who were trained and tested during the year, including the number of individuals who dropped out or who failed the program. The Office of Caregiver Quality will provide a copy of the annual report to the appropriate BQA Regional Field Office Director.

10.0 Program Record Retention Requirements

10.1 Feeding assistant training programs must maintain the following records:

a. For a minimum of three (3) years, all student skill checklists, written examinations, certificates and other relevant training records.
Documentation of the training conducted and identification of the instructor conducting the training.

c. Record of all individuals who have successfully completed the feeding assistant training and competency testing program.

10.2 Training programs must maintain the security of the test materials and certificate templates, to ensure disclosure or forgery does not occur.

10.3 Facilities employing feeding assistants must maintain the following personnel records:

a. Feeding assistant roster, recording all individuals employed by the facility as feeding assistants who successfully completed the feeding assistant training and competency evaluation (written or oral exam and skill demonstration).

b. A copy of the feeding assistant training or grandparenting certificate, kept in the individual’s personnel file.

c. The selected resident’s medical record, documenting no complicated feeding condition exists.

d. Annual inservice session(s), relating to feeding assistant duties.

e. Annual evaluation documentation, determining a feeding assistant’s continued competence in feeding residents.

11.0 Caregiver Misconduct Reporting Requirements

11.1 Wisconsin’s Caregiver Law, implemented in October 1998, requires all BQA-regulated entities to report allegations of misconduct (abuse or neglect of a client, or misappropriation of a client’s property) regarding any caregiver who is an employee of or contractor with the facility and who has regular, direct contact with clients. Feeding assistants meet Wisconsin’s definition of a caregiver and allegations involving a feeding assistant are subject to the caregiver misconduct reporting requirements. The name of any non-credentialed caregiver (including a feeding assistant), with a substantiated finding of misconduct will be entered on the Wisconsin Caregiver Misconduct Registry.

12.0 Survey Process

12.1 BQA’s current survey process provides oversight of facilities’ use of feeding requirements. During surveys of nursing homes and ICFs/MR, surveyors may observe the meal or snack service to note if any of the residents receiving feeding assistance are showing signs of difficulty eating or drinking. If such difficulty is observed, surveyors investigate to determine if this is an unusual occurrence or a chronic problem and whether the feeding assistant has successfully completed an approved feeding assistant training program or met the grandparenting requirements. The feeding assistant’s personnel records must contain a copy of the approved feeding assistant training or grandparenting certificate.

12.2 Surveyors will determine if residents being served by a feeding assistant are persons with no complicated feeding problems. This determination may include a review of medical charts and discussion with the professional nursing staff.

12.3 BQA surveyors may monitor the facility’s residents during feeding, to ensure only the residents
included in the approved selected population are fed or hydrated by the feeding assistants.

12.4 A facility may be subject to citation if deficiencies are identified by the surveyor. The facility will be required to retain training and employment records of feeding assistants, to document the facility’s compliance with program requirements and to provide a record for surveyors to review.

12.5 If the surveyors observe inadequacies in the feeding assistant training program, that information will be referred to the Office of Caregiver Quality. Feeding assistant training program complaints that warrant further investigation will result in an unannounced on-site review.

13.0 NATCEP Prohibition

13.1 Substandard quality of care citations that result in a nurse aide training and competency evaluation program (NATCEP) prohibition, will be reviewed to determine the appropriate action for the feeding assistant training program. Program decisions will be made on a case-by-case basis.

13.2 Citations normally resulting in a NATCEP prohibition, that directly relate to poor quality care due to the feeding assistant program, may result in termination of the feeding assistant training program.

13.3 Feeding assistant programs may request a training program waiver by submitting a request in writing to BQA’s Office of Caregiver Quality. After consulting with the Ombudsman Program and CMS, OCQ will issue a written decision, either approving or denying the request, within 45 calendar days of receiving a complete waiver request.

14.0 Training Program Suspension or Termination

14.1 Training programs failing to meet their program requirements or operating under conditions other than those contained in the approved application, may be issued a notice of suspension, revocation of the feeding assistant training program approval, or a voluntary or imposed plan of correction.

15.0 Appeals

15.1 For any of the following Department actions, a feeding assistant training program may request a hearing by filing an appeal with the Division of Hearings and Appeals (DHA):

a. A denial of an application to operate a feeding assistant training program.

b. A denial of an approval of a feeding assistant instructor.

c. A termination or suspension of an approved feeding assistant training program.

d. An imposed plan of correction.

e. A denial of a request for a waiver or the revocation of a waiver.

15.2 The request for a hearing must be in writing and must be filed with the Division of Hearings and Appeals no later than 30 days after the date of the denial, suspension or revocation. The appeal is considered filed when received by DHA.
Wyoming regulations do not contain specific content for Paid Feeding Assistants.

Federal Regulations

§ 483.35 Dietary services.

(h) Paid feeding assistants—

(1) State-approved training course. A facility may use a paid feeding assistant, as defined in §488.301 of this chapter, if—

(i) The feeding assistant has successfully completed a State-approved training course that meets the requirements of §483.160 before feeding residents; and

(ii) The use of feeding assistants is consistent with State law.

(2) Supervision.

(i) A feeding assistant must work under the supervision of a registered nurse (RN) or licensed practical nurse (LPN).

(ii) In an emergency, a feeding assistant must call a supervisory nurse for help on the resident call system.

(3) Resident selection criteria.

(i) A facility must ensure that a feeding assistant feeds only residents who have no complicated feeding problems.

(ii) Complicated feeding problems include, but are not limited to, difficulty swallowing, recurrent lung aspirations, and tube or parenteral/IV feedings.

(iii) The facility must base resident selection on the charge nurse's assessment and the resident's latest assessment and plan of care.
§ 483.160 Requirements for training of paid feeding assistants.

(a) Minimum training course contents. A State-approved training course for paid feeding assistants must include, at a minimum, 8 hours of training in the following:

(1) Feeding techniques.

(2) Assistance with feeding and hydration.

(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.

(b) Maintenance of records. A facility must maintain a record of all individuals, used by the facility as feeding assistants, who have successfully completed the training course for paid feeding assistants. [68 FR 55539, Sept. 26, 2003]