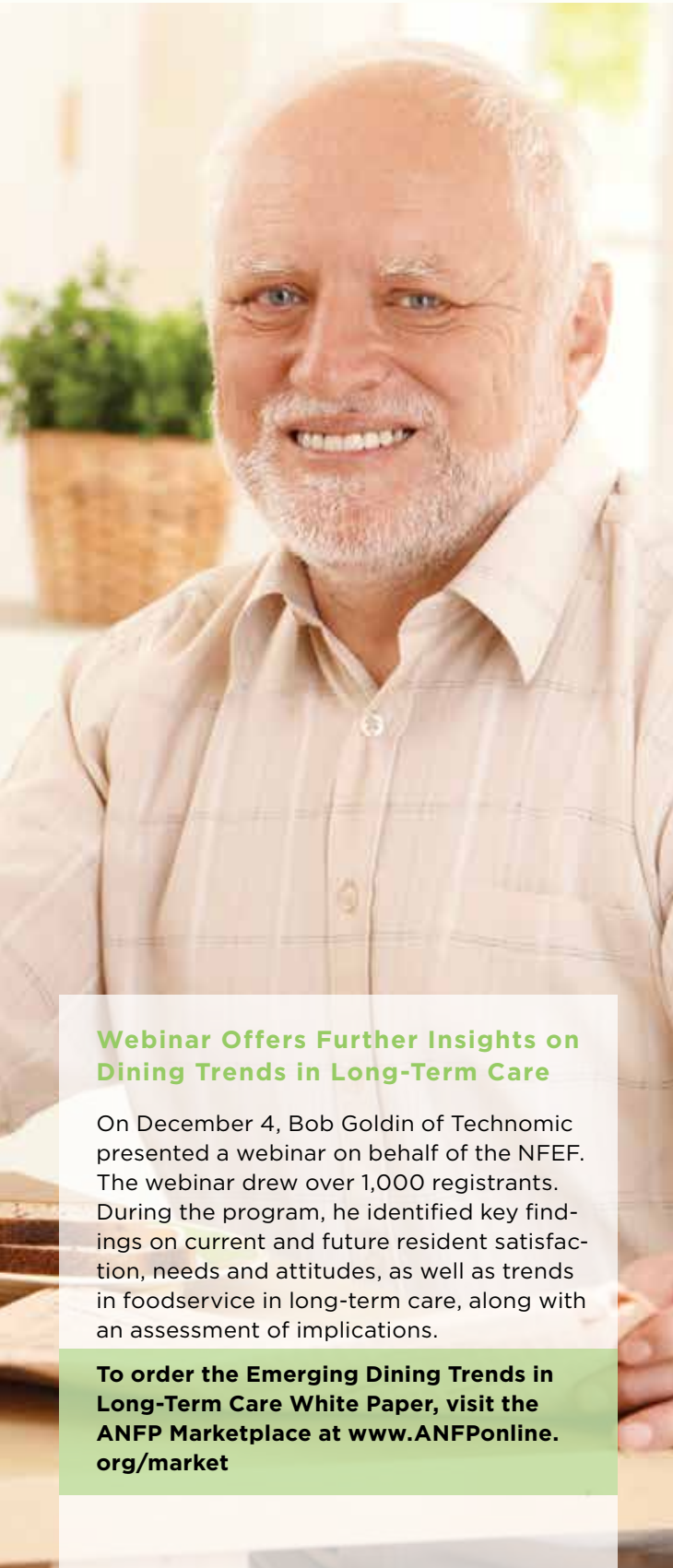




Emerging Dining Trends

in Long-Term Care

On behalf of the Nutrition & Foodservice Education Foundation (NFEF), Technomic conducted an original research study assessing the current and future role of foodservice in long-term care facilities.



Webinar Offers Further Insights on Dining Trends in Long-Term Care

On December 4, Bob Goldin of Technomic presented a webinar on behalf of the NFEF. The webinar drew over 1,000 registrants. During the program, he identified key findings on current and future resident satisfaction, needs and attitudes, as well as trends in foodservice in long-term care, along with an assessment of implications.

