



Dietitians NZ

Ngā Pukenga Kai Ora o Aotearoa



“Talk with” Series

Aged Residential Care Facilities

Welcome to the 26th edition of the Dietitians NZ e-Bulletin for aged care facilities.

The information in this bulletin is of a general nature and should not take the place of a dietetic consultation. To find a Dietitian near you, visit www.dietitians.org.nz and ‘Find a Dietitian’, check the Yellow Pages or telephone the local hospital.

MEAL SERVICE IN AGED RESIDENTIAL CARE FACILITIES

The first question everyone asks when you’re in hospital or a Rest Home is ‘What’s the food like?’ The answer should always be ‘It’s great!’ If it’s not, there’s work to do! We eat first with our eyes, then with our knives and forks! If our meal looks unappetising, it’s difficult to imagine that it will taste delicious! It is fantastic to see New Zealand’s aged care industry getting on board with this message, with the appointment of top chefs – to name a few Simon Gault in the Metlifecare group, and Rodney Phillips in Oceania’s Elderslea in Hutt Valley. In addition, Ryman Healthcare is launching a new foodservice programme called Ryman Delicious - have a look at this: <https://www.youtube.com/watch?v=nFDuiBmBOM4>

We all recognise that the food service manager faces many challenges such as tight budgets, rising costs, lack of skilled staff and resistance to change. The current generation of aged care residents is different from even 15 years ago. They are not the traditionalists of last century having grown up with a broader food palate and wider taste experiences than their forbears. Moreover, New Zealand is becoming increasingly culturally diverse and we will no longer get away with serving meat and three veg! Aged care providers who adjust their menus and food service to the changing market demands will definitely have an edge on the market!

Besides looking and tasting good, and meeting the social and cultural needs of residents, the menu should also accommodate residents’ nutritional, medical and special dietary needs. We need to make sure that the nutritional quality of the meals meets the needs of the most vulnerable residents. Therefore, Dietitians New Zealand strongly recommends that registered dietitians work alongside the foodservice managers and chefs in planning the menus and devising recipes. The Dietitians NZ menu audit tool remains a key document for auditing of nutrition care in aged care facilities, and identifies minimum standards for menus. This by no means stifles innovation, but rather ensures that the facility meets its contractual requirements for food and nutrition services.

It is exciting to see residential care facilities incorporating cafés (and bars) so that residents have the opportunity to engage in the same social activities they enjoyed when living independently. In addition to the standard café choices, be sure to include some healthier options on the menu, bearing in mind that healthy foods can still be tasty and beautifully presented!

Most people eat better if they have some choice around their meals. Simple ways to increase choice include breakfast buffets in the dining room for an extended meal time, choice of snacks and desserts, providing a variety of condiments, placing the gravy boat on the table so that residents can serve themselves. If appropriate, a small alcoholic drink (either in a happy hour or as an accompaniment to meals) can help improve poor appetites and promote conversation.

It may be more difficult to be creative in the private hospital setting, where residents have greater needs. As mentioned in earlier issues, dining room ambience is an important aspect of meal enjoyment. Allow residents plenty of time to enjoy their meals. Bear in mind that the social interaction around meal times is important to their mental well-being. Aim for a calm atmosphere with some background music. Mealtimes should be protected – no unnecessary interruptions such as medical interventions or non-food appointments (e.g. the hairdresser). Avoid excess noise (e.g. the vacuum cleaner or a noisy dishwasher) during mealtimes. Well-appointed table settings, comfortable chairs, good lighting, well-cooked and presented meals can all help to improve meal time enjoyment and food intake.

A common question is how to manage residents with dementia, who may display inappropriate or unsociable eating behaviours, and often require assistance with eating. Consider seating these residents so their behaviour does not impact on the other diners. But remember, these high care residents, requiring extra assistance or texture modified meals, have the right to be served delicious and attractively presented meals in a manner that is respectful of their dignity.

