[7 out of 10 satisfied with hospital food--is better, but not good enough].
https://arctichealth.org/en/permalink/ahliterature143873
Author: Maria Wallhager
Catharina Elmsäter-Svärd
Source: Lakartidningen. 2010 Mar 31-Apr 13;107(13-14):926; discussion 926-7
Language: Swedish
Publication Type: Article
Keywords: Food - standards
Food Handling - standards
Food Service, Hospital - standards
Humans
Patient satisfaction
Sweden
PubMed ID: 20432872 View in PubMed 

Absence of nutritional or clinical consequences of decentralized bulk food portioning in elderly nursing home residents with dementia in Montreal.
https://arctichealth.org/en/permalink/ahliterature196462
Author: B. Shatenstein
G. Ferland
Author Affiliation: Centre de recherche, Institut universitaire de gériatrie de Montréal, Québec, Canada.
Source: J Am Diet Assoc. 2000 Nov;100(11):1354-60
Date: Nov-2000
Language: English
Publication Type: Article
Abstract: To evaluate the nutritional and clinical consequences of changing from a centralized food delivery system to decentralized bulk food portioning; a system in which meal portioning occurs on residents' floors of a nursing home.

A pilot study with a pre-post design

The study took place on one floor of a home for elderly persons with dementia. Of the 34 residents, 22 (1 man) participated in this study. Average age was 82 years (range = 55 to 94 years). Nutritional status was verified before introduction of the bulk food portioning system by 3 nonconsecutive days of observed food intakes, anthropometric measurements (height, weight, triceps skinfold thickness, mid-upper-arm circumference), and biochemical parameters (albumin, lymphocytes, glucose, sodium, potassium, transferrin, vitamin B-12, folate, hemoglobin). Trained dietitians collected the dietary and anthropometric data and validated the food intake estimates and anthropometric measurements. Data were also collected 10 weeks after implementation of the new food distribution system.

Paired t tests adjusted by a Bonferroni correction assessed differences between values measured before and after introduction of the new food distribution system.

Average food consumption increased substantially and significantly after introduction of the bulk food portioning system. Mean energy intakes rose from 1,555 to 1,924 kcal/day and most other nutrients also increased, many significantly, but there were no changes in anthropometric values or biochemical parameters, except for albumin level which decreased to the lower normal limit.

Portioning of food in the residents' dining room simulates a homelike atmosphere thereby encouraging increased food consumption. With well-trained and enthusiastic staff, this system could contribute to improved nutritional status in the very elderly, even those who have dementia. Dietitians have a key role to play in overseeing residents' nutritional needs and in training, supervising, and motivating foodservice personnel.

PubMed ID: 11103658 View in PubMed
Absences for sickness among children in day care.

Author: M. Möttönen
M. Uhari

Author Affiliation: Department of Pediatrics, University of Oulu, Finland.


Date: Nov-1992

Language: English

Publication Type: Article

Keywords: Absenteeism
Child
Child Day Care Centers - standards - statistics & numerical data
Child, Preschool
Finland - epidemiology
Food Services - standards - statistics & numerical data
Humans
Hygiene
Infant
Morbidity
Multivariate Analysis
Occupations - statistics & numerical data
Parents
Questionnaires
Research Support, Non-U.S. Gov't
Retrospective Studies
Seasons
Social Class

Abstract: The number of days of absence because of sickness, recorded for all children in one city in Finland, cared for in municipal day care over a period of 2.5 years, was collected from the monthly figures kept by the city council office for accounting purposes. The average number of days of absence per child was 24 per year at child-care centers and 9 in family care.

PubMed ID: 1467617 View in PubMed

Accuracy of self-reported intake of signature foods in a school meal intervention study: comparison between control and intervention period.

https://arctichealth.org/en/permalink/ahliterature267753
Bias in self-reported dietary intake is important when evaluating the effect of dietary interventions, particularly for intervention foods. However, few have investigated this in children, and none have investigated the reporting accuracy of fish intake in children using biomarkers. In a Danish school meal study, 8- to 11-year-old children (n=834) were served the New Nordic Diet (NND) for lunch. The present study examined the accuracy of self-reported intake of signature foods (berries, cabbage, root vegetables, legumes, herbs, potatoes, wild plants, mushrooms, nuts and fish) characterising the NND. Children, assisted by parents, self-reported their diet in a Web-based Dietary Assessment Software for Children during the intervention and control (packed lunch) periods. The reported fish intake by children was compared with their ranking according to fasting whole-blood EPA and DHA concentration and weight percentage using the Spearman correlations and cross-classification. Direct observation of school lunch intake (n=193) was used to score the accuracy of food-reporting as matches, intrusions, omissions and faults. The reporting of all lunch foods had higher percentage of matches compared with the reporting of signature foods in both periods, and the accuracy was higher during the control period compared with the intervention period. Both Spearman’s rank correlations and linear mixed models demonstrated positive associations between EPA+DHA and reported fish intake. The direct observations showed that both reported and real intake of signature foods did increase during the intervention period. In conclusion, the self-reported data represented a true increase in the intake of signature foods and can be used to examine dietary intervention effects.
Activity and obesity of Colombian immigrants in Canada who use a food bank.

Author: Victor Ng
Timothy J Rush
Meizi He
Jennifer D Irwin

Author Affiliation: Faculty of Health Sciences, University of Western Ontario, London, Ontario.


