

DECENTRALIZED DINING
**THE ON-GOING REVOLUTION IN
LONG TERM CARE FOOD SERVICE**





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Culture change continues to creep into long-term care communities across the country as graying baby boomers keep this topic at the forefront. To be sure, this is just the beginning of the long-term care revolution that is sure to ensue as this powerful population ages. "I just don't see boomers accepting the fate of a nursing home," says Dr. William H. Thomas, an international authority on geriatric medicine and eldercare and the president of The Eden Alternative, a research, consulting, and advocacy group committed to improving long-term care.

In his book, *What Are Old People For?*, Dr. Thomas introduces a new vision of "intentional communities," of up to 10 elders who chose to live together with the help of several younger adults and strive to become a true community. While his vision is not exactly the norm these days, perhaps someday Dr. Thomas's model will set a new standard in long-term care. And who knows? Maybe the baby boomer generation will be credited with transforming the way we care for America's elder population. Helping to overhaul the long-term care industry may even turn out to be the boomers' greatest legacy.

For now, though, long-term care communities across the land strive diligently to create a better resident experience one small change at a time. It's uncharted territory, for sure. So what are these pioneers doing to enhance residents' lives? At one community, it could be as simple as brightening the interior with a new coat of paint. At another, it may involve giving residents more choices: when to wake up, when to bathe, etc. At still another, it might mean investing in additional staff training. It all depends.

A deciding factor in long-term care

While food service has historically been overlooked, many administrators are now recognizing its intrinsic value as a key differentiator and deciding factor in an individual's or a family's long-term care selection. As America's first generation to dine out frequently – and the nation's richest generation with an average annual income of more than \$105,000 – boomers are used to restaurant-caliber cuisine. But this generation's upscale tastes and higher expectations are only half of the story. The other is this: not only is food critical in maintaining physical health, but is also important in preserving mind and spirit. Besides contributing significantly to residents' overall sense of health, happiness and satisfaction, mealtime is also the biggest social event of the day. In order to attract new residents, maximize occupancy, and boost the comfort levels of concerned family members, you must give top billing to your dining program. The attention given to the food and dining function is a telling indicator of what life is like inside a community.

Designing a dining program that meets the needs of your residents and your community can be challenging. There are many options to consider – at many different price points. Currently, tray passing is still widely practiced, but decentralized dining models, and even more sophisticated



community dining programs, where residents can share a “family-style” meal with familiar companions, are gaining ground.

Options to suit every need and budget

Decentralized dining offers an innovative and can be a cost-effective way for administrators to enhance residents’ dining experiences. Arguably the most exciting resident dining trend to emerge in years, some models can be flexible and budget-friendly. With several different options available, there are many different ways to implement decentralized dining. But what’s really exciting is that it works at all levels. Whether you have a 90, 150, or 200+ bed facility, you have the opportunity to design a customized dining program that is tailor-made to suit your needs.

The most basic and low-cost decentralized model involves the purchase of mobile carts. These moveable carts hold food at their proper temperatures and can be loaded up in the kitchen and brought to patients’ rooms or to any designated dining area in the community. The benefits are many. From a culinary standpoint, this model allows the dietary staff to serve a more diverse menu with greater variety. Residents choose what they want – and what they don’t. This helps to reduce food waste, cut costs and increase the operation’s efficiency. What’s more, food temperatures can be more easily maintained than in a tray-line system. The hot food stays hot and cold food stays cold. It not only looks better, it tastes better.

Meal times are also more flexible in a decentralized dining system. You can work around whatever other scheduled activities are planned for a particular day. Younger, shorter-stay rehabilitation patients will love it, too. It is a bit more upscale than traditional nursing home dining programs, meal selection and delivery is instantaneous, and patients can eat in the privacy of their own rooms. According to Leonard Dionne, Vice President of Senior Services with Unidine Corporation, a Boston-based food service management contractor, “Most complaints long-term care communities receive from rehabilitation patients are about the food. If you can take food out of the equation, complaints will decrease dramatically.”

Implementing a resident dining program using mobile carts is a great way to transition into a decentralized model. Another approach calls for purchasing satellite steam tables. Similar to mobile carts only stationary, they allow communities to serve smaller groups in “local” dining rooms on each floor. This model caters to residents who enjoy the camaraderie of group dining, but might not be well enough to make it to the main dining room. It creates an inclusive environment in which, regardless of their health, all residents can experience the social aspects of mealtime.



Ideally, stationary steam tables are placed in mini-dining rooms or kitchenettes throughout a community, so implementing this system may involve building kitchens where residents can share a meal together.

