



*State of North Carolina
Department of Public Safety
Prisons*

Chapter: M
Section: .0700
Title: Therapeutic Diets
Issue Date: 06/01/2020
Supersedes: 10/01/2015

POLICY AND PROCEDURE

.0701 PURPOSE

The purpose of this policy is to provide guidelines for prescribing, provision and management of therapeutic diets for the offender population.

.0702 POLICY

It is the policy of the Food and Nutrition Management section that the delivery of medical nutrition therapy will be managed through Registered Dietitians, medical staff, and food management personnel. Coordinated efforts will ensure the nutritional welfare of both general population offenders and offenders needing medical nutrition therapy.

.0703 DEFINITIONS

Therapeutic diets are modifications of the regular menu with amounts of nutrients adjusted to cover the additional requirements created by disease and/or injury. Nutritional adequacy determination is based on the Dietary Reference Intakes as determined by the Food and Nutrition Board of the National Research Council.

.0704 STANDARD DIETS

Descriptions and indications for the standard therapeutic diet menus offered by the North Carolina Department of Public Safety, Prisons are as follows:

- (a) **Regular with Snack:** This diet is the regular diet menu with an evening snack. This diet is appropriate for offenders with higher calorie needs than the regular diet can provide.
- (b) **Mechanical Soft:** This diet follows the regular diet menu, substituting fresh fruits and vegetables with canned. The consistency provided on this diet may be modified based on individual offender needs. For example, consistencies might be chopped, ground or pureed.
- (c) **Blenderized Liquid:** This diet follows the regular menu. Foods are blenderized which may require added broth, juice, milk, or a thickener to meet the desired consistency. Foods provided on this diet require no chewing.
- (d) **Full Liquid:** This diet includes foods that are liquid at room temperature and very soft desserts made of milk and egg. The diet is appropriate as a transition between clear liquids and solid foods. The Full Liquid diet is inadequate in several nutrients and may not be given more than three (3) days or seventy-two (72) hours without UR approval.

-
- (e) **Clear Liquid:** This diet includes clear liquids, which provide calories and electrolytes, relieve thirst, prevent dehydration or re-hydrate and yields minimal bowel residue. This diet minimizes the stimulation of the gastrointestinal tract in preparation for surgery or tests and in acute GI disturbances. This diet is inadequate in all nutrients and may not be given for more than twenty-four (24) hours without UR approval.
- (f) **Bland Diet:** This diet is low in fat, spices, and seasonings.
- (g) **Medical Nutrition Therapy Diets: MNT1 (1500 kcal), MNT2 (2000 kcal), MNT3 (2500 kcal), MNT4 (3000 kcal):** The MNT diets are lower in fat (providing <30% of daily calories from fat), lower in sodium (providing between 2 – 4 grams of sodium), high in fiber (providing 25 or more grams of fiber), provide consistent carbohydrate content and calorie restrictions. All MNT meal patterns include an evening snack unless otherwise indicated.
- (h) **MNT Vegetarian:** This diet follows the MNT3 (2500kcal) menu and includes the non-meat entrée in replacement of the regular entrée. This diet is lower fat (providing <30% of daily calories from fat), sodium restricted (providing between 3-4 grams of sodium), high in fiber (providing over 25 grams of fiber), provides consistent carbohydrate content and is calorie restricted. This meal pattern includes an evening snack.
- (i) **Renal:** This diet is lower in sodium, potassium and restricts protein. An evening snack is included in the meal pattern. The renal diet is not appropriate for offenders undergoing dialysis.
- (j) **Dialysis Diet:** This diet limits the amount of potassium, phosphorous and sodium provided. The amount of protein is also increased. An evening snack is included in this meal pattern. The Dialysis Diet is appropriate only for offenders undergoing dialysis.
- (k) **No Wheat:** This diet is a modification of the regular menu which eliminates wheat products. This diet is appropriate for offenders with positive IgE results for wheat. This diet requires a UR.
- (l) **No Soy:** This diet is a modification of the regular menu which eliminates soy products. This diet is appropriate for offenders with positive IgE results for soy. This diet requires a UR.
- (m) **No Wheat / No Soy:** This diet is a modification of the regular menu which eliminates wheat and soy products. This diet is appropriate for offender with positive IgE results for wheat and soy. This diet requires a UR.

