

<b>GEORGIA DEPARTMENT OF CORRECTIONS</b> Standard Operating Procedures		
<b>Functional Area:</b> FACILITY OPERATIONS	<b>Reference Number:</b> IVL01-0008**	<b>Revises Previous Effective Date:</b> 9/01/04
<b>Subject:</b> Modified Diets/Special Feeding		
<b>Authority:</b> Donald / DePetro	<b>Effective Date:</b> 5/15/2007	Page 1 of <b>9</b>

**I. POLICY:**

- A. To establish and outline to each Food Service Director standard procedures for the ordering of therapeutic diets by Department of Corrections Health Services.
- B. To establish and outline standard procedures for recording refusal of Therapeutic Diets in each facility in the Department of Corrections.
- C. To establish and outline standard procedures for the preparation and delivery of therapeutic diets in each feeding unit in the Department of Corrections.
- D. To establish and outline procedures for delivery and receipt of late meals in each facility in the Department of Corrections.
- E. To provide a system for requesting and delivering between meal feedings ordered by the physician, in each feeding unit in the Department of Corrections.

**II. APPLICABILITY:**

All feeding units in the Department of Corrections

**III. RELATED DIRECTIVES:**

- A. OCGA: 42-2-11
- B. GDC-SOP: VH30-0005
- C. ACA Standards: 3-4299, 2-2115, 1ACBC-4B-06, 3-JTS-4A-06

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**IV. DEFINITIONS:**

- A. Modified Diets - When an offender (ambulatory or hospitalized) is placed on a diet other than a regular diet by an advanced clinical provider and/or dentist.
- B. Master Diet Roster - The master diet roster is a listing of all offenders who must receive medically prescribed meals and snacks.
- C. Calorie Restricted Diets - Provides a specific caloric value and automatically includes a HS snack and third meal on weekends and holidays. (Diabetic, Hypoglycemic, and weight reduction)

**V. ATTACHMENTS:**

- A. Attachment 1 - Late Tray Receipt Record
- B. Attachment 2 - Master Diet Roster
- C. Attachment 3 - Treatment Card
- D. Attachment 4 - Modified Diet Wavier Form

**VI. PROCEDURE:**

- A. Master Diet Roster
  - 1. Where offender management system (OMS) is not available, a Medical Treatment Card will be prepared by Medical Services. (See Attachment 3) The Medical Treatment Card will be sent to Food Service prior to the next scheduled meal in order for the offender to receive the diet tray. The Medical Treatment Card will remain on file and should be updated daily as new diets are ordered or discontinued.
  - 2. The length of time the person is to remain on the diet MUST be included on this card by medical.
  - 3. The Diet Roster (Attachment 2) will be filled out by Food Service as follows:
    - a. Last and first name of offender with ID number.

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- b. Location where diet inmate is housed (dorm, cell or, hospital).
  - c. The current diet and expiration date of diet order.
  - d. Enter the week, date the roster is in effect, and signature of person preparing the roster (Attachment #2).
4. In facilities that have access to OMS, the medical department will complete the Master Diet Roster. Medical staff will input any new diets into the Restricted Diets Program on a daily basis.
  5. The Food Service Department will be notified when modified diets are necessary according to the following schedule:
    - a. Breakfast Meal - By 5 p.m. previous day.
    - b. Lunch Meal - By 10 a.m. Same day.
    - c. Supper Meal - By 3 p.m. Same day.
    - d. Diet revisions made by telephone must be followed with Medical Treatment Card or entered into OMS within 24 hours.
  6. The Master Diet Roster will be used to verify the delivery, receipt and/or refusal of diet trays for all offenders. The Diet Roster should be initialed at each meal by Food Services personnel when modified diet tray is received by the offender (exceptions: offenders in isolation and Georgia State Prison, where trays are delivered to Security). Refusal of a diet tray or failure of an offender to pick up his/her tray must also be documented on the Master Diet Roster.
    - a. In facilities where the OMS program is available, the initialed diet roster is used to put non-compliance data into the system. Food Service personnel are responsible for entering information on non-compliance into OMS. A weekly non-compliance report is printed by Food

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Service, and sent to the Medical Department for review.