Date: Oct-2007

Language: English

Publication Type: Article

Keywords:
Acculturation
Adult
Aged
Colombia - ethnology
Emigrants and Immigrants - psychology - statistics & numerical data
Ethnic Groups - psychology
Exercise - psychology
Female
Food Services - utilization
Humans
Male
Middle Aged
Obesity - epidemiology - ethnology - psychology
Ontario
Overweight - epidemiology - ethnology - psychology
Questionnaires
Sex Factors
Social Support
Socioeconomic Factors
Utilization Review - statistics & numerical data

Abstract: The purpose of this study was to provide some preliminary description of the Latin-Canadian community by reporting the socioeconomic status, physical activity, and weight status (i.e., healthy weight, overweight, or obese status) of Colombians newly immigrated to London, Ontario Canada. Face-to-face interviews were conducted on a convenience sample of 77 adult Colombian immigrant food bank users (46.8% men; mean age 39.9 yr., SD=11.8). Physical activity was gauged using the International Physical Activity Questionnaire and self-report Body Mass Index, and sociodemographic data were collected. Of respondents, 47% had a university education, and 97% received social support. 61% met recommended levels of physical activity. Men were more active, being involved in about 130 min. more of exercise per week, and more men were overweight than women (63.9% versus 39.0%, respectively). Of respondents, 73% reported being less active than before coming to Canada. This pilot study indicates that Latin-Canadian immigrants are a vulnerable group in need of acculturational support. Further study is warranted.

PubMed ID: 18065093 View in PubMed
The account of quantitative and qualitative structure of diets of children of children's houses has revealed infringements in organisation of mode of meals, and also unbalance of diet on structure of food substances, including on iodine, that can promote development of iodine-dependence diseases.
To assess the adequacy and variability of the diet served to Tarahumara children in indigenous boarding schools.

Records of food and drinks served for meals, weighed daily, were obtained from Monday through Friday for 10 consecutive weeks in two selected boarding schools. Nutrient intake for Tuesdays, Wednesdays and Thursdays was calculated and analyzed for weeks 3, 5 and 7.

The number of food items used per week ranged from 33 to 46. The most frequently utilized items were cooking oil, fortified corn tortilla, milk, onion, sugar and beans. Total energy served per day fluctuated between 1309 and 2919 Kcal; proteins comprised 10.5 to 21.2% (45 to 127 g/day), carbohydrates 40.7 to 61.9% (145 to 433 g/day), and lipids 22.5 to 48.1% (45 to 125 g/day) of the total. Daily micronutrient content ranges were: iron 15-33 mg, calcium 686-1795 mg, zinc 8-19 mg, vitamin A 118-756 mcg, vitamin B(9) 42-212 mcg, and vitamin B(12) 0.8-5 mcg.

There was significant daily variability in the diet, which was hypercaloric due to the high lipid content, and yet insufficient in vitamins B(9), B(12) and A.
[A dietitian's help is welcome in malnutrition!]

https://arctichealth.org/en/permalink/ahliterature62075

Author: A. Neymark
        H. Park-Peterson

Source: Lakartidningen. 1994 Jul 27;91(30-31):2758

Date: Jul-27-1994

Language: Swedish

Publication Type: Article

Keywords: Diet Therapy
          Dietary Services - manpower
          Food Service, Hospital - manpower
          Humans
          Nutrition Disorders - prevention & control
          Sweden

Notes: Comment On: Lakartidningen. 1994 Jun 15;91(24):2410-38052027

PubMed ID: 8057725 View in PubMed

The aesthetic dimension in hospitals--an investigation into strategic plans.

https://arctichealth.org/en/permalink/ahliterature81540

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Date: Sep-2006

Language: English

Publication Type: Article
BACKGROUND AND RATIONALE: The underlying assumption was that the aesthetics of the hospital surroundings are often neglected. AIMS: This article is the first part of a larger study into the aesthetics of general hospitals. The aim of the study is to throw light on the influence of aesthetics on the health and well-being of patients and the professional personnel, and to examine how aesthetic considerations are dealt with. We present a survey of how the aesthetic dimension is planned and it is considered important in the strategic plans of Norwegian general hospitals. METHODS: Data were sampled by analyzing the strategic plans of somatic hospitals. Sixty-four of 86 hospitals responded (74%). Concepts were categorized in a matrix of 11 main categories, each with subcategories. The method was quantitative, in that the analyzed material was amenable to counting. RESULTS: Very few concrete guidelines or directions for the aesthetic dimension have been included in written documents. This indicates that the aesthetic area is a neglected field in the directions for the daily management of hospitals. CONCLUSIONS: The research available today on the contribution of environmental aesthetics to health, rehabilitation, and well-being suggests that it is important to have concrete guidelines recorded in strategic plans. This field concerns the maintenance of high quality in the caring professions.
In June 2008, the Alberta government released the Alberta Nutrition Guidelines for Children and Youth. We evaluated the awareness of and intent to use the guidelines in Alberta schools, and sought to determine whether organizational characteristics were a factor in adoption of the guidelines.

Randomly selected schools from across Alberta completed a 19-question telephone survey, which included open- and closed-ended questions about the schools’ characteristics, the priority given to healthy eating, awareness of the guidelines, and the schools’ intent to use the guidelines. Of the 554 schools contacted, 357 (64%) completed the survey.

Overall, 76.1% of schools were aware of the guidelines and 65% were in the process of adopting them. Fifty percent of schools identified healthy eating as a high priority and 65.9% reported making changes to improve the nutritional quality of foods offered in the past year. Schools that were larger, public, and urban, and had a school champion and healthy eating as a high priority were more likely to be adopting the guidelines.

Most schools were aware of the nutrition guidelines and many had begun the adoption process. Identifying a school champion may be an important first step for schools in terms of adopting health promotion initiatives.