To order the Emerging Dining Trends in Long-Term Care White Paper, visit the ANFP Marketplace at www.ANFPonline.org/market

TECHNOMIC'S EXTENSIVE RESEARCH comprised of surveying 500 residents of long-term care facilities, including those in assisted living, continuous care retirement centers, nursing homes and senior living; 500 family member decision makers; 400 Association of Nutrition & Foodservice Professionals (ANFP) members; as well as qualitative interviews with ANFP and NFEF board members. Key findings that focus on current and future resident satisfaction, needs and attitudes, as well as trends in foodservice in long-term care facilities are summarized in this White Paper, along with an assessment of implications.

KEY FINDINGS: CURRENT SITUATION

Facility Characteristics

The majority of ANFP members surveyed (80 percent) are employed in nursing homes. A "typical" facility of ANFP members is part of a multi-unit operation, and participates in group purchasing organizations (GPOs). Half of respondents work in for-profit facilities (55 percent) with 10 or fewer full-time employees (50 percent). The majority of facilities operate with fewer than 100 beds.

Resident Characteristics

Half of resident respondents (54 percent) reside in assisted living facilities. Because of the large assisted living sample, "typical" resident respondents of long-term care facilities are 65 years old or younger (65 percent), Caucasian (74 percent) and have resided in their facility for 1-3 years (49 percent). Nearly a third of resident respondents (30 percent) are 55 years old or younger, indicating that even those not of retirement age are moving into these facilities. The majority of residents were the primary decision maker when choosing the long-term care facility in which to reside.

Foodservice Employment

Foodservice in long-term care facilities is primarily self-operated (88 percent) and certified dietary managers (CDMs) are the most prevalent foodservice credential, with 69 percent of ANFP members reporting this as their job title within their facility. While the majority of long-term care facilities do not currently have full-time dietitians or executive chefs, ANFP and NFEF board members mention that there is definite increasing interest in filling these types of positions, however it is not yet widespread in the industry.

Continued on page 20

Foodservice Areas and Programs

Tray service, room service, and dining rooms with waitstaff are the foodservice programs and service areas that are typically found in long-term care facilities. Residents are often offered at most two meal options from a three or five week rotating menu. Foodservice areas may differ by facility type, as residents' capabilities and needs differ. ANFP members and board members note that many assisted living facilities and retirement homes still have a cafeteria type set-up.

Medical Model

The foodservice programs in long-term care facilities generally follow the "medical model," which provides limited menu options during scheduled mealtimes. Meals are typically served to a resident's room if they're immobile, or in a dining room with waitstaff. Some facilities still have a cafeteria type set-up, with residents choosing from limited options on a hot table or a cart moving throughout the dining room.

Medical Model
Centralized kitchen
Common dining area
Limited offerings
Set mealtimes
Foodservice staff

Foodservice Trends

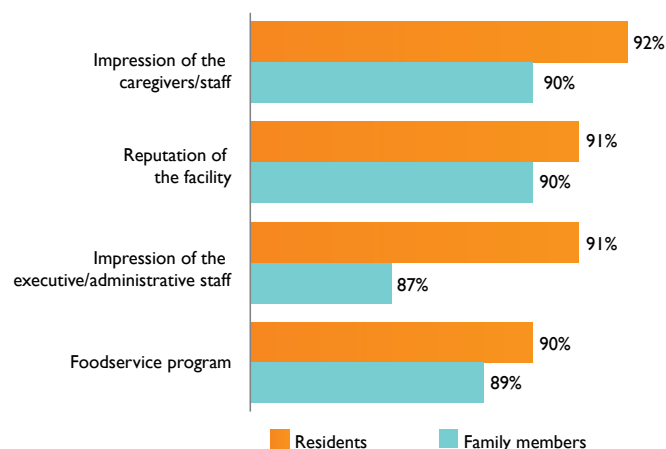
ANFP members and board members generally agree that the foodservice trends surrounding health (e.g., freshness, low sodium, low sugar or sugar-free, "better for you," etc.) are most important to facilities; however other food trends, such as authentic ethnic foods, are gaining awareness or becoming more important. Foodservice programs are seeking products that meet these trends while maintaining or lowering food costs.

Decision-Making Factors

For residents and family members, foodservice is one of the most important decision-making factors when choosing a long-term care facility. As shown in the graph provided, 90 percent of respondents say foodservice is very or somewhat important in their decision-making process. Their impression of caregivers, executives and administrative staff are also highly important, and the majority notes the reputation of the facility is important in their decision-making process.

