

Jean Liu

May 29, 2014

FSM 120

Professor Joan Frank

### **Menu Overview**

1. The foodservice facility is located on-site at a skilled nursing facility. The foodservice has a vision for a menu of delicious foods that are not only aesthetically appealing, but also nutritious and healthful. The menu items are prepared and cooked in a way that preserves nutrients and the quality of the ingredients. In addition, vegetable oils (e.g. olive oil) are used to cook food instead of butter and creams as substitutes in recipes (see question 6). The dishes and ingredients were chosen being mindful of sodium levels. Added sugars are kept to a minimum, especially for the baked goods and desserts. The menu items are based off of primarily American (traditional) foods, however most lunches and dinners also include one ethnic aspect for variety.
2. The target population for my menu set is for 65+ year olds who are of various ethnic groups and income levels.
3. There are various special needs for my target population. Nutritionally, an older population would optimally have a high intake of vitamin B12, folate/folic acid, calcium, vitamin D, potassium, magnesium, fiber, omega-3 fats, and water. These are nutrients that tend to be deficient in older populations. It is important to be mindful of clinical problems seniors may experience including constipation, high blood pressure, and high blood sugar. Chewing may also be a problem for older people, so foods that people may experience difficulty chewing (e.g. corn on the cob and steak) were not included. Raw vegetable sprouts and raw/partially uncooked items were also excluded from the menu.

4. For my facility, there are no financial limitations that affect menu choices. The funding is sourced by multiple donors of the upper middle class community the facility is located in. Menu items are, however, chosen for a standard group of individuals - there are no specialty menu items that are particularly expensive or may seem unfamiliar because of the skill level/preparation time to make the dish. This would make the item more costly as well as potentially too exotic or foreign to customers.

5. Although the food facility does not have financial parameters, there are nutritive parameters with our vision for food that limit the style of preparation for the foods. In regard to preparation, the goal is to prepare and cook the foods in the best way possible to consume it at nutritionally optimal levels. An example of this is with fresh broccoli - it would be steamed, but not boiled because vital nutrients are lost via the method of boiling broccoli. There is no deep frying (adding many fat macronutrients) or charring (producing carcinogens) for our menu items, but instead methods of baking and steaming.

6. The menu is mostly straightforward because of the simple cooking methods and items. Some dishes may be unfamiliar, for example the coconut brown rice pudding and rose gelatin, so I have included the recipes in the references section. Because my menu is focused on clean and nutritious eating, many traditional ingredients in popular dishes have been substituted for my menu. For example, the mashed potatoes do not contain butter or cream, but instead roasted garlic and olive oil. Other dishes that follow a similar pattern (the clam chowder, potato salad, peanut butter mousse, avocado egg salad) in replacing fats and sodium with more healthful ingredients are included in the reference. Menu items are made from scratch/seasonal, so ingredients are fresh. There is one frozen yogurt dish that is delivered to the patient towards the end of their meal (Friday for lunch). There is a beef stew

that is an entree, which can be considered a soup. However, this stew contains approximately 3 oz of lean beef and 1 serving of vegetables.

The menu items for lunch and dinner were chosen in a way where one entree contained meat, and another was vegetarian. Pastas are not repeated (may be in the soup, salad, or entree) and neither are similar ingredient items (steamed carrots and carrot cake). All starches, if applicable, are chosen to be whole grain with the exception of the sourdough bread on Tuesday for dinner.

7. The menu items will be on separate plates, all on a tray. The entrees, if applicable, will be placed together along with the vegetables and starches. A majority of the menu items have the vegetable and/or starch integrated with the entree, so placing them together on one plate is most practical. Soups and salads are separate bowls and plates as well as the desserts (which would be placed together if applicable).

8. My menu meets, and hopefully exceeds the nutritional needs of my target audience for 65+ year old people. Each meal provides at least 2 servings of vegetables, 3 oz of protein, 2 servings of a starch/carbohydrate, and one serving of fruit. Additionally, I included menu items such as ground flax seed for more omega-3 fatty acids. Seafood is served twice during the week in 3 oz each.

## References

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## Nutrient Analysis

The non-select menu items for the regular and soft diet are very similar in both content and nutritional analysis. The only non-select menu item that was completely substituted were the apple sliced for the cantaloupe and honeydew melon for breakfast. Besides that, the breads had added extra virgin olive oil to moisten them. Besides the item changes/additions, meats were sliced to thinner pieces or shredded (which does not changing the nutritional value).

In regards to calories, both the regular and soft diet went over the calorie recommendation (117.78% and 121.33% respectively). The soft diet caloric intake is higher because of the additional extra virgin olive oil for the breads. The carbohydrate recommendation is over for the regular diet by a little(106.47%), and the soft diet is just under recommendations (98.62%). The protein intake for both diets are well above recommended levels, both being over double the recommended amount in similar amounts (215.27% for the regular, 216.20% for the soft). The total fat is also exceeded in both diets, with the soft diet exceeding the total fat content more than the regular diet. The total fat percentages vary by ~25%, which is a significant difference (125.77% for the regular, 153.21% for the soft.) Both saturated fat levels are under 100%, however the regular diet has less saturated fat than the soft diet. Fiber needs are met for both diets in more than adequate amounts (157.79% for regular, and 147.50% for soft). When it comes to a smaller intake of calories and fat calories, the soft diet exceeds the regular diet and is not preferable for the 75 year old man.

In regards to vitamins, vitamins A, E, and folate are not met. The others - vitamins C, D, thiamin, riboflavin, niacin, and B-12 - are all met in both the regular and soft diet in above recommended amounts. The vitamin A and folate levels are higher in the soft diet by 20% and the 6% respectively. The vitamin E levels are the same for both the regular and soft diet. When it comes to meeting vitamin requirements, the soft diet does a slightly better job than the regular diet. I would recommend adding sweet potatoes or giving vitamin A, E, and folate supplements to meet the deficiencies.

Out of the minerals, only sodium and iron are above the recommended levels. Both diets have sodium levels over 300% (which is something to watch) and iron levels above 390% (which may be reaching an upper limit of the nutrient). The potassium level for the regular diet meets 61.23% of the recommendation, and the soft diet meets 56.95% of the recommendation. Calcium, which is a vital nutrient for the older population, are both under recommendation levels. Both diets cover less than 60% of the calcium needs for the old man. Zinc is very similar to the calcium in both diets, being at 60% for both diets. I would highly recommend supplementing calcium, zinc, as well as potassium. Another food to potentially add to the old man's diet can be butternut squash.

The old man is consuming one cup of fluid (soy milk, iced tea, and tea) at every meal. In addition, he is drinking one bottle of water (8 oz) in between his lunch and dinner. His soup during lunch also contains fluid. Lastly, vegetable and fruit fluid may be accounted for as well (steamed baby spinach, broccoli, and cauliflower). In total, he is drinking about 40-44 ounces of fluid a day (4 ounces are being accounted for the vegetables). I would recommend drinking an additional 8 ounce bottled water in between breakfast and lunch for extra hydration.