



Advanced Older Adult Nutrition Service Management Training Course



AGILE LEADERS
Training Center

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Overview

Advanced Older Adult Nutrition Service Management Training Course is a one-week advanced course for elderly-care managers, food-service coordinators, residential-care leaders, and community nutrition teams who leave with an Older Adult Nutrition Service Improvement Portfolio. Participants connect malnutrition risk screening, meal-service planning, hydration monitoring, food texture and accessibility, food safety, referral, documentation, and outcome review across care settings. Agile Leaders Training Center presents older adult nutrition service management through coordinated, non-clinical service improvement.

Who Should Attend

- Elderly-care management functions responsible for nutrition-service pathways
- Food-service functions responsible for menus, delivery, safety, and meal experience
- Residential-care functions responsible for observation, records, and escalation
- Community-support functions responsible for access, follow-up, and referral
- Quality functions responsible for monitoring nutrition-service performance

The course assumes participants already coordinate care or food services and leaves out clinical diagnosis, individualized therapeutic prescribing, tube-feeding decisions, and medical treatment.

Departments and Industries

The course supports departments and industries that plan, deliver, coordinate, or monitor nutrition and hydration services for older adults.

- Residential care and assisted-living services
- Home-care and community-support organizations
- Healthcare operations and rehabilitation support
- Food-service and contract-catering teams
- Social services and aging-support organizations

Learning Objectives

By the end of this course, participants will be able to:



- Apply a structured malnutrition risk screening pathway
- Build meal-service and hydration support controls
- Compare food texture and drink-thickness requirements
- Analyze food-safety, access, and intake barriers
- Prioritize referral and multidisciplinary coordination actions
- Evaluate nutrition-service outcomes and improvement needs

Course Agenda

Day 1: Nutrition Risk and Service Context

- ESPEN Geriatric Nutrition Service Principles
- MUST Five-Step Screening Pathway
- Nutrition Risk Observation and Evidence Record
- Older-Adult Food Preference and Access Interview
- Nutrition Service Scope and Boundary Map

Day 2: Meals, Hydration, and Accessibility

- Meal-Service Adequacy and Diversity Checklist
- Hydration Risk and Intake Monitoring Log
- Meal Environment and Assistance Review
- Food Access and Adaptive Support Assessment
- Menu-to-Need Service Planning Matrix

Day 3: Texture, Safety, and Escalation

- IDDSI Food Texture and Drink Thickness Framework
- Serving-Condition Texture Testing Protocol
- Food Safety Hazard and Control Checklist
- Intake Change and Warning-Sign Escalation Card
- Dietitian Referral and Information Handoff Record

Day 4: Coordination, Monitoring, and Quality

- Multidisciplinary Nutrition Responsibility Matrix
- Care-Setting Transfer and Reassessment Workflow
- Meal Acceptance and Intake Trend Dashboard
- Nutrition Service Incident and Feedback Log
- Quality Improvement Aim and Measure Sheet



Day 5: Nutrition Service Improvement Practice

- Exercise: Complete a Nutrition Risk Service Review
- Exercise: Design a Meal and Hydration Support Plan
- Exercise: Test a Texture and Safety Control Sequence
- Exercise: Coordinate Referral, Handoff, and Monitoring
- Capstone Exercise: Older Adult Nutrition Service Improvement Portfolio

Practical Exercises

The course uses suggested activities from residential care, home care, community support, rehabilitation, and food-service settings.

- Suggested activity: screen a service scenario, record evidence, define boundaries, and select an escalation route.
- Suggested activity: improve a meal-service scenario using preference, access, hydration, environment, and food-safety controls.
- Suggested activity: apply common texture terminology while keeping individual clinical recommendations with qualified professionals.
- Suggested activity: build measures for intake trends, referrals, incidents, feedback, and service improvement.

FAQs

Who suits older adult nutrition service management training, and what does it assume?

Older adult nutrition service management training suits professionals who coordinate care, meals, hydration, referral, or quality. It assumes operational responsibility and leaves clinical diagnosis, therapeutic prescriptions, tube feeding, and medical treatment to qualified clinicians.

How does older adult nutrition service management differ from clinical dietetics training?

Older adult nutrition service management focuses on screening pathways, meal delivery, hydration, accessibility, safety, coordination, monitoring, and escalation. Clinical dietetics training prepares practitioners to assess, diagnose, prescribe, and treat individual nutrition conditions.

How should services screen older adults for malnutrition risk?

Services should use an authorized structured screening tool, record the required evidence, classify risk according to the tool, follow the applicable action pathway, and refer concerns to qualified nutrition professionals.



How can meal services support hydration and food access for older adults?

Meal services can monitor intake, offer accessible choices, improve the meal environment, provide agreed assistance, schedule drinks, respond to preferences, and escalate persistent changes or safety concerns.

How should older adult nutrition service outcomes be monitored?

Outcomes should connect screening completion, referrals, intake trends, hydration records, meal acceptance, incidents, feedback, reassessment, and documented improvement actions without replacing clinical measures.

Conclusion

The course connects nutrition risk, meal service, hydration, texture, food safety, referral, monitoring, and quality improvement. Participants take back an Older Adult Nutrition Service Improvement Portfolio. The portfolio changes how teams coordinate responsibilities, document risk, improve food access, escalate concerns, track outcomes, and strengthen service continuity.



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