

Dietetic Students' Experiences Providing Meal Assistance in Long-term Care Facilities

NICOLE OSINGA, BASc, Department of Family Relations and Applied Nutrition, University of Guelph, Guelph, ON;
HEATHER KELLER, PhD, FDC, RD, Department of Kinesiology, University of Waterloo, Waterloo, ON

ABSTRACT

Purpose: This qualitative study involved describing the experiences of dietetic students who provided meal help to older adults. Of interest were benefits and challenges, and how training could be enhanced.

Methods: Individual, face-to-face, semi-structured interviews were conducted with nine undergraduate dietetic students. In the preceding year, these students had volunteered as meal helpers in a long-term care home. Interviews were digitally recorded and transcribed verbatim. Qualitative thematic analysis was used to analyze the transcripts.

Results: All participating students were female and from one undergraduate program. Three main themes emerged: growing into the role, learning outside the classroom, and providing quality assistance.

Conclusions: This study provides an understanding of how meal helping can be a valuable experience for emerging dietitians. It also gives insights into training and the development of the meal helper role.

(Can J Diet Pract Res. 2013;74:88-91)
(DOI: 10.3148/74.2.2013.88)

RÉSUMÉ

Objectif. Cette étude qualitative consistait à décrire les expériences des étudiants en diététique qui avaient fourni de l'assistance à l'alimentation à des aînés. Parmi les éléments d'intérêt, notons les avantages et les défis, et les façons potentielles d'améliorer la formation.

Méthodes. Des entrevues semi-structurées individuelles de face à face ont été menées auprès de neuf étudiantes de premier cycle en diététique. Au cours de l'année précédente, ces étudiantes avaient fait du bénévolat en tant qu'aides à l'alimentation dans un établissement de soins de longue durée. Les entrevues ont été enregistrées de façon numérique et transcrites textuellement. Une analyse thématique qualitative a été utilisée pour analyser les transcriptions.

Résultats. Toutes les étudiantes participantes étaient des femmes provenant d'un programme de premier cycle. Trois thèmes principaux ont émergé : acquérir une meilleure connaissance du rôle, apprendre à l'extérieur des salles de cours et offrir de l'assistance de qualité.

Conclusions. Cette étude permet de comprendre pourquoi le soutien à l'alimentation peut constituer une expérience enrichissante pour les futures diététistes. Elle offre également un aperçu de la formation liée au rôle d'aide à l'alimentation, ainsi que du développement de ce rôle.

(Rev can prat rech diétét. 2013;74:88-91)
(DOI: 10.3148/74.2.2013.88)

INTRODUCTION

The majority of older adults living in residential care facilities require some type of eating assistance, ranging from simple meal setup to total assistance (1,2). Quality mealtime assistance does not always occur in long-term care (LTC) homes. Inadequate staffing and training are primary barriers, which lead to task-focused mealtimes (3-7). Assistance has been described as “mechanistic,” with minimal social interaction; pleasure with eating and food intake suffer (3,7,8). As a result, many institutions welcome the assistance of family members, privately hired caregivers, and/or volunteers at mealtime (1,8), as such assistance has positive outcomes for residents (1,9). Minimal research has been conducted on the experiences or training needs of helpers who provide meal assistance. Dietetic students are a potential pool of helpers, as they seek meal-helping roles to gain

experience in a clinical environment. Understanding these experiences may help with the recruitment and retention of this potential pool of meal helpers.

PURPOSE

Experiences were examined among dietetic students who volunteered or were paid meal helpers in Ontario LTC homes. Specifically, we explored what students gained from their experience as helpers, the challenges they encountered, and gaps in their training. Qualitative methods were chosen to allow flexibility in following unexpected ideas, to study symbolic dimensions and social meanings, and to support the empirical development of this understanding (10).

METHODS

Study design

A recruitment message sent to the University of Guelph Applied Human Nutrition listserv and snowball sampling were used to recruit participants. Dietetic students were eligible for this study if they were not employed directly by the LTC homes for duties other than meal helping (i.e., they could not be employed as dietary aides), if they had assisted in the preceding year, and if they were able to articulate their experiences clearly. Before every face-to-face interview, the interviewer obtained informed consent from each participant. The University of Guelph Research Ethics Board provided clearance for this study (#11MY005).

