415.14 Dietary services. The facility shall provide each resident with a nourishing, palatable well-balanced diet that meets the daily nutritional and special dietary needs of each resident.

(a) Direction. The facility shall employ a qualified dietitian either full-time, part-time or on a consultant basis who shall be responsible for the nutrition services in the nursing home.

(1) The facility shall designate a qualified dietitian or a dietetic service supervisor qualified on the basis of education, training and experience in food service management to serve as the director of food service. If the director of food service is not a qualified dietitian, such individual shall receive frequently scheduled consultation from a qualified dietitian.

(2) A qualified dietitian is one who is qualified based upon:

(i) registration by the Commission on Dietetic Registration of the American Dietetic Association,

(ii) education, training and experience in identification of dietary needs, planning and implementation of dietary program, or

(iii) certification as a certified dietitian or certified nutritionist in accordance with Article 157 of the Education Law.

(b) Sufficient staff. The facility shall employ sufficient professional and support personnel competent to carry out the functions of the dietary service.

(1) The availability of qualified dietitian services shall be related to the number of beds in the nursing homes, the amount and type of dietary supervision required, and the complexity of resident needs and additional full or part-time qualified dietitians shall be utilized commensurate with such factors. Each resident's nutritional care shall be under the direction of a qualified dietitian.

(2) The facility shall utilize one or more dietetic service supervisor(s) with consultation by a qualified dietitian to manage the food service in the absence of the qualified dietitian.

(c) Menus and nutritional adequacy.

(1) Menus shall meet the nutritional needs of residents in accordance with dietary allowances that meet generally recognized standards of care and shall take into account the cultural background and food habits of residents.

(i) The facility shall have an effective means of recording and transmitting to the food service diet orders and changes; and

(ii) The facility shall maintain a current list of residents identified by name, location and diet order and such identification shall accompany each resident's meal when it is served.
(2) Menus shall be prepared in advance in accordance with a diet manual acceptable to the medical, nursing and dietary services and retained for one year from the date of serving; and

(3) Menus shall be followed.

(d) Food. Each resident shall receive and the facility shall provide:

(1) food prepared by methods that conserve nutritive value, flavor and appearances;

(2) food that is palatable, attractive, and at the proper temperature;

(3) food prepared in a form designed to meet individual needs; and

(4) substitutes offered of similar nutritive value to residents who refuse food served.

(e) Therapeutic diets. Therapeutic diets shall be prescribed by the attending physician, when indicated, based on the findings of the comprehensive resident assessment.

(f) Frequency of meals. (1) Each resident shall receive and the facility shall provide at least three substantial meals daily, at regular times comparable to normal mealtimes in the community.

(2) There shall be no more than 14 hours between a substantial evening meal and breakfast the following day, except as provided in paragraph (4) of this subdivision.

(3) The facility shall offer snacks at bedtime daily.

(4) If a nourishing snack as determined by a qualified dietitian in accordance with generally accepted standards of care, is provided at bedtime, up to 16 hours may elapse between a substantial evening meal and breakfast the following day provided that a resident group agrees to this meal span and a nourishing snack is served.

(g) Assistive devices. The facility shall provide assistance with eating and special eating equipment and utensils for residents who need them.

(h) Sanitary conditions. The facility shall store, prepare, distribute and serve food under sanitary conditions; and in accordance with the sanitary requirements of Part 14 (Service Food Establishments) of Chapter I (State Sanitary Code) of this Title.

(i) Kosher food. The facility shall provide, as part of the basic services, kosher food or food products prepared in accordance with the Hebrew orthodox religious requirements when the resident, as a matter of religious belief, desires to observe Jewish dietary laws; and shall

(1) establish a plan and procedure for obtaining, preparing and serving kosher foods and food products in accordance with Hebrew Orthodox religious requirements; (2) incorporate the provision of kosher food and food products prepared in accordance with Hebrew orthodox religious requirements into the resident's comprehensive care plan; and
(3) assure that employees who are involved with such plan of care are trained in the procedures that satisfy Hebrew orthodox dietary requirements.