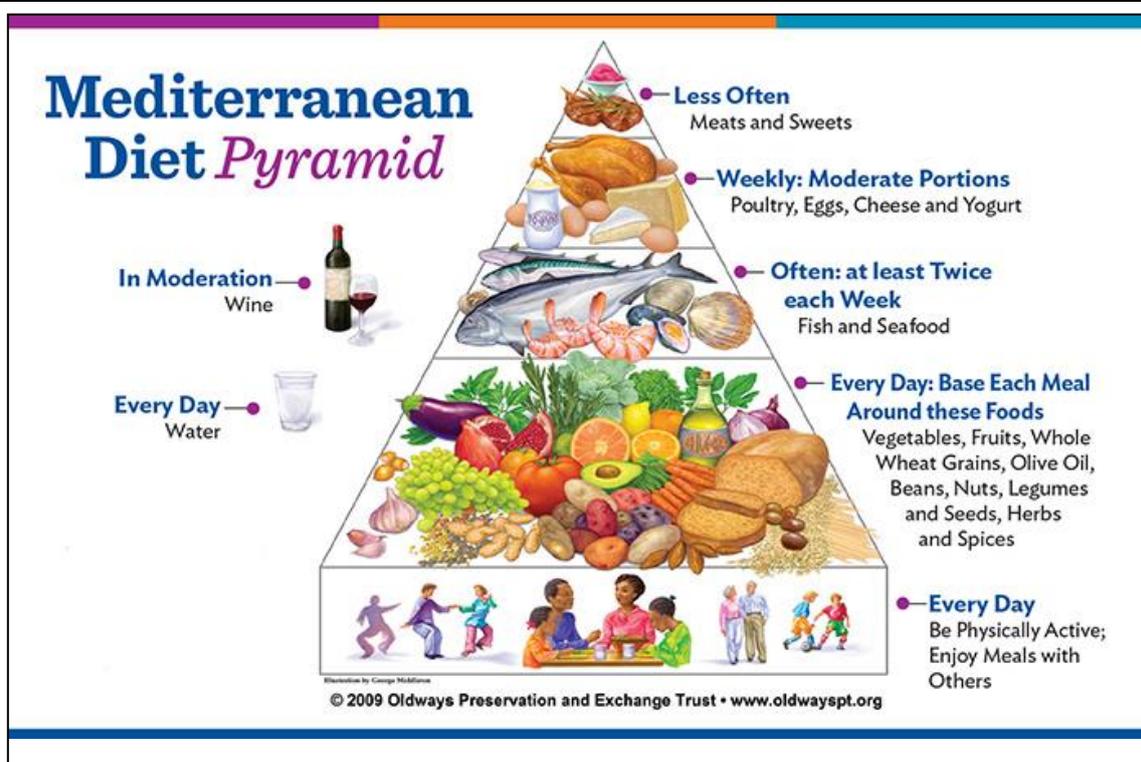
Yes, we live in exciting times! Aged care is one of the fastest growing industries worldwide and aged care providers are becoming increasingly aware that serving great quality food is a great marketing tool and can give them the competitive edge. With the increasing expertise and technological resources there is no excuse for institutional food to be dull and tasteless. Studies looking at food and nutrition in residential aged care facilities emphasise the importance of a good working relationship between the chef and the dietitian. By working together we can ensure that vulnerable residents will be served meals that are not only delicious but also nutritious and suitable for their medical conditions. So, hats off to all the celebrity chefs who are taking the aged care sector by storm, but remember to also include a dietitian with expertise in aged care on your team!

AND FOR THE STAFF - WHAT DO YOU KNOW ABOUT THE MEDITERRANEAN DIET?

The Mediterranean Diet is a food-based approach to good nutrition. It has been suggested to confer health benefits such as reducing the risk of developing Type 2 diabetes, cardiovascular disease, some neurodegenerative diseases and certain diet-related cancers.

The cornerstones of the Mediterranean diet include healthy lifestyle behaviours, social eating, eating seasonal produce and using traditional, local and eco-friendly products.

The scientific evidence favours the Mediterranean diet with large prospective and longitudinal studies in Europe showing many health benefits. Just to mention one of these – in the Healthy Ageing Study (a longitudinal study in Europe), 2500 healthy older men and women in 11 European countries were followed for 10 years. The study found that those following a Mediterranean Diet had lower risk of all-cause mortality, and when this diet was combined with three other lifestyle factors – moderate alcohol consumption, physical activity, and not smoking, the rate of all-cause and cause-specific mortality was reduced by 50%.



