Specification of Competency Standards for the Elderly Care Service Industry Unit of Competency

Functional Area - Common

Title	Follow-Up the Elderly's Dietary Needs
Code	110944L3
Range	This Unit of Competency is applicable to practitioners who provide home support services in the elderly care service industry. The application requires the demonstration of in-depth expertise or theoretical knowledge in a range of technical, professional or managerial working environments, and its execution requires careful thinking, critical analysis and decision-making skills. Practitioners should be able to assess the elderly's dietary needs and design menus, according to the elderly's physical conditions, and the organization's procedures and guidelines on catering services, as well as continuously follow-up on the elderly's physical conditions, in order to amend their diets in a timely manner.
Level	3
Credit	2 (For Reference Only)
Competency	 Performance Requirements Relevant knowledge on the elderly's dietary needs Understand the organization's procedures and guidelines on catering services Understand the elderly's basic dietary needs, such as: Balanced diet Less oil, less salt, less sugar and high fiber Favor cooking methods such as: steaming, boiling, scorching, braising and baking Reduce fat, sodium, and sugar intake Increase the absorption of nutrients such as: calcium and magnesium Soft food texture for easy digestion, etc. Understand the elderly's physical condition and the impact on their dietary needs, such as: chronic disease, types of medications, etc. Understand the skills to assess the elderly's dietary needs Understand the required knowledge for amending diets 2. Follow-up the elderly's dietary needs Assess the elderly's dietary needs according to their physical conditions and other information, in order to design suitable diets, including: Patients with chronic diseases: design diets based on the elderly's disease, such as: low-sugar diet for diabetics, low-salt diet for hypertensive patients, low-fat diets for obese patients, etc. Types of medication: in response to the medication prescribed by the doctor, such as: the elderly who take blood thinners should not eat broccoli, bean sprouts, water spinach, etc., and those who take antihypertensives may be contraindicated to drinking grapefruit juice, etc. Religious background: pay attention to the fasting needs of the elderly persons with religious beliefs Special circumstances, such as: abstain from certain food before surgery, post-operative diet care, special diets for elderly persons with chewing difficulties, etc. As the physical condition of the elderly dietary needs using different methods, such as: Professional medical reports Nutritionist advices Care

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	 Related staff reports Elderly meal records, etc. Amend the diet in response to changes in the elderly's dietary needs, and consider the matters related to the ingredients of their diets, such as: Difficulty in obtaining Food seasonality Suitability for other elderly persons Cooking difficulty Cost control, etc. Understand the suitability of the amended diets to the elderly's dietary needs, and perform further amendments if necessary Exhibit professionalism Carefully observe and accurately assess the changes in the elderly's dietary needs
Assessment Criteria	The integrated outcome requirements of this Unit of Competency are:
	 Able to assess the elderly's dietary needs according to their physical conditions, as well as the organization's procedures and guidelines on catering services; and Able to utilize different methods to assess the changes in the elderly's dietary needs, and perform relevant amendments to improve the quality of catering services.
Remark	