

## **Food service satisfaction in long term care: Making the Most of Mealtimes Study**

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**Introduction:** Residents' food service satisfaction (FSS) in long term care (LTC) homes can contribute to malnutrition risk. Low food satisfaction has been found to lead to weight loss, undernutrition and a spiral of negative health effects. The Making the Most of Mealtimes Study (M3) examined the determinants of food and fluid intake of 639 residents in 32 diverse LTC homes in Canada.

**Objectives:** 1) To identify resident level characteristics of those who completed the FSS questionnaire. 2) To examine food and nutrition related factors associated with FSS in LTC homes. 3) To validate the construct validity of the FSS questionnaire used in the M3 study.

**Methods:** Secondary data from the M3 study obtained from 329 residents examined the FSS score (21 questions with a score range of 21-63), Cognitive Performance Score, Patient Generated – Subjective Global Assessment, energy intake, protein intake, diet prescription, texture modification, and prescribed oral nutritional supplement. Descriptive statistics, bivariate analysis, and one-way ANOVA were used for statistical analysis ( $p$ -value  $\leq 0.05$ ).

**Results:** The respondents were  $86.3 \pm 7.6$  (SD) years of age, 64.4% female, 51.1% with mild/moderate cognitive impairment and 38.3% were malnourished. Associations were found between lower FSS scores and a modified diet texture prescription [ $t(327)=3.401$ ,  $p=0.001$ ], thickened fluid prescription [ $t(327)=2.458$ ,  $p=0.014$ ] and malnutrition diagnosis [ $t(327)=2.354$ ,  $p=0.020$ ]. The FSS score was associated with modified diet textures ( $F=11.6$ ,  $p=0.001$ ).

**Conclusions:** The FSS questionnaire is a feasible tool that can be used in LTC to assess FSS in residents with mild cognitive impairment. FSS is associated in expected directions with nutrition variables.

**Significance:** The FSS questionnaire demonstrated construct validity in this sample of LTC residents with mild/moderate cognitive impairment. FSS can be used with confidence by dietitians to support menu planning and improvements in mealtimes.

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