Principles of the Mediterranean diet

- High intakes of extra virgin olive oil (as the principal source of fat), vegetables (including leafy green vegetables), fresh fruits (consumed as desserts or snacks), cereals (mostly wholegrains), nuts and legumes.
- Moderate intakes of fish, including fatty varieties – e.g. salmon), seafood, poultry, dairy products (principally cheese and yoghurt) and red wine.
- Low intakes of eggs, red meat, processed meat and sweets.
- Total fat in this diet is 25% to 35% of energy intake, with saturated fat at 8% or less of energy intake.

There are some differences between the Mediterranean diet and our Food and Nutrition Guidelines. For example, there is a greater emphasis on fish and seafood, with the Mediterranean diet recommending this at least twice a week, with poultry and eggs weekly, and meats, less often. Legumes, nuts and seeds are recommended daily. The NZ guidelines suggest a daily serving from the food group including lean meat, poultry, fish, eggs, nuts, seeds and legumes, with fish at least once a week. The New Zealand guidelines recommend 2-3 servings milk products daily, while the Mediterranean diet recommends principally yoghurt and cheese be included weekly in moderate portions.

Both plans are similar in the following:

- Both plans encourage choosing water to drink daily
- Both plans encourage regular physical activity
- Both plans caution against added sugar
- NZ Guidelines caution against added salt
- Mediterranean diet recommends wine in moderation
- NZ Guidelines caution against excess alcohol
- Both encourage eating meals with other people

The Mediterranean diet is a healthy eating plan that is supported by the evidence, and we should be encouraged to take on board some of principles of this eating plan, especially increasing our

intake legumes, vegetables, fruits, nuts and fish and using monounsaturated fats, such as olive and avocado oils.

Despite what we read in the popular media, YES we still need to reduce our intake of saturated fats such as meat fat, butter and cream, and also palm and coconut oils and trans fats.

Remember a key message for any eating plan is to eat a wide variety of foods and not to totally cut out important food groups.

RECIPE CORNER

This recipe has a Mediterranean theme – a lovely thick and delicious tomato sauce with olives, capers, wine, Italian herbs and seasoning over fish! If your fillets are thick and/or firm, they will take longer to bake. Try it on your menu!



MEDITERRANEAN BAKED FISH

INGREDIENTS	YIELD			METHOD
	10	25	50	
Tomatoes, fresh or whole canned (skinned)	1 kg	2.5 kg	5 kg	Blanch fresh tomatoes to remove skins. Drain canned tomatoes. Dice and set aside. Heat oil in a large frying pan, over medium heat. Add onion and cook until tender. Stir in garlic, oregano and diced tomatoes. Cook until softened. Mix in wine, olives, capers, lemon juice and the chopped basil (1). Reduce heat, mix in Parmesan cheese, and simmer until the mixture is reduced to a thick sauce, 15-20 minutes. Place fish in shallow baking dishes. Cover with the sauce. Top with the remaining basil leaves (2). Bake at 200°C for 12-15 minutes, or until the fish is easily flaked with a fork.
Extra virgin Olive Oil	75 ml	185 ml	375 ml	
Red onion, peeled and diced	2 small	4 medium	6 large	
Garlic, diced	4 cloves	10 cloves	20 cloves	
Oregano, dried	1 t	1 T	2 T	
White wine	150 ml	375 ml	750 ml	
Kalamata Olives, pitted, diced	200 g	500	1 kg	
Capers	¼ cup	2 cups	4 cups	
Lemon Juice	1 T	2.5 T	75 ml	
Basil, fresh, chopped (1)	½ cup	1¼ cup	2½ cup	
Parmesan cheese, grated	1 c	2.5 c	5 cups	
Fish fillets, e.g. terakihi	1.3 kg	3.25 kg	6.5 kg	
Basil, fresh, torn (2)	½ cup	1¼ cup	2½ cup	

Modified from a recipe by Martin Kaplan

FUTURE ISSUES The next issue is due in August, 2017. Please email your requests for topics or questions about food and nutrition issues for older people to admin@dietitians.org.nz. To unsubscribe, email us at the same address, and put Unsubscribe SING Bulletin in the subject line.