 <p style="text-align: center;">KENTUCKY CORRECTIONS Policies and Procedures</p>	Policy Number	Total Pages
	11.2	3
	Date Filed	Effective Date
	January 12, 2017	June 2, 2017
Authority/References KRS 196.035, 197.020 ACA 4-4314, 4-4315, 4-4317, 2-CO-4C-01	Subject DIETARY PROCEDURES AND COMPLIANCE	

I. DEFINITIONS

"Master menu" means a menu planned and distributed to the institutions in accordance with recommended daily allowances as recognized by the National Academy of Sciences.

"Standard portion size" means the use of specific portion sizes and a standard recipe file.

II. POLICY and PROCEDURES

An inmate shall be served a nutritionally adequate diet. Each Warden shall ensure this nutritional adequacy by providing direction that foods shall be served in accordance with the master menu as approved by the Food Services Branch Manager. General population menus shall be planned in advance, dated, and posted in living areas. The standards to be followed in preparing the master menu for foods to be served shall meet or exceed dietary allowances as stated in the recommended dietary allowances. All menus shall specify portion size. The contract Food Services Manager at the institution shall ensure compliance.

- A. Compliance with the approved master menu shall be documented on a monthly basis.
- B. A monthly staff meeting shall be held by the contract Food Service Manager at the institution to review food service operations.
- C. All foods served shall be inspected and approved by the appropriate government authorities.
- D. Accurate records of all meals served shall be maintained.
- E. Corrections shall employ a dietitian to ensure compliance with nutritional and health care standards as related to food service.
- F. Staff representatives from all institutions as well as information from annual surveys (designed for inmate evaluation of the menu) shall be included in the planning process. The inmate survey shall be conducted annually.

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G. Substitutions shall be recorded and submitted to the appropriate Deputy Warden on the date the substitution occurs.

H. Food Service Management

The contract management company along with the Department shall establish a food service staffing pattern appropriate in size to meet the needs of the institution. Staff size and organization may vary widely depending on the number of inmates, security level, physical plant, and equipment available. Each food service department, however, shall provide the following minimum staffing pattern:

1. At least one (1) full-time manager with educational background and experience in the management and supervision of food service operations;
2. Support staff adequate to ensure preparation and service of meals as prescribed in this policy; and
3. Security supervision at a level appropriate for the institution.

I. Food Service Records for the Master Menu and Inventory Control

Records shall be maintained to document information related to the service of the minimum dietary requirements. These records shall include:

1. Signed contract and addendums to the agreement between the Department and the contract food service company;
2. An up-to-date master menu and a record of all menu substitutions, additions, or deletions; and
3. A monthly inventory indicating foods used during the period.

J. Meal Service Records

Records shall include, at a minimum, the following information:


1. Number of inmate meals served daily;
2. Number of visitor meals served daily;
3. Number of staff meals served daily;
4. Master menus and menu changes for the past year;

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5. Average food cost per person, per day; and
6. Records of food inventory (i.e. consumption).

K. Program Review

The master menu shall be nutritionally analyzed annually. A review of the institutional food service departments through an on-site inspection shall be provided by the District Food Operations Evaluator annually for all institutions. This review shall include an evaluation of sanitation, safety, staffing patterns, equipment needs, storage facilities, and master menu compliance. Quarterly food service inspections shall include safety, master menu compliance, and food quality. Bi-annual documentation reviews shall include staffing levels, equipment condition, production records, HACCP controls, and grievances.

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	MAY 15 2024	
	Supersedes Effective Date	
Authority/References KRS 196.035, 197.020 ACA 5-ACI-5C-07, 5-ACI-5C-08, 2CO-4C-01	Subject ALTERNATIVE DIETARY PATTERNS	

I. DEFINITIONS

“Allergy diet” means a diet that would exclude or substitute a particular food item that an individual may be allergic to or that is medically restricted.

“Alternative diet” means a diet that includes modifications or substitutes for food items that may be high in fat or sugar and not acceptable on a dietary restricted diet, like a diabetic diet, low fat diet, or low cholesterol restrictions.

“Modified meal” means a meal that includes changes in form, shape or consistency but not overall nutritional value that may be served without utensils such as finger foods or sandwiches.

“Religious diet” means specific foods and food preparation techniques that satisfy religious dietary requirements.

II. POLICY and PROCEDURES

The alternative diet meals shall be noted on the Master Menu and offered during regular meal times to an inmate that may be recommended to follow a medically restricted diet. The Warden, Dietitian, food service and medical staff, and chaplain shall ensure compliance with policy and procedure requirements.

