



## **Food Service & Nutrition Report May 2026**

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### **Workforce Wellness:**

Over the last six months, the Dietary Department has continued to adapt and move forward through a period of transition while maintaining daily operations and supporting patient care needs. The department has benefited from strong internal collaboration and flexibility, with leadership continuity supported by existing familiarity with department functions and workflows. As Interim Food Service Director, I bring nearly a year and a half of experience working closely within the department as a clinical dietitian and assisting with food production management, which has helped support a smooth transition and continued operational stability.

Over the last 6 months, we have transitioned our menu program from a primarily manual system by bringing our favorite recipes over into the DiningRD menu program and fully implementing their tray card system. While the transition has presented unexpected challenges, the new system is anticipated to improve efficiency, streamline workloads, and reduce dietary errors. We are working with the IT department now and have great hopes that we will work out the remaining glitches in the system during the next few months while also starting a tablet-based bedside diet ordering system.

### **Cooks:**

The department is currently operating without the use of traveling cooks. At present, staffing includes two primary cooks, along with an additional cook who transferred to another department but continues to support Food Services on a part-time, on-call basis during the current staffing shortage. Additionally, a cook primarily assigned to the employee meal program has agreed to assist with cooking shifts as needed while recruitment efforts for an additional cook are underway.

### **Employee Meal Program:**

This has become a very popular program. We primarily have one cook that works part-time on Monday, Wednesday, Friday and sometimes Sundays to make the meals. This program helps us utilize our left-over ingredients from the hospital & LTC meals. Employees love the convenience and variety of options. We are now working with IT to get a food labeling program to more easily help standardize recipes, cost out recipes, and print compliant labels.



**Community Engagement:**

In collaboration with the LTC Activities department, we had a holiday meal and participated in julebukking. We also had a New Year's celebration, Easter dinner, St. Patrick's Day meal and Mother's Day Tea.



**Patient Centered Care:**

We now have two Administrative Aides that go to rooms to get patient meal orders. They also continue to fill in other dietary aide roles, as needed for call-offs. This continues to work well, and we have hopes that the new tablet ordering system will make this program even better. Many LTC residents enjoy selecting their menus and for those that are unable to do so, we utilize their likes and dislikes to help ensure patient satisfaction. We have also implemented a new bedtime snack program on a trial basis, designed to provide residents with greater variety and choice in their evening snacks. The program utilizes a color-coded cart system that allows nurse aides to offer snacks room-to-room while ensuring selections align with each resident's dietary requirements. To further enhance the program and improve food storage and accessibility, a new refrigerated cart was purchased and incorporated into the process.

**Facility:**

We have been very fortunate to not have any major equipment issues recently. We keep the maintenance department quite busy with minor repairs, and they have been great to work with.

**Financial Wellness:**

As seen last year, the cost of food supplies continues to rise steadily. In addition, periods of increased activity on the CAH side of PMC have resulted in higher food production demands and overall meal output. Higher CAH census levels, along with LTC events and gatherings, have also increased the need for dishes, trays, silverware, cups, and other small wares, as well as the ongoing replacement of these items due to normal wear and tear. Despite these challenges, the department continues to work hard to provide high-quality food service and support to patients, residents, and staff.

**Submitted by:** Jennifer M. Wood, MS, RDN, CSG – Interim Food & Nutrition Services  
Director

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