- b. Where OMS is not available, Food Service is responsible for manually tallying number of meals missed per week.

B. Guidelines for Recording Refusal of Therapeutic Diets:

1. When an offender is prescribed a Therapeutic Diet by Medical Services, the offender will be required to sign a Modified Diet Waiver Form.
2. The Modified Diet Form will be filed in the offender's Medical Chart. If the offender refuses to sign the form, documentation of refusal will be written on the Modified Diet Form or in the Medical Chart.
3. The Master Diet Roster will be used to verify refusal of diet trays for all offenders receiving a Therapeutic Diet.
  - a. Every Wednesday, 2 copies of the daily Master Diet Roster including the total number of meals missed from the previous week, or 2 copies of the non-compliance report using the OMS system from the previous week, will be sent to Medical Services for review.
  - b. Offenders who fail to pickup his/her prescribed diet six times in one week or 15 or more times in a month, will be counseled by Medical regarding their dietary noncompliance and the importance of their diets. Inmates who continue to be non-compliant will have their names submitted for review to the Medical Director, requesting permission to continue or discontinue the diet.
  - c. Consideration of medical condition, therapeutic benefit of the diet and degree of noncompliance will be involved in the decision to continue or discontinue all diets.

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- d. All discontinued modified diets will be written on a Medical Treatment Card and sent to Food Services or expired in OMS. Medical personnel will update the OMS program in those facilities with access to the program.
- e. Any offender who is removed from the Master Diet Roster due to non-compliance, may not be placed back on a diet for 60 (sixty) days.

C. Preparation and Delivery of Modified Diets:

- 1. All modified diets will conform as closely as possible to the regular menu. Variations in portion size and substitutions from the regular menu will be made for special diets. Additional information on substitutions is available in the diet manual or by contacting the Dietitian Advisor at Central Office, Food and Farm Services (404 656-4728).
- 2. Each facility preparing modified diets is required to follow the Georgia Department of Corrections Therapeutic Diet Menu. The Diet Plating Guide will be posted on the serving line of the diet preparation area and followed when plating diet trays. (Plating Guides are distributed by the Central Office Dietitian Advisor for each of the 28 days of the menu cycle.)
- 3. Any diet not listed on the Therapeutic Diet Menu, the Dietitian Advisor will utilize the Georgia Dietetic Association Diet Manual.

D. Late Meals:

- 1. Late meals will be provided for the following offenders:
  - a. Those offenders returning from medical appointments at ASMP, Eugene Talmadge, or a local hospital.
  - b. Offenders attending the clinic in their institution.

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- c. Offenders requiring laboratory tests or work-ups.
  - d. New offender transfers to the medical facility at ASMP.
2. The medical section will order by telephone any late meals required from the Food Service Department. The offender's name, I.D. number, and type of diet will be provided by Medical Services. The meal will be prepared and delivered to the appropriate nursing unit by a Food Service employee.
  3. The facility will order, by telephone, any late meals required from the Food Service Department for an offender in general population. The offender's name, I.D. number and type of diet will be provided by Security.
  4. Documentation of modified diet and regular late meals will be recorded on the Late Meal Record form by Food Service. Receipt of late meals in the Medical Section will be recorded in the offender's medical record and receipt of these meals in general population will be recorded by Security on the Late Meal Record (See Attachment #1).
  5. Late meals requested after meal service will consist of foods that may be held under refrigeration. For regular diets, these meals consist of:
    - a. Two (2) sandwiches - 3 oz. meat and cheese (1 ½ oz. each per sandwich; 4 slices bread).
    - b. One (1) cup canned or one fresh fruit.
    - c. One (1) carton of milk.

For other modified (special) diets, the items listed above are used with variations to meet diet restrictions.

E. Between Meal Feedings:

1. Between meal feedings will be provided for offenders when ordered by an advanced clinical provider, and

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or dentist. These will be ordered on a Medical Treatment Card or through OMS and sent to the Food Service Department.

