
1) The facility must provide each resident with a safe, palatable, well-balanced diet that meets the daily nutritional and special dietary needs of each resident.

2) There must be adequate staff employed by the facility to meet the dietary needs of the residents.
   a) The facility must employ a dietitian either full-time, part-time, or on a consultant basis.
   b) The dietitian must be certified in accordance with Title 58, Chapter 49, Dietitian Certification Act.
   c) If a dietitian is not employed full-time, the administrator must designate a full-time person to serve as the dietetic supervisor.
   d) If the dietetic supervisor is not a certified dietitian, the facility must document at least monthly consultation by a certified dietitian according to the needs of the residents.
   e) The dietetic supervisor shall be available when the consulting dietitian visits the facility.

3) The facility must develop menus that meet the nutritional needs of residents to the extent medically possible.
   a) Menus shall be:
      i) prepared in advance;
      ii) followed;
      iii) different each day;
      iv) posted for each day of the week;
      v) approved and signed by a certified dietician and;
      vi) cycled no less than every three weeks.
   b) The facility must retain documentation for at least three months of all served substitutions to the menu.

4) The facility must make available for Department review all food sanitation inspection reports of State or local health department inspections.

5) The attending physician must prescribe in writing all therapeutic diets.
6) There must be no more than a 14-hour interval between the evening meal and breakfast, unless a substantial snack is served in the evening.

7) The facility must provide special eating equipment and assistive devices for residents who need them.

8) The facility's food service must comply with the Utah Department of Health Food Service Sanitation Regulations R392-100.

9) The facility must maintain a one-week supply of nonperishable staple foods and a three-day supply of perishable foods to complete the established menu for three meals per day, per resident.

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

k) use of adaptive equipment.

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.

R432-200-7. Administration and Organization. [small health care facilities]
(b) All dietary and other staff who handle food shall obtain a Food Handler's Permit from the local health department.

R432-200-22. Dietary Services. [small health care facilities]

(1) Organization.

(a) There shall be an organized dietary service that provides safe, appetizing, and nutritional food service to residents.

(b) The service shall be under the supervision of a qualified dietetic supervisor or consultant.

(c) If a facility contracts with an outside food management company, the company shall comply with all applicable requirements of these rules.

(2) See R432-150-24.