Material was collected through individual, face-to-face, semi-structured interviews with nine students who self-identified themselves as meal helpers and were deemed eligible to participate; an additional six students employed as dietary aides or food services workers came forward, but were not included. The interview focused on reasons for participants' interest in providing mealtime help, types of interactions they had with residents, challenges they encountered, and components of their meal helper training. The interviews were 20 to 50 minutes, and were digitally recorded and transcribed verbatim by the first author.

Analysis

The transcripts were analyzed by following the steps outlined by Braun and Clarke for thematic analysis (11). Each transcript was read several times to ensure familiarity with the material, and insights were noted in short memos. Line-by-line text coding was completed to develop initial codes, which were then gathered into possible "like" themes (11,12). Themes were adjusted and refined to include all the coded extracts pertinent to the study aims. Last, clear labels and definitions for each theme were generated. The authors discussed theme development during this process. Although only nine participants were eligible and interviewed, new themes did not emerge in latter interviews, and therefore no further material or interviews were required for saturation.

RESULTS

All participants were female and aged 20 to 23. One was in her third year of the program and the others were in their fourth year. Six had volunteered at a chronic care/rehabilitation hospital and LTC facility in Guelph. Three volunteered in LTC homes in Barrie, Collingwood, and Cambridge, Ontario; none had been employed specifically as a meal helper. Three themes emerged from the analysis: growing into the role, learning outside the classroom, and providing quality assistance. Table 1 includes quotations that exemplify these themes.

Growing into the role

Our research revealed that reasons for wanting to become a meal helper and continuing to provide assistance evolve over time. Intentions progress from being narrow and self-interested to become more broad and altruistic. The students described starting the role to benefit themselves (e.g., by gaining experience

they could mention on a résumé). However, they indicated that providing assistance offered many other rewards. They learned that their role had an impact and they stayed in the role to benefit others (e.g., by helping to increase residents' intake at meal-times). In addition, they stayed for the relationships they developed with residents through the process of providing assistance; participants explained that they made efforts to become familiar with residents by initiating conversation.

Learning outside the classroom

Participants described a disconnection between their academic/meal helper training and their actual experiences providing assistance; that is, they learned a great deal outside their formal education. Specifically, participants recognized the dynamics of working with the nursing and dietary staff—they learned the value of a team. They had seen how their actions reflected on the performance of the staff and care of the residents, and would provide extra help when the dining room was short-staffed. They described learning through mentorship: front-line staff gave guidance for assisting individual residents, especially to new meal helpers. These dietetic students also learned the risks of eating while providing assistance, and were fearful for residents' safety and tolerance for certain foods. When they were assisting residents unable to express themselves verbally, meal helpers developed strategies that helped them overcome communication difficulties, such as watching for nonverbal responses.

Providing quality assistance

Meal helpers were concerned about providing residents with the best assistance possible. They stated that focusing on eating, valuing consistency, and promoting autonomy and dignity were central to this high-quality assistance. Although verbal interaction was noted to be important, meal helpers believed their priority was to promote eating, as intake was a challenge for residents who needed full assistance. Helpers employed tactics to promote intake, such as starting with a resident's favourite foods. Students learned the value of consistency when they assisted residents. By helping the same individual, they became aware of the resident's eating style and preferences, and they developed social relationships. Meal helpers also recognized the importance of promoting autonomy and dignity, by providing residents with choice and helping only when residents needed assistance.

DISCUSSION

Themes

To our knowledge, this is the only published study to explore the experiences of voluntary dietetic student meal helpers. Some of our themes parallel other research findings on mealtime assistance. Specifically, Steele et al. found that a shift in attitude occurs and the experience of being a mealtime helper evolves over time (2), while Keller et al. found a key element of quality eating assistance is honouring the identity and protecting the dignity of those assisted (13). Our themes advance the dietetic community's understanding of the meal helper role in the LTC setting. They can be used as a basis for developing training and mentor-