2. The Expiration Date on the Treatment Card will designate the length of time that between meal feedings are valid. Expiration dates should not be greater than ninety days. Medical personnel will input this information into the OMS program at facilities that have access.
3. The desired time for between meal feedings will be specified, such as A.M. (8:30 a.m.), P.M. (2:00 p.m.), H.S. (hour of sleep), and 3 meals X 7 or a multiple of these four. 3 meals x 7, a lunch on weekends and holidays, can also be ordered.
4. In-between-meal feedings and H.S. snacks must be ordered as part of the diet pattern unless a calorie restricted diet. H.S. snacks and three meals on the weekends will be automatically provided for calorie restricted diets. 3 meals x 7 will also be provided automatically to the Low Protein and Renal (ASMP and Metro State Prison only) diets. Offenders on any other diet will not receive three meals on weekends unless specifically ordered by a physician.
  - a. Regular Snack - 1/2 sandwich will consist of 1 slices bread and 1 oz. of meat, cheese or peanut butter.
    - 1) A.M. Snack: 1/2 sandwich and 1 cup lowfat milk
    - 2) P.M. Snack: 1/2 sandwich and 1 cup lowfat milk
    - 3) H.S. Snack: 1 cup Cereal and 1 cup lowfat milk for caloric restricted diets. Dietitian will provide snack instructions for caloric values.
    - 4) 3 meals X 7: 1 sandwich, 1 fruit, and 1 cup lowfat milk. Plating guide should be used for calorie restricted diets.

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- b. Calorie Restricted Diets - Conforms to diet pattern, included in total calories for the day. If more than 3 meals X 7 or HS snack is desired by the physician, it must be ordered separately.
- c. Other Snacks - Diets such as liquid, low fat, pureed, etc., may require an in between feeding or snack. The type of snack must be ordered and included with the type of diet on the Treatment Card, including EXPIRATION DATE, of no greater than ninety days.
- d. All between meal feedings shall be counted as pack-outs on the daily meal count in order to account for food issues.

5. Delivery of these feedings will vary according to local procedure. These feedings contain perishable foods and are to be delivered or picked up within 30 minutes of the requested feeding times. Space for documentation is provided on the Master Diet Roster.

F. Food Allergies

- 1. Practitioners should not order from Food Service a food allergy diet unless a verifiable and documented food allergy exists.
- 2. For inmates on regular diets, Food Service will honor only documented food allergies to main entrees.
- 3. Inmates with undocumented food allergies and allergies other than main entrees should be counseled by Medical on avoiding those food items.
- 4. For inmates on modified diets, substitutions for other than main entrees may be needed. Food Service should contact the Dietitian Advisor for any substitutions.

G. Ordering of Nourishments (Juices and Crackers):

- 1. Beverages and nourishments will only be ordered by Medical Services when necessary for giving with

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medications and other medically required needs. These will be ordered by the physician and provided by the Food Service Department.

2. All requests for beverages and nourishments MUST be in writing from Medical. Medical personnel must sign that they received the items ordered. The signed request should be filed in the Food Service Dept. for accounting purposes.
3. Requests are to be submitted to the Food Service Department on each Tuesday and Friday by 10:00 a.m. The Food Service Department will deliver the order on the same day by 3:00 p.m.
4. The request will be signed by appropriate personnel upon receipt of the juice/beverage order. The signed request will be returned to the Food Service Department for accounting purposes.
5. A stock level of no more than 3 cans is necessary on each ward, where diabetic offenders reside, to be administered during hypoglycemic episodes.
6. Beverages will NOT be obtained by personnel other than the Food Service Department (EXCEPT in emergency situations). Local procedure may require additional procedures.
7. The cracker snack should only be ordered as an HS snack for inmates who are taking depakote and experiencing gastro-intestinal discomfort. Inmates who receive calorie-restricted diets are not to be ordered an HS-cracker snack since they already receive an HS snack. Food Service should have a list with inmate names that are to receive the HS-cracker snack either in OMS or as a separate list.

**VII. RETENTION SCHEDULE:**

Attachments 1, 2, 3 and 4 of this SOP will be kept locally for one year in an active file and five years in an inactive file, then destroyed.