Although not shown in the graph, residents place more importance on cost than family members do, likely because more of these residents report paying for the majority of their residency through Medicare/Medicaid. Brand name of the facility is the least important decision-making factor for residents and family members.

Importance of Factors During Decision-Making Process (Top 2 Box)



Foodservice Satisfaction

More than half of residents (52 percent) indicate that there are currently enough "better for you" foods and those with nutritional supplements, indicating that these areas should no longer be a focus for long-term care facility operators. Residents are generally satisfied with their facility's foodservice, but want more snacking options (40 percent), dining hours available all day (39 percent), fresh (39 percent), and grab & go options (38 percent).

KEY FINDINGS: FUTURE OUTLOOK

Changing Needs

ANFP members realize resident demographics and food preferences are changing significantly. A younger population is moving in and staying in long-term care facilities for longer; and these residents are more "food-centric," while being more vocal about food preferences and satisfaction. ANFP members anticipate several changes in the next five years, including changing menu offerings (86 percent) based on 86 percent expecting residents' food preferences to change. A majority of members also anticipate more flexibility around timing of meals (71 percent), and think changes will occur with dining options in

their facility (67 percent). Not surprisingly, 70 percent believe resident demographics will change, most likely leading to the anticipated foodservice changes.

Future Foodservice Trends

According to ANFP and NFEF members and board members, unique and innovative food offerings, as well as authentic ethnic foods, are expected to become extremely important in the coming years as Baby Boomers begin moving into these types of facilities. These younger residents are more aware of “green,” organic/natural and local sourcing practices, which are likely to also gain importance in the next five years.

Shift to Neighborhood Model

The need to commercialize foodservice is widely recognized—the model will shift from “medical” to “neighborhood.” With a shift to the “neighborhood model,” most factors currently surrounding foodservice programs are likely to change. Facilities will have to renovate building structures to add mini kitchens to each neighborhood, making the centralized kitchen used mostly for storage and prep. Staffing needs will change, as universal workers are responsible for all aspects of care and day-to-day life in neighborhoods, requiring cross-trained staff with knowledge and expertise across all areas.

Neighborhood Model

- Cross-trained staff
- Localized kitchens
- Localized dining
- Wide variety of offerings
- Flexible mealtimes

Future Expectations

To meet changing resident needs, ANFP members expect changes to foodservice areas available in the next five years, offering residents more flexibility and variety. Carts/kiosks, snack shops, alcohol service, convenience stores, and food courts are expected to become more commonplace in long-term care facilities. It’s expected that dining rooms with waitstaff will still be common in the next five years; however they will likely resemble restaurant service with a full menu offered.

Future Challenges

Despite the pending changes, a majority of long-term care facilities do not plan to add staff, specialists, outside services, or make significant investments due to budget constraints. As a consequence, foodservice departments need to be more vocal about the value they provide to long-term care facilities in order to “win” bigger budgets. Cross-trained foodservice staff will also be needed in order to develop knowledge and skills in culinary, nutrition, and food safety and sanitation.

IMPLICATIONS

Implications for Long-Term Care Facility Operators

Resident needs are changing, and foodservice programs have to evolve to meet residents’ shifting needs. As these changes occur, foodservice will play an even greater role in resident decision-making and satisfaction. As residents mention their desire for more flexibility and variety throughout their long-term care facility, it’s important that foodservice programs/service areas available fit their needs. It’s also extremely important for these facilities to maintain the balance of health/nutrition with taste/ flavor when developing new menu offerings. Trends will greatly impact menu, preparation methods, facility design and staffing, thus investment is required.

Implications for Suppliers

Foodservice programs have to evolve in order to meet residents’ changing needs, providing opportunities for suppliers to be a valuable resource. Communication and collaboration, as well as staying ahead of trends that impact menu, preparation methods, facility design and staffing, will allow for seamless transitions for both suppliers and operators. ☺

The preceding White Paper was produced by Technomic, a leading food research firm, based on extensive original research assessing the current and future role of foodservice in long-term care facilities. The research and White Paper were funded by the Nutrition & Foodservice Education Foundation (NFEF).



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