Table 1
Meal helpers' perspectives: quotations demonstrating themes

Growing into the role	
Starting the role to benefit oneself	<p>"It was the summer before my fourth year and I was looking for more ways to get clinical experience because I knew, for internship, you wanted to get this."</p> <p>"I had a meeting with a dietitian, and she said that it was a really good experience to be a volunteer feeder. She also worked at this long-term care home, so she told me to apply there."</p>
Staying in the role to benefit others	<p>"I was coming there as a volunteer to help them, so it wasn't a task. So I knew that they were going to have a more positive meal experience, and I'd be there to just feed them and talk to them, and not just be, like, 'Here you go—eat!'"</p> <p>"I really like the one person in particular, when she laughs. I just feel so good that I'm making someone laugh. And when I get a reaction out of the other people that don't talk—like, if I get a smile out of them or something—that just makes me feel really good, because maybe that doesn't happen to them all the time, so I really like that."</p>
Staying for the relationships	<p>"I lived here alone in the summer to work there and I would look forward to going to work and talking to them and getting to know their families."</p> <p>"More and more, as I went, I found out she liked country music and she really liked Toby Keith. So we'd always talk about him and just how her day [was] going, to make it more enjoyable."</p>
Learning outside the classroom	
Learning the value of a team	<p>"A lot of the nurses, they're on very much of a time crunch, which I totally understand. They don't always have enough time to feed everyone at the normal pace."</p> <p>"When we sometimes have temporary [personal support workers] who've been called onto the floor for the night, I will sort of say, 'Oh, if you do this first, she takes it well' or 'Add some more salt to her potatoes: she might eat them better!' And things like that. So I definitely think that especially to people who are newer, I give some direction for [them]."</p>
Learning through mentorship	<p>"I know for me, one of the things that really helped was the volunteer coordinator. She was excellent from day one. I knew that if I needed help, I could always go to her."</p> <p>"Watching the nurses, they would kind of come over and give me tips every once in a while, which was really beneficial. That's stuff you don't learn in the training sessions."</p>
Learning about the risks of feeding	<p>"At one point I was thinking 'Oh, you're going really fast. Like, it looks like you're kind of shovelling it in their mouths.'... It might be harmful for someone if they have swallowing problems and they don't get a chance to chew it all and swallow it all properly."</p> <p>"Sometimes the food appeared a little too chunky for what they could eat. I was, like, 'Oh, they can actually eat this?' The sounds they make—you're not sure if they're choking or not. Usually the nurses said they [were] okay, but you're just kind of really nervous."</p>
Learning to overcome communication difficulties	<p>"I've never really dealt with people who won't talk back, so I found that kind of challenging at first. But it's getting easier now."</p> <p>"Definitely watching the nurse and how she interacts with people who won't talk back is a big help. I find that you can even engage them, like they're still listening to what you say."</p>
Providing quality assistance	
Focusing on eating	<p>"She definitely has very good and very bad days. So, some days just getting the food into her is the most important thing of me being there. It's nice to talk, but she does need her nutrition. That's definitely the first priority."</p> <p>"I would say intake would be [a big challenge about mealtimes]. There was a lady who I didn't feed, but was sitting beside the resident that I fed, and she would just sit there with the food in front of her, and we would ask her to eat something and she would be, like, 'Oh, no! I save this for you!' So we'd really have to work on encouraging her and sometimes it just took her a couple of spoonfuls of something, just to start her off, but once we did that, she could do the rest herself."</p>

Table 1 (cont'd)

Meal helpers' perspectives: quotations demonstrating themes

Valuing consistency	<p>"I think mealtime is different for building relationships versus other activities because they are sitting there—like, one of my tables, for example, is one of the units. They've all been sitting together for the last two-and-a-half years or so, and so they know each other really well because they are guaranteed to see each other three times a day, every single day."</p> <p>"I'm not necessarily assigned to them. I just kind of prefer to feed them. They're the ones I've started on and I'd rather feed them, since I know their strengths and weaknesses."</p>
Promoting autonomy and dignity	<p>"In terms of autonomy, there [were] some instances where she could have really soft sandwiches, so I kind of wanted to maximize the control that she had over her meal, too. So if she was given a small sandwich or something, I would cut it up into little pieces and let her feed herself. So, I tried to do that so she could have some control over what she was to eat."</p> <p>"Once the meal would come, I'd always ask her what she wanted and what she enjoyed—but some of the foods were harder for her to eat, so whatever she'd choose, I'd just kind of feed her slowly."</p>

ship programs specific to students, as well as for the recruitment and retention of potential meal helpers in general.