700.5 MEDICAL NUTRITION THERAPY PROVISION

(a) Authorization

Therapeutic diets will only be served to offenders upon the written order of a treating medical provider (physician, dentist, physician extender, or nursing). Non-standard diet orders will only be honored after approval has been obtained through Utilization Review (UR).

(b) Nutritional Assessments

- (1) The need for medical nutrition therapy will be determined by the treating provider. Clinical indicators must be present and documented that warrant medical nutrition therapy. Once determined, a nutrition assessment must be requested in the electronic medical record.
- (2) Nutrition assessments will be completed in response to provider request when the clinical need is clearly stated and supported with documentation. Assessments submitted for offender claims such as weight loss and food intolerances with no supporting diagnosis or documentation may be retracted from the Food Management System (FMS) by the dietitian and noted in the electronic medical record under the Dietitian Note.
- (3) If requesting an assessment due to weight change the current weight listed in the electronic medical record must be current to within three days prior to the request date.
- (4) Completing a Nutrition Consultation Request under a clinical encounter in the electronic medical record will generate a nutrition assessment in FMS. The nutrition assessment will be completed by a Registered Dietitian. The completed assessment, including a diet recommendation based on clinical need, will be loaded into the electronic medical record and marked for review by the requesting provider.

(c) Therapeutic Diet Orders

- (1) The provider/medical staff will review the Registered Dietitian's nutrition assessment recommendations. If in agreement with the recommendations the provider should select "Dietary Recommendation" and the expiration date indicated on the nutritional assessment to order the recommended the therapeutic diet in the electronic medical record.
- (2) RN and LPN's in outpatient facilities, by way of standing order from Dr. Smith, are authorized to process dietary recommendations received by the Licensed Registered Dietitian that do not require utilization review authorization.
- (3) If the provider is not in agreement with the assessment recommendation another standard diet may be ordered by selecting a diet from the drop-down list provided in the medical record. Only standard diet orders will be honored without approval by UR. Non-standard diets are diets not included in the drop-down list or any modification of diets listed in the drop-down list.
- (4) Assigned medical staff and/or the facility dietitian will verify the diets ordered in the Food Management System (FMS) under Clinical Med Services, Processes, and Inmate Diet Update. The FMS screen will display the diet as recommended on the nutritional assessment and the diet as ordered by the provider. Medical/ nursing staff must identify and reconcile any diet order discrepancies with the provider.

-
- (5) The approval must be obtained through UR before proceeding. If a nutritional assessment is flagged for UR approval the registered dietitian must enter the UR request in OPUS.
 - (6) Once the diet order has been verified and UR approved (if warranted) medical staff or the facility dietitian will print, from FMS, the Diet Education Letter. The letter will include the offender name, diet order prescribed, prescribing provider, duration of the diet, dining room line assignment, date to report to the dining room and statement on compliance expectations. A licensed nurse or facility dietitian will counsel the offender and provide a copy of the letter. Offender counseling will be documented in the electronic medical record. Educational brochures available for offender education can be found in the electronic medical record under Patient Education, Format of “Handout” and “Handout Topic”. These brochures are the only handouts approved for distribution to offenders related to the provision of therapeutic diets.
 - (7) If the offender accepts the diet at the time of counseling the nurse or facility dietitian will indicate “Educated and Agreed” in FMS. Once the offender is marked as “Educated and Agreed” the diet order will display on the OPUS HS51 screen and in all food management reports. The diet order will display in the meal swipe system for breakfast on the day following the “Educated and Agreed” entry in FMS.
 - (8) If the offender refuses the diet at the time of initial counseling the nurse or facility dietitian will indicate “Educated and Refused” in FMS and record the date of refusal. Diets marked as refused will not display on the OPUS HS51 screen, in the meal swipe system or on food management reports. Staff will have the offender sign the Medical Treatment Refusal form. The form will be scanned into the electronic medical record.
 - (9) With the exception of simple allergy diets, diet order duration may not exceed the time frame of one (1) year.
 - (10) Food management staff will follow the FMS Existing Inmate Diets Report to track current diet orders.

