

Hospital Dietary Services

Hastane Diyet Hizmetleri

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ABSTRACT

A hospital's dietary service plays a crucial role in improving the health of hospitalized patients and enhancing the hospital's reputation. To ensure a high-quality dietary service, careful planning, proper layout, systematic menu planning, and sufficient assistance and supervision during meal offerings are essential. The dietician or food service manager is responsible for ensuring that patients receive a well-prepared, balanced diet in an aesthetically pleasing manner. The individual in charge of dietary services oversees inpatient catering, diet counselling, and commercial catering. Additionally, they are responsible for education, training, and research.

Keywords: Balanced diet, diet, dietary services, dietician, food service manager

ÖZ

Bir hastanenin diyet hizmeti, hastanede yatan hastaların sağlığının iyileştirilmesinde ve hastanenin itibarının artırılmasında çok önemli bir rol oynamaktadır. Yüksek kaliteli bir diyet hizmeti sağlamak için dikkatli planlama, uygun düzen, sistematik menü planlaması ve yemek sunumları sırasında yeterli yardım ve denetim esastır. Diyetisyen veya yemek servisi yöneticisi, hastaların iyi hazırlanmış, dengeli ve estetik açıdan güzel bir beslenme almalarını sağlamaktan sorumludur. Diyet hizmetlerinden sorumlu kişi, yatan hasta ikramlarını, diyet danışmanlığını ve ticari ikram hizmetlerini denetler. Bununla birlikte, eğitim, öğretim ve araştırmadan da sorumludurlar.

Anahtar Kelimeler: Dengeli beslenme, diyet, diyet hizmetleri, diyetisyen, yemek servisi yöneticisi

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Dear Editor,

Dietary services play an essential role in supporting the recovery of ailing patients. These services involve providing nutritious, balanced, and palatable meals, as well as educating patients and their attendants about the benefits of a balanced diet. The dietician or food service manager is responsible for ensuring that each patient receives a properly prepared balanced diet as advised by the treating physician and served in an aesthetically pleasing manner. Additionally, these services cater to the needs of outpatients by providing diet and food counselling.

Hospitalized patients often struggle with poor appetite, as indicated by a study revealing that 23% of inpatients consume less than 25% of the provided food.¹ There are many factors associated with inadequate food intake among inpatients, such as lack of feeding aid, inability to provide daily healthy meals, and missing meals due to clinical investigations.² A study by Kontogianni et al. suggested that 58% of inpatients did not consume all the food they were served.³ Approximately half the hospitalised patients are dissatisfied with the hospital's dietary services

and prefer to consume home food rather than food from the hospital. Also, hospital dietary services play a crucial role in improving patient satisfaction.

Reduced Intake: Difficulties faced by the patient in eating and swallowing, a sense of loneliness, feeling insecure, stressed and delayed mealtimes may contribute to reduced food intake during hospitalization.⁴ Illness-induced loss of appetite and prolonged hospital stay have been studied as essential factors causing reduced food intake in hospitalized patients.⁵

Measures to Improve Food Intake: It has been shown that improved meal-ordering systems, service styles, and meal delivery systems improve food intake in hospitalized patients. The use of electronic menus (E-menus) was an effective way to obtain information about food preferences, contributing to greater satisfaction among inpatients.⁶ The bedside meal-ordering system showed improved food intake and patient satisfaction compared to traditional paper menu systems.⁷ Room service increases patient satisfaction and food intake while reducing food waste and cost.⁸ In-patients preferred the trolley sys-

tem over the pre-plated meal system because the temperature was more controlled.⁹ Protected mealtimes, mealtime environment, and mealtime assistance have been proven to be successful interventions to improve patients' overall food intake.¹⁰ Food intake among elderly patients improved in the presence of meal assistants.¹¹ A study by Markovski et al. suggested that the dining room environment may positively impact food intake.¹² A broader and diverse menu, high-quality taste, specific ingredient details and better presentation improve patient satisfaction with hospital food services.¹³ A study by Navarro et al. compared the use of orange (experimental) and white (control) napkins on the inpatients' meal intake. It showed increased food intake among patients with an orange napkin.¹⁴ Use of an indirect calorimeter and resting energy expenditure device calculates the patient's actual caloric requirements and may be of help in planning hospital diets.

