

**TITLE:** UTILIZING PARENTAL FEEDBACK FOR SUMMER LUNCH PROGRAM NEEDS**AUTHOR(S):** C.L. Schneider, PhD, RD; C. Maldonado; M.R. Nale; California State University, Fresno**LEARNING OUTCOME:** To identify customer needs when establishing summer school lunch programs.

**TEXT:** School lunch is often the only nutritious meal children receive. When children are not in school, the risk of hunger and poor nutrition increases. Parents are responsible for non-school day meals, thus they are a customer for summer lunch programs. This research explored parents' needs for their children in a California county where summer lunch was seldom offered. Four elementary schools, eligible for free school lunch, participated. Of the 3100 surveys sent home with children, 18% (n=555) responded. The majority of parents communicated in Spanish (54%). Many siblings were also eligible for free lunch (n=993). The majority were interested in summer lunch (74%). Most children (89%) stayed home during the summer. Slightly less than half (47%) indicated children would miss a lunch meal. Parents described a typical home lunch. Only 20% included milk and only 15% included a fruit/vegetable. Provision of protein foods varied: 36% of the lunch menus included a high fat protein and 12% included a lower fat protein. However, 52% of the menus did not include a protein source. The greatest concern parents had about a summer lunch program was adult supervision and/or transportation to a lunch site. The majority of parents preferred a lunch site at their children's school (54%) or at a neighborhood park/community center (34%). The data suggests incorporating feedback assists in projecting potential strengths and challenges when planning and promoting a summer lunch program. Research data was used to assist with community strategic planning.

**FUNDING DISCLOSURE:** Madera County Community Action Agency**TITLE:** CUSTOMERS' PERCEPTIONS OF FOOD SERVICES IN AN OREGON COMMUNITY HOSPITAL**AUTHOR(S):** C.L. Schneider, PhD, RD, California State University, Fresno; M.M. Cluskey, PhD, RD, Oregon State University**LEARNING OUTCOME:** To demonstrate the benefits of addressing customers' perceptions of quality service.

**TEXT:** There are many customers to satisfy in today's hospital foodservice. Satisfaction with services impacts the patients' hospital experience. Additionally, a diversity of retail customers and employees appraise satisfaction with foodservice. This research explored customers' perceptions of foodservice, determined service dimensions, and compared pre-post training intervention ratings. Interviews (n=45) were conducted resulting in an instrument with common attributes for patients, visitors, and employees. Customers were randomly selected and surveyed (n=210). Four service dimensions: quality food ( $\alpha=0.82$ ), food safety ( $\alpha=0.86$ ), dining environment ( $\alpha=0.76$ ), and quality service ( $\alpha=0.82$ ) were found to correlate with satisfaction outcomes. Quality food was the strongest predictor of food satisfaction ( $r=0.80$ ) and drove the customers' positive rating of the foodservice department's image ( $r=0.94$ ) and in recommending food to others ( $r=0.79$ ). The quality food dimension was determined to include food temperature, food value, and visible effort to serve good food ( $R^2=0.61$ ,  $F=84.8$ ,  $p<.001$ ). A pre-post survey (n=40; n=45) was conducted following customer service training. This training intervention incorporated key findings from feedback related to the service dimensions. Significant improvement in customers' rating of staff effort and responding to meal related problems were found. Ratings for quality service and the foodservice department's image increased in the post survey. The data suggests that determining customer service dimensions and training supervisors to utilize customers' feedback can directly influence satisfaction of service.

**FUNDING DISCLOSURE:** Research was partially funded by the Ruth Tartar Award, Oregon State University**TITLE:** POST-SECONDARY STUDENTS ENJOY AND NEED DISTANCE EDUCATION NUTRITION COURSE**AUTHOR(S):** Benson, W.; Temple, N.; Kemp, W.**LEARNING OUTCOME:** To determine student satisfaction of an undergraduate nutrition course and why students enroll in a distance education course.

**TEXT: Objective:** Nutrition 331(N331) is an undergraduate course offered by a government funded distance education (DE) university. Ongoing student evaluations are submitted by less than 5% of students, suggesting biased feedback. An evaluation was undertaken to assess satisfaction with content and reasons for taking N331.

**Methods:** Students receiving credit for N331 (n=379) were telephoned to participate in a mailed survey. The survey included 5-point Likert-scale questions determining satisfaction with course and content and ranking reasons for choosing DE course. Responses were anonymous and returned in a self-addressed, stamped envelope.

**Results:** Response rate was 57.1% (N=176). N331 students are predominantly nursing students (61.7%) and female (93.7%). There is a wide age range with 59.5% of students over age 25 years. Main reasons for choosing N331 are work commitments (39.4%); course was recommended (36.0%); no nutrition course available(34.2%), prefer DE (32.6%), and family (29.7%).

Students (92.6%) are interested in course concepts and this is higher in students over 25 years. Most students agree exams are fair assessment of the course materials (73.6%). The amount of course material is appropriate with only 20.6% indicating there is too much material and 1.2% indicating there is too little material.

**Conclusions:** N331 meets needs of students with commitments that preclude them from taking a traditional university-based course or who cannot schedule nutrition at their home university. Feedback from students confirms high interest in course concepts. Most agree that the amount of material is appropriate and exams are a fair assessment.

**FUNDING DISCLOSURE:** FUNDING WAS OBTAINED FROM THE ACADEMIC RESEARCH FUND OF ATHABASCA UNIVERSITY**TITLE:** IMPROVEMENTS IN PATIENT CARE FOLLOWING IMPLEMENTATION OF MEDICAL NUTRITION THERAPY ORDER WRITING POLICY FOR REGISTERED DIETITIANS**AUTHOR(S):** D.L. Matossian, RD, CNSD, CDE; N.C. Perry, MS, RD; Mission Hospital, St. Joseph Health System, CA**LEARNING OUTCOME:** Identify effectiveness of an order writing program for registered dietitians in an acute care setting.

**TEXT:** The purpose of this study was to measure the effectiveness of an order writing policy for registered dietitians approved in June 2003 for a 285-bed acute care hospital. At least 167 orders were written on approximately 110 patients over a three-month period (September 2003 through December 2003). The criteria for selection of subjects were based on the nutrition assessment policy. Deaths were excluded. The Medical Nutrition Therapy (MNT) orders were categorized as follows: Labs, liquid oral supplements, vitamin/mineral therapy, enteral nutrition verbal orders, clarification of diets, allowing food from home, dysphagia diet initiation, calorimetry, height and/or weight and a miscellaneous category. Expected outcomes for these orders included, an improved pre-albumin level, increase in percentage of meal/supplement consumed, skin integrity improved, 80% of target calories achieved, weight stable or improved, blood sugar level improved. Outcome was defined as data that would help the dietitian to assess, treat, monitor or improve patient care. Outcomes included an overall 93% improvement in pre-albumin levels, 75-100% improvement in meal/supplement consumed, 83% improvement in skin integrity and an 80-93% assurance that target calories from enteral or parenteral nutrition was at least 80% of target. Limits to study were small sample size and patients being discharged prior to re-evaluation. This study shows a positive trend towards improvement in patient nutritional response following a MNT order writing policy.

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