(d) Therapeutic Diet Orders: Newly Admitted Offenders

- (1) Offenders newly admitted to Prisons claiming food allergies will be placed on a diet omitting stated allergens until IgE test results are obtained. Allergies recorded must be specific food allergens, not general food categories such as “processed meats”. Diets written for this purpose may not exceed a time frame of thirty (30) days.
- (2) When offenders present with complaints of food allergies admitting medical staff should check offender records for IgE test results from any previous incarcerations.
- (3) IgE tests will be ordered only for the food to which the offender is claiming an allergy. No panels will be ordered.
- (4) IgE results for claimed allergens must be obtained within fourteen (14) days of admission.
- (5) If IgE results are negative, the diet will be discontinued by the provider.
- (6) Diet orders omitting food allergens shall be written for offenders with positive IgE results.
- (7) A completed nutrition assessment and UR approval is required for all allergy diets.

-
- (8) Offenders newly admitted to Prisons claiming chronic illness will be evaluated by the treating provider. Nutrition assessments will be requested by the provider as indicated in section (b) of this policy.

(e) Therapeutic Diet Orders: Offender Transfers

- (1) Current diet orders for offenders who are transferred from facility to facility will be continued as previously prescribed. Once transferred offender diet orders will automatically display in the receiving facilities programs such as FMS and meal swipe.
- (2) Medical staff at the receiving facility is responsible for completing the nutrition assessment process for offenders who transfer before the process has been completed.

(f) Therapeutic Diet Orders: Temporary Diets

- (1) Temporary diets are diets ordered for a brief duration, usually in preparation of or recovery from a scheduled procedure. Temporary diets shall be ordered by the provider on the diet screen in the medical record. Temporary diets do not require a nutritional assessment. The following diets are considered “temporary”:
 - (A) Full Liquid: may be ordered for no more than three (3) days or seventy-two (72) hours. If this diet is ordered for a longer duration a nutrition assessment and UR approval is required.
 - (B) Clear Liquid: may be ordered for no more than one (1) day or twenty-four (24) hours. If this diet is ordered for a longer duration a nutrition assessment and UR approval is required.
 - (C) Low Residue: may be ordered for no more than three (3) days or seventy-two (72) hours. If this diet is ordered for a longer duration a nutrition assessment and UR approval is required.
 - (D) NPO: may be ordered for no more than one (1) day or twenty-four (24) hours. NPO orders must be entered into FMS by medical staff.

(g) Therapeutic Diet Orders: Food Allergies

- (1) For newly admitted offenders refer to section (d) (1) of this policy.
- (2) IgE tests will be utilized to confirm food allergy claims. IgE tests will be ordered only for the food to which the offender is claiming an allergy. No panels will be ordered.
- (3) Only allergens with positive IgE results will be honored.
- (4) Offenders claiming a food allergy who present without signs or symptoms of an allergic reaction will be IgE tested for the claimed allergen. A nutrition assessment will be requested for offenders with positive IgE results.
- (5) Offenders who present to medical with signs and symptoms of an allergic reaction to a food allergen will be placed on a diet that excludes the suspected food allergen. Allergies recorded must be specific food allergens, not general food categories such as “processed meats”. The duration of the diet order will be no more than thirty (30) days. A IgE test will be ordered for the suspected allergen. If IgE results are negative the diet will be

discontinued by the provider and the assessment will be retracted by the dietitian. If the IgE results are positive the nutritional assessment will be completed by the dietitian and forwarded to the provider for review.

- (6) IgE positive food allergens will be documented by the registered dietitian on the nutritional assessment. Allergens documented via the assessment will display in red on the offender HS51 screen and may be reviewed by facility medical staff via the FMS Inmate Food Allergy Report.
- (7) Offenders with simple allergies or modifications will be placed on a Therapeutic Regular diet with comments stating the diet omissions. Offenders with complex, difficult to exclude foods that require a menu written by a registered dietitian, will be placed on "Other Diet" with special menu titles which correspond to the offender's menu in FMS. In order to ensure allergy menus are available in FMS for the food management staff, providers must select dietary recommendation after review of the nutritional assessment completed by the dietitian.
- (8) All allergy diets must be approved through UR. Food allergy UR requests will not be approved without a documented positive IgE result and a completed nutritional assessment. Simple allergens, those that do not require a special menu, will be approved until End of Sentence (EOS). Complex allergens, those that require a special menu, will be approved for no more than one (1) year.
- (9) An offender may refuse to comply with a diet restricting some or all IgE positive food allergies. Offender refusals must be documented on the Medical Treatment Refusal form, scanned into the electronic medical record and marked for provider review. If the refusal requires an amended diet order the provider must request a nutrition assessment.
- (10) Medical staff must notify the facility or medical dietitian of any documented offender allergy refusals. Once notified the dietitian will remove the refused allergies from FMS. A registered dietitian is responsible to update all food allergies in FMS.

