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## Food planning and preparation challenges in caregiving

by Isabel Fawcett

*One formidable assistive care responsibility fulfilled by some caregivers to chronically ill elders is meal preparation. For those caregivers, regularly serving meals to elders is not as simple as just cooking. Chronically ill elders' food and nutritional needs can be fairly complex, even for established healthcare institutions where food service management operations happen like clockwork.*

I have always enjoyed cooking. Prior to becoming a full-time caregiver, I enjoyed occasional menu planning, primarily as a creative endeavor.

However, today, if asked, my advice to anyone considering whether to provide assistive care in your home or the home of an elder, is that cooking is not all that is required. Food service management is rooted in nutrition.

Cooking is one thing. Administering and managing meals, and being tied to another person's eating schedules, hydration concerns, need for increased fiber, specific vitamin deficiencies and food choices is a major life activity. Consider the basics of food service management for those who are chronically ill, advancing in age, and whose health may be in decline.

### Chronic Health Complications

Some elders are able to feed themselves, even if they eat slowly or may not be as graceful with their eye-hand or eye-hand-mouth coordination. My mother eats independently once her meals are prepared and served. There are elders who require spoon feeding at every meal. Some elders prolong chewing and swallowing due to chronic health issues. If an elder experiences difficulty chewing or swallowing, a therapeutic diet may be on the elder's care horizon.

Based on any number of visual cues and knowing Mom's lifelong food preferences allows me to intuitively prepare easier to eat foods likely to be eaten rather than set aside. Such meals are easier for her to chew, swallow, digest and actually enjoyable. Otherwise, I envision her picking at her food, leaving most of the food on the plate untouched offering apologies to the cook.

Lack of appetite is an undesirable eldercare outcome. When I balance food preparation with nutrition and quality of life for my mother, I remain one happy and successful caregiver.

### Nurturing the Caregiver in Elder Nutrition

Given the enormity and complexity of eldercare food service management issues, little things make me happy. By little things, I mean any or all of the following:

- Having or remembering that I have leftovers is a great feeling. Leftovers represent a day, sometimes two, without clockwork meal preparation. Leftovers are one awesome respite for me.
- On Sundays I may prepare a batch of finger sandwiches, including tuna, ham and cheese, egg salad and other soft-chew sandwiches. The triangle-cut sandwiches are great in-between regular meals or enjoyed as evening snacks. They are also just the right size and consistency for some elders to chew and enjoy greater quality of life.
- Whimsical mini-snacks like plain yogurt with rolled oats and blueberries are fun treats and a break the caregiver and elder's rigorous nutrition and medical therapeutic monotony.

The key to successful elder food and nutrition management requires me to strike the right balance between elders' therapeutic needs, balanced nutrition and the harsh, often complex reality of eldercare issues and chronic illnesses. By ensuring ongoing medical input and remaining alert to even slight shifts in my mother's health and appetite, we remain on track. Elder nutrition is quite the juggling act.

No regrets here, though. I'm just thankful for those leftovers.

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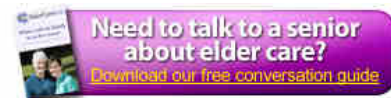
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