Both options offer the flexibility to serve meals at off-times or at smaller intervals with fewer people. But most importantly, this model in particular provides the opportunity to infuse hospitality into your dining program – to create a more “home-like” dining experience that is less cold and institutional and more closely resembles an intimate family meal.

Cost and design implications

What’s most enticing about decentralized dining is that it poses very few issues from a design standpoint. In most cases, you can implement a decentralized dining program without making any changes at all to the physical plant – regardless of any architectural or financial constraints you may face. From a logistical perspective, an elevator is all you really need to create a successful program.

So what about the cost of moving toward decentralized dining? If you take potential redesign or renovation costs out of the equation, the only capital expense is the purchase of the equipment. For a relatively small investment of \$3,000 - \$8,000, you can buy a basic steam table. Keep in mind, that you’ll probably need more than one to create even the most basic decentralized program. If you’re looking to implement a more elaborate system, you should plan to allocate about \$30,000. For that amount you’ll be able to afford a heated cart that keeps hot food hot, a chilled cart that keeps cold food cold, a beverage cart, and a support cart that holds cups, tableware, linens, napkins, and other supplies. At this price point, you’ll eliminate many logistical issues and won’t need as many ancillary supplies (trays, covers, palates, etc.). “It’s a highly adaptable system that minimally impacts design and completely eliminates the dietary mistakes you see on a tray line completely,” says Unidine’s Dionne.

Since food costs are reduced, the equipment pays for itself in a short time. Labor costs are also decreased, because it takes fewer staff members to feed the same amount of people. You may need to retool some staff job descriptions, and, of course, you’ll need to re-train both the dietary and nursing staffs on the new system. But overall, the savings outweighs the upfront costs and training involved, says Darrold Endres, Executive Director at Beaumont/Whitney Place at Northborough in central Massachusetts, a Salmon Health and Retirement Community. “We’ve been on a decentralized system for a couple of years and it’s worked out extraordinarily well. Our residents get their meals faster, we’re able to offer a more diverse menu, there’s less cleanup, and our food and labor costs have gone down. Unidine helped us make a seamless transition to a decentralized dining program.”

Lee Pakstis, administrator at St. Julie Billiard Residential Care Center at The Sisters of Notre Dame in Ipswich, Massachusetts, another Unidine client, recently transitioned to a decentralized dining program within the past year. “We’re excited about our move to a decentralized model and taking our dining program to the next level with the addition of steam tables. It’s meant a higher quality, more diverse and accessible dining program for our residents.”

Transforming units into neighborhoods

It’s hard to find someone who is not a fan of decentralized dining. At her prior company, Eva Stevens, Mid-Atlantic Director of Operations for Senior Services at Unidine, was responsible for successfully converting a large tray line operation to 15 pantry kitchens equipped with steam tables. “Everything we needed was right there,” says Eva, “quality improved and it was much more cost effective. The satellite kitchens - complete with coffee and juice machines, refrigerator, freezer, toaster oven, dishwasher, and soup kettles - transformed units into neighborhoods. I will look to implement decentralized dining models like that wherever I can.” Adds Stevens, now based at St. Elizabeth’s Rehabilitation and Nursing Center in Baltimore, Maryland: “The hardest part was getting people to buy into the system. But once it was implemented, everybody “got” it. Let me tell you...our staff would not want to go back to the way it was. Decentralized dining is a night and day way of serving.”

Hospitality training is key

For your staff, the most dramatic difference with decentralized dining will be the increased level of interaction they’ll have with residents. For team members initially hired to work on a tray line, this will mean a considerable change in their job description. That’s why formal hospitality training, similar to what they would receive in a restaurant or hotel, is so critical to your program’s success. In addition, dietary staff members will learn how to maintain the new system including how to track items leaving the cart, and properly keep temperature and sanitation logs.

Your contractor will also provide training to help your dietary and nursing staffs work more collaboratively. Be encouraged: a common outcome of decentralized dining is the development of a much better relationship between the two departments. Typically, as fewer and fewer dietary errors occur, the nursing staff becomes more and more confident with the dining program.

Finally, the company you hire to implement your decentralizing dining program will conduct in-house marketing efforts to roll-out and promote the new system to residents and their families. While building consensus among staff is imperative, securing family buy-in is also a top priority.

Although transitioning to decentralized dining involves an initial up-front investment, significant staff training, and possible design implications, the end result is worth the effort. And, once the



system is in place and the myriad of issues is resolved, administrators are free to focus on their core responsibilities instead of worrying about what's for lunch – and who's serving it.

A food service management contractor can help

If you're unsure if moving to a decentralized dining system makes sense, a food service management contractor can help. They will work closely with you to evaluate various options and select the program that works best for you, your residents and your budget. They'll also help you secure community-wide buy-in for the program and manage the re-training process, which is often one of the biggest challenges.