(h) Therapeutic Diet Orders: Offenders Requesting Religious Menu Accommodations

- (1) Offenders requesting menu accommodations for religious reasons must complete a DC 883, Menu Accommodation Request, and follow procedures as outlined by policy 800 in the Food and Nutrition Management Policy and Procedure Manual.
- (2) If an offender does qualify for a religious menu accommodation and has a clinical indication for medical nutrition therapy a nutrition assessment must be completed.
- (3) Vegan and kosher diets may not be ordered by a provider without consulting a registered dietitian. An offender may be provided a therapeutic diet with religious menu accommodations if indicated.

.0706 NON-STANDARD DIET ORDERS / UTILIZATION REVIEW

- (a) All non-standard diet orders require approval through UR prior to implementation.
- (b) Non-standard diets are those not listed in the medical record on the therapeutic diet screen drop down list or any variation of the diets listed.

-
- (c) All diet modifications, including nutritional supplements, additional snacks, soy milk and food allergies require UR approval.
 - (d) Facility food management is not authorized to honor a non-standard diet order that has not been approved through UR.
 - (e) UR approval for non-standard diets will be documented by the dietitian on the nutritional assessment.
 - (f) UR approvals default to a one (1) year approval unless otherwise requested. Approvals for non-standard diets, except requests for simple food allergies, will not be approved for a time frame greater than one (1) year. Requests for simple food allergies will be approved until End of Sentence (EOS).
 - (g) Food Management is authorized to refuse to accept a physician order for a non-standard diet that has not been authorized through the Utilization Review process.

.0707 SERVING OF THERAPUTIC DIETS

Offenders receiving a therapeutic diet must be fed separately from the general population. Therapeutic diet service must occur in a manner that encourages offender diet compliance, and menu adherence. Facility operations should follow meal swipe procedures to ensure proper adherence to the correct serving line.

.0708 TRAYLINE ACCURACY

The Food Service Manager/Supervisor, or designee, shall monitor meal service by completing the FMS Trayline Accuracy Report a minimum of once per month. Monitoring will ensure menus are followed, including menu items, recipes and serving sizes for all diets. One completed Trayline Accuracy Report must be attached to the food service manager's monthly report and forwarded to the Region Dietitian.

.0709 REFUSAL OF MEDICAL NUTRITION THERAPY

(a) Therapeutic Diet Order Refusal

- (1) A therapeutic diet order constitutes a prescribed medical treatment. An offender has the right to refuse, except under life threatening circumstances. Diet refusal must be witnessed by licensed medical staff, documented on the Medical Treatment Refusal form, and scanned into the electronic medical record.
- (2) The offender diet record must be updated in FMS by clicking the "Inmate Refused" button. Once documented in FMS the offender must be informed by medical staff to report to the dining room regular line for breakfast on the following day.

(b) Recording of Meal Refusals

- (1) Dining Hall – Offenders served in the dining hall who refuse a therapeutic diet meal may not be offered food from the regular menu.
- (2) Work Release/Satellite – Offenders who refuse a therapeutic diet packout or a therapeutic diet tray may not be offered a regular packout or a regular meal tray.

.0710 DISCONTINUATION OF MEDICAL NUTRITION THERAPY**(a) Therapeutic Diet Discontinuation**

- (1) Offenders who fail to comply with facility therapeutic diet compliance standards will be referred to the facility nurse or dietitian for compliance counseling.
- (2) Compliance counseling will be documented in the electronic medical record.
- (3) The offender will be referred to the treating provider for diet discontinuation if he/she demonstrates a level of diet noncompliance that hinders or prevents progress in meeting clinical treatment goals.
- (4) The discontinuation of a diet order must be documented in the electronic medical record.
- (5) Once the diet order is discontinued in the medical record the diet order will automatically be removed from OPUS, FMS and the meal swipe system.
- (6) The offender must be informed by nursing of the discontinuation and instructed to report to the regular dining line for breakfast the day following the date of expiration entered.

