

Montana Department of Public Health and Human Services Feeding Assistant Curriculum Evaluation Form

FEEDING TECHNIQUES/ASSISTANCE W/ FEEDING	COVERED (yes or no)	COMMENTS
Basic food groups (Food Guide Pyramid)		
Regular and therapeutic diets		
Mechanically altered diets (altered food consistency)		
Thickened liquids		
Food likes & dislikes; obtaining substitutions		
Adaptive feeding equipment (sippy/nosey cups, lidded mugs, weighted utensils, scoop plates, plate guards, non-slip pads, braces/splints, etc.)		
Preparing resident for eating (hygiene, positioning, equipment & supplies, tray preparation)		
Position of assistant for feeding		
Bite size, rate of feeding, alternating liquids & solids		
Encouraging independence		
Providing supervision & cueing		
Providing partial physical assistance (limited guidance of hands to scoop & move food to mouth)		
Providing hand-over-hand assistance (full physical assist to scoop & move food to mouth)		
Feeding totally dependent resident		
Assisting the blind (preparing tray, location of foods/fluids)		
COMMUNICATION & INTERPERSONAL SKILLS		
Verbal & non-verbal communication		
Individualizing communication/focusing mealtime conversations toward residents		
Communicating with hearing impaired		
Calculating, reporting & recording food & fluid intake		
APPROPRIATE RESPONSE TO RESIDENT BEHAVIOR		
Factors relating to inappropriate behavior (confusion, depression, anxiety, disruption, disorientation, wandering, combativeness)		
Techniques to manage behaviors & gain residents' cooperation		
SAFETY & EMERGENCY PROCEDURES		
Heimlich maneuver		
Safe & palatable food/fluid temperatures		
Fire & disaster procedures		
Use of resident call system and alternate methods of obtaining assistance for emergencies		

Montana Department of Public Health and Human Services Feeding Assistant Curriculum Evaluation Form

INFECTION CONTROL		
Handwashing procedure		
Proper use of gloves		
Proper handling of food, utensils and dishware		
RESIDENT RIGHTS		
Federal (CFR 483.10 , Residents Rights, & 483.13, Abuse)		
State of Montana (M.C.A. 50-5-1101 through 50-5-1106)		
HIPPA		
RECOGNIZING & REPORTING CHANGES IN RESIDENTS INCONSISTENT WITH NORMAL BEHAVIOR		
Recognizing & reporting eating problems (difficulty chewing or swallowing, pocketing food in cheeks, choking, vomiting, poor fitting dentures)		
Identifying & reporting changes in eating patterns (leaves 25% or more of food, low fluid intake, refusal to eat, possible illness)		
MISCELLANEOUS		
Tools for testing knowledge and evaluating performance		
Procedure for maintaining training/competency records		
Specification and qualifications of instructor(s)		
Classroom hours		
Clinical hours		

Provider Name _____

Provider Address _____

Your program is _____ approved; _____ not approved.

Comments:

Signature of reviewer _____ Date _____