Role of Dietary Services: The food service manager is responsible for working out requirements of food items, selection, procurement, receipt, inspection, verification, proper storage, menu planning, and supervising food preparation and distribution of warm, palatable, presentable food to the patients. The functions of those in charge of dietary services include inpatient catering, diet counselling, commercial catering, education, training, and research.¹⁵

Inpatient Catering: It provides meals to hospitalized patients, including a balanced diet with adequate calories.

Diet Counselling: Patients with diabetes, hypertension, anemia, protein-energy malnutrition, and cardiovascular diseases are referred from Specialist outpatient departments or, before being discharged from the hospital, seek dietary consultation for calculating their caloric and protein requirements as per their height, weight, hemoglobin levels, blood sugar levels and renal function tests.

A low-calorie, low-fat diet is recommended for patients with fatty liver. A diet low in sodium content, including grains, fruits and vegetables, dairy, lean meat, nuts and seeds, and legumes, is beneficial in hypertensives. We need to manage insulin levels in Polycystic ovarian disease, so meals should be moderate in complex carbohydrates like brown rice and oats. Emphasis on clean, whole foods and restricting processed foods, sodium, red meat, sugar and alcohol should be recommended in heart patients. The Mediterranean diet is heavily plant-based, with a foundation of vegetables, fruits, whole grains, beans, nuts, and seeds and should be advised in diabetic patients.

Commercial Catering: Medical, paramedical, support staff, attendants, and visitors of the hospital require drinking water, snacks, beverages and meals,

which are catered by the staff canteen run by a third party under the administrative control of hospital authorities to supervise the hygiene, sanitation and quality of food services provided.

Education, Training and Research: The dietician can educate the nursing assistants, cooks, residents and technicians regarding types of food, their caloric content, protein value and a balanced diet. They can further impart knowledge about special diets recommended for diabetes, renal diseases, liver diseases and anemia. The training module should include issues of sanitation, anti-rodent measures to be followed in grocery and vegetable storerooms, food safety, healthy cooking, adoption of anti-fly standards and pilferage control in the kitchen.

Food Service Manager: The food service manager or the dietician plays a pivotal role in managing the hospital's dietary services. They need to ensure the regular cleanliness of the food preparation area, as well as the utensils, crockery, and cutlery used for food preparation and serving. Periodic health inspections and maintenance of health record cards for the cooks and staff working in food preparation and distribution areas need to be monitored. They need to wear an apron and cap while preparing food and need to have 2 to 3 sets of such uniforms. The menu needs to be displayed, and food preparation as per the given menu needs to be monitored. The food service manager needs to frequently visit the store where dry and fresh rations are stored to ensure proper storage and prevent pilferage. He needs to maintain records of procurement of food items and monitor costs. He is supposed to inspect bins, racks, cupboards, and refrigerators for proper maintenance and cleaning. Anti-rodent measures should be ensured. Food from the cookhouse should be tasted periodically to confirm that the patients are being provided with a healthy, palatable and presentable meal.

The National Health Mission of India has issued guidelines for the implementation of dietary services in district hospitals, recommending having a dietary service department comprising of a Medical Officer, nurse, purchase officer, and a dietician, which should meet periodically to discuss the dietary services and their interaction with the community and organize awareness programs for the community on the importance of nutrition and healthy eating habits. In conclusion, "Let food be thy medicine and medicine be thy food" is a well-known statement of Hippocrates. Hospital food service can make a difference and improve patients' food intake, satisfaction, nutritional status and quality of life. Most hospitalized patients have a loss of appetite, physical difficulties in eating, or unavailability of food between meals and missing meals due to a critical investigation or a therapeutic procedure. Most post-operative

patients are recommended to be kept nil per oral for about 4 to 6 hours to prevent nausea and vomiting due to anesthetic drugs, which leads to many patients feeling hungry at some point during their hospital stay. Improved meal-ordering systems, service styles, and meal delivery systems have been shown to improve food intake in hospitalized patients. A broader and diverse menu, high-quality taste, specific ingredient details, and better presentation improve patients' food intake while admitted to the hospital. The food service manager is responsible for the work.

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