

# idea corner

## Evaluating Nursing Home Menus

Food habits of the elderly are a focus for Extension nutrition education programs. A current idea that's being explored in Missouri is the evaluation of menus in nursing homes to help the staff plan nutritional diets for the elderly. The nursing home staff becomes multipliers of knowledge by promoting good

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food habits through individual consultation or group sessions using techniques such as discussions, posters, tray cards, or other teaching methods.

Nutritional planning is a high priority in maintaining health and longevity while avoiding overnutrition. Yet, the menu must be enjoyable because so many meanings are connected with foods—a time of togetherness, a sense of security, and feelings of health. Coupled with these concerns are the constraints of elderly food problems. Since dietitians aren't available in many communities, a source of expertise is needed to help in planning for nutrition and special food needs within a fixed budget.

The present idea originated when a nursing home staff asked an area Extension home economist to help them check the nutritional adequacy of their menu plans. Since a computer program was available at the University of Missouri-Columbia, a week's menu plan was obtained by the local Extension home economist as a basis for this nutrition education project. Standard servings of each food were coded. The computer program calculated nutrient content and percentage of the Recommended Dietary Allowances (RDA) for each day. In addition, the

nutrient contribution of each food was printed in the daily summary. The major findings indicated menus with excessive calories and protein with too little iron and vitamin C.

Many of the clientele in nursing homes are inactive and may also be confined to wheelchairs. Confounding the problem of inactivity and weight gain are high calorie meals and the increased food intake of many nursing home patients. Key menu points that the home economist reviews are food choices and extra foods in the menus. For example, instead of eliminating breads and cereals, the size and number of servings can be reduced. Instead of serving corn, potatoes, and lima beans as vegetables at one meal, some lower calorie choices such as green beans or greens can be substituted. Likewise, sauces and gravies and rich desserts can be replaced with enjoyable food choices in an effort to reduce caloric intake.

Excessive protein in the menu has been another key teaching point. In one experience, extra protein was being added to an already high protein level by mixing soy protein in soups and cereals. A high protein diet represents added food calories and extra food costs. The computer printout serves as a means of checking that ample protein is spread throughout the day.

The printout showing the iron contributed by foods in the diet is particularly helpful in illustrating where food choices can be improved because iron isn't concentrated in any one food other than liver. As with other nutrients, the local Extension home economist provides a series of suggestions on foods to include ways to serve these foods so they'll appeal to the clientele, and ideas for teaching the clientele about food sources.

The home economist also can speak to special needs of the elderly. Menu planning will be influenced by problems with dentures and the digestive tract. Cabbage, lettuce, and greens that might have been a raw salad can be served as a cooked vegetable, perhaps even in chopped or



ledge who will magnify efforts in reaching a high priority audience.

ANN A. HERTZLER  
*Food and Nutrition Specialist*  
*University of Missouri-Columbia*

VIOLA M. SMITH  
*Area Extension Home Economist*  
*University of Missouri-Columbia*

sliced forms for variety. The home economist can offer many ideas so the golden age group isn't limited to a plate of ground and pureed food.

The Extension home economist is a community resource. She has training in the nutritional needs of various population groups and in food purchasing. She also may have experience with the food patterns for the elderly from her work with various groups. Although the use of the four food groups in the *Food for Fitness Guide* (USDA) is one way of checking nutritional adequacy of a diet, calculations of the nutrient content of daily meals provides a valuable checking system and teaching opportunity.

A current concern in developing this idea further relates to the logistics of time and costs in a large-scale program. Time becomes a factor in obtaining a week's menu with foods and serving sizes accurately described and in coding and keypunching the information for the computer. However, the idea of the home economist working with nursing home staff in this kind of a nutrition education program has the advantage of her serving as a key resource in management of nutrition and budgeting and of working with multipliers of know-