Study limitations

Limitations were the inclusion of students from only one dietetics program and the fact that six of the nine participants volunteered in the same facility. The culture of this home is likely reflected in the findings, although the material offered by the remaining three respondents supported these themes. Always present is the possibility that researchers overly influenced theme development, and that findings lack credibility; however, researchers cannot avoid influencing, in some way, the qualitative research they conduct (14). We noted our presumptions and used non-leading interview questions. We also recognized that our findings may have been influenced by our volunteering expertise and LTC home employment, and by being expert in geriatric nutrition. By conducting the analysis as a team, we minimized the influence of individual experiences and allowed themes to emerge from the data. Furthermore, a clear description of the analysis procedures and a thick description of themes supported by extensive quotes (as shown in Table 1) lend credibility to our findings (14). Finally, preliminary results were presented to a broad dietetic audience, which included many students. Themes resonated with this audience, and we therefore concluded that further analysis was unnecessary.

RELEVANCE TO PRACTICE

The potential benefits of the meal assistance role must be emphasized to promote recruitment and retention of dietetic trainees and other students. Meal helpers are valuable team members: they get to know residents on a personal level and develop skills in communication and the provision of quality assistance. Training programs should support volunteer meal helpers so they can grow into their role and learn on the job and from other team members, while developing social interaction and communication skills. Team mentorship after training could be formalized to help bring these volunteers into the care team. This approach would nurture leadership and reinforce quality

eating assistance principles among staff. Dietetic students also should be encouraged to volunteer as meal helpers because they will learn firsthand the importance of quality eating assistance, as well as how interdisciplinary teams function.

References

- Musson ND, Kincaid J, Ryan P, Glusman B, Varone L, Gamarra N, et al. Nature, nurture, nutrition: interdisciplinary programs to address the prevention of malnutrition and dehydration. *Dysphagia*. 1990;5:96-101.
- Steele CM, Greenwood C, Ens I, Robertson C, Seidman-Carlson R. Mealtime difficulties in a home for the aged: not just dysphagia. *Dysphagia*. 1997;12:45-50.
- Kayser-Jones J, Schell ES. Staffing and the mealtime experience of nursing home residents on a special care unit. *Am J Alzheimers Dis Other Dement*. 1997;12:67-72.
- Carpiac-Claver M, Levy-Storms L. In a manner of speaking: communication between nurse aides and older adults in long-term care settings. *Health Commun*. 2007;22:59-67.
- Pelletier CA. Feeding beliefs of certified nurse assistants in the nursing home: a factor influencing practice. *J Gerontol Nurs*. 2005;31(7):5-10.
- Pelletier CA. What do certified nurse assistants actually know about dysphagia and feeding nursing home residents? *Am J Speech Lang Pathol*. 2004;13(2):99-114.
- Simmons SF, Babineau S, Garcia E, Schnelle JF. Quality assessment in nursing homes by systematic direct observation: feeding assistance. *J Gerontol*. 2002;57A:665-71.
- Wu S, Barker JC. Hot tea and juk: the institutional meaning of food for Chinese elders in an American nursing home. *J Gerontol Nurs*. 2008;34(11):46-57.
- Lipner HS, Bosler J, Giles G. Volunteer participation in feeding residents: training and supervision in a long-term care facility. *Dysphagia*. 1990;5:89-95.
- Sandelowski M. Focus on research methods: whatever happened to qualitative description? *Res Nurs Health*. 2002;23:334-40.
- Braun V, Clarke V. Using thematic analysis in psychology. *Qual Res Psychol*. 2006;3:77-101.
- Hsieh HF, Shannon SE. Three approaches to qualitative content analysis. *Qual Health Res*. 2005;15:1277-88.
- Keller HH, Martin LS, Dupuis S, Genoe R, Edward HG, Cassolato C. Meal-times and being connected in the community-based dementia context. *Dementia*. 2010;9:191-213.
- Daly K. *Qualitative methods for family studies and human development*. Los Angeles: Sage Publications; 2007.