.0711 COMPLIANCE MONITORING

- (a) Offender therapeutic diet compliance will be monitored via the meal swipe system, electronic rounds and/or FMS.
- (b) Offender diet compliance may be viewed by medical staff via the FMS DC 486, Therapeutic Diet Administration Record report and/or the FMS Inmate Diet Non-Compliance report.
- (c) Offender diet compliance will be reviewed and considered during the nutritional assessment process and the prescription of therapeutic diet orders. The FMS Therapeutic Diet Administration Record report must be saved weekly by the facility dietitian or medical staff. Therapeutic Diet Administration Records must be retained for five (5) years.

.0712 AUTHORIZED FOOD DISTRIBUTION**(a) Nourishments**

Facilities with hospitals and/or infirmary beds may be authorized by the facility dietitian or region dietitian to maintain a small supply of nourishments. Foods provided will be non-

perishable. A list of authorized foods will be developed by the dietitian or nurse manager. Food Management is authorized only to provide foods included on the approved list.

(b) Food Provided with Medications

(1) Medical Snack

- (A) A med snack provided to facilitate improved absorption of specific medications is available for offenders prescribed one of the following: Complera (Rilpivirine/Emtricitabine/Tenofovir DF), Odefsey (Rilpivirine/Emtricitabine/Tenofovir AF), PrezcoBix (Darunavir/Cobicistat), Prezista (Darunavir), Invirase (Saquinavir), Kaletra (Lopinavir/Ritonavir), Norvir (Ritonavir), Edurant (Ralpivirine), Intelence (Etravirine), LithoBid (Lithium), Geodon (Ziprasidone), Epclusa (Sofosbuvir/Velpatasvir), Priftin (Rifapentine), Renagel, Renvela (Sevelamer), Multaq (Dronedarone), Xeloda (Capecitabine), Gleevec (Imatinib), Imuran (Azathioprine), Soriatane (Acitretin), Kalydeco (Ivacaftor), Evotaz (Atazanavir/cobicistat), Griseofulvin, Lonsurf, Genvoya, Stribild (Elvitegravir/cobicistat/emtricitabine/tenofovir)
- (B) Offenders receiving one of the approved medications must be evaluated by licensed medical staff to determine the need for a med snack. Medical snacks are only to be issued with DOT medications and UR approval is not needed. The evaluator must consider the timing of medication and the timing of meals. If the medication is scheduled (or can be scheduled) within an hour before or an hour after a meal no med snack is authorized for that dose. If the medication is scheduled more than an hour before or an hour after a meal then a med snack should be ordered for that dose. Each dose should be evaluated independently. Med snacks may not be ordered arbitrarily for all doses.
- (C) Providers must order med snacks by requesting a nutritional assessment.
- (D) Med snacks will be provided only for offenders on approved medications. The use of med snacks for any purpose, other than those outlined in this policy, is prohibited.

(2) Crackers

- (A) Up to four packs (8 saltine crackers) may be dispensed with medications that are required on the Medication Administration Record (MAR) to be "given with food". Saltine crackers may only be given to offenders with such medication orders. Arbitrary distribution of crackers is prohibited.
- (B) Crackers may be obtained from the facility food management department. The facility food service manager, along with the nurse manager, will monitor cracker usage and address any issues identified.

.0713 TRAY REQUEST

Medical or custody staff requesting food items, food trays or packouts for offenders for any reason must complete a Tray Request form and forward it to the food management department. Tray Request forms are located on the Prison website under Food and Nutrition Management, FNM Forms. Meal trays, packouts, as well as other food items, are not authorized for the treatment of hypoglycemic offenders. Refer to medical protocol for the treatment of hypoglycemia.

.0714 HOSPICE

Comfort foods will be provided to terminally ill offenders housed in Hospice Units. Comfort foods provided to Hospice patients do not require UR approval. Foods provided must be available from the Central Warehouse, Meat Plant and/or Produce Distribution Center.

.0715 RECORDS RETENTION

(a) The following shall become part of the medical record:

1. Nutrition Assessment Form, DC-483
2. Medical Treatment Refusal Form.
3. All documented compliance counseling
4. All documented diet education

(b) Copies of the following shall be maintained by the food service manager:

1. Therapeutic Diet Administration Records, DC-486 (5 years)
2. Trayline accuracy (1 year)



Commissioner of Prisons

June 1, 2020
Date

M.0700_06_01_20