A. Alternative Diet Program

1. The Master Menu shall list all menu items including regular items as well as alternative choices for an inmate to choose. An institution shall make all choices, Master Menu, and Alternative Menu items available to an inmate. It shall be the inmate’s decision to choose from the choices available. The Alternative Diet Program shall be designed to meet the needs of the diabetic patient as well as those requiring a low fat or low cholesterol diet. A primary care provider wishing to put an inmate on a medical diet shall choose a diet from the approved diet manual and complete the medical diet

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order form from the diet manual. Any diet request outside of the approved diet manual shall be sent to the state dietitian for review and approval.

2. An inmate shall be made aware of the alternatives on the menu; as well as how an individual institution administers the alternative diet program. Alternatives shall be listed on the menu or posted in the dining room and an inmate shall be free to choose which entrée or alternative product.

B. Allergy Diet

An inmate allergic to certain food items shall have that item eliminated from his diet if he has written medical proof in his medical records. If an inmate states he is allergic to a certain food item and there is no written proof to verify this allergy, the inmate shall schedule an appointment with medical to request an allergy test. If the test is positive, that food item shall be eliminated from his diet and so indicated in his medical records. This shall be done through the Alternative Diet Program in the dining room. An inmate in a special management unit shall have his diet modified as necessary by the food service manager.

C. Religious Diet

1. The department shall, to the extent feasible and within appropriate institutional resources, provide each inmate with the opportunity to satisfy the minimum dietary requirements deemed essential by the Religion Reference Manual for his religion. Inmates for whom the alternative diet meal does not satisfy religious requirements may request a religious diet meal as prescribed by their religion. This request shall be made in writing to the Institutional Chaplain who shall review and research the request.

2. Voluntary Diet Cancellation

An inmate may request that his religious diet be cancelled. The request shall be made in writing and shall be effective immediately.

D. Special Medical Dietary Restriction

1. Special restrictions like dental diet, test diet, or temporary medical diet shall be allowed at each institution if:
 - a. A dentist prescribes a dental diet for a period of no more than fourteen (14) days with an additional renewal period of fourteen (14) days if required. These diets shall be limited to liquid, pureed, or mechanical soft. This prescription shall be taken to the contract food service manager; or

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b. The institutional primary care provider prescribes a medical dietary restriction for a period of no more than thirty (30) days and it is needed because the Alternative Diet Program does not meet the needs of a documented medical condition. For example, a test diet that requires a liquid meal or severe dietary restrictions. This diet shall be reviewed after thirty (30) days with a consult to the Department Dietitian for continuance.

2. The inmate shall sign for these special diets before each meal and a record of his compliance shall be documented in his medical record. Non-compliance shall be documented and the inmate counseled. Continuance of non-compliance shall mean removal from the written diet.

E. Restrictive Housing Unit or Special Management Unit

An inmate placed in a restrictive housing unit or special management unit shall be allowed to participate in the Alternative Diet Program or the regular Master Menu. The inmate shall indicate his choice upon admission to the unit and shall continue with that choice during his entire stay in the unit. The inmate shall not be allowed to change his decision during that stay. Any documented allergic restrictions shall be continued during the stay in the restrictive housing unit or special management unit.

F. Extended Restrictive Housing Unit

An inmate that meets the criteria of being on extended restrictive housing status may choose to update his religious diet choice once, every six (6) months, that correlates with his religious preference.

G. Modified Meal Service

All inmates may have the same food or food as nutritionally adequate as the general population menu. If an inmate uses food or food service equipment in a manner that is hazardous to himself, staff, or another inmate, a modified meal service shall be provided on an individual basis. This meal shall be based on health or safety considerations, meet basic nutritional requirements, and require the written approval of the Warden or institutional health authority be obtained. The meal shall not exceed seven (7) days unless it is further documented that the inmate continues with hazardous behavior. At this time, with the proper documentation the modified meals may be initiated again.

KENTUCKY DEPARTMENT OF CORRECTIONS

PARTICIPATION AGREEMENT: ALTERNATIVE DIET PROGRAM

The Kentucky Corrections Food Services Departments offer an Alternative menu. An inmate wishing to participate in the Alternative diet program shall sign up for participation. If you choose the alternative diet program, it shall be served for your entire stay in segregation. To help you make your decision, a summary of the program is included. If you do not sign up for this menu choice, you shall be sent the regular master menu tray.

Alternative:

Choices: Limited or no eggs shall be served for Breakfast, instead egg substitutes shall be served, as well as Diet Syrup, Diet Jelly, or Sugar Substitute. No breakfast gravies or margarine shall be served.

For lunch and dinner, a vegetarian or low fat alternative protein entrée instead of the regular entrée will be served, as well as fresh fruit or canned fruit packed in its own juice for the dessert item. There shall be no cake, puddings, or cookies served with the alternative program.

I, _____, by my signature below acknowledge that I WISH TO

Print Inmate Name and Number

PARTICIPATE in the Alternative Diet Program. I understand that by joining the program I shall be served the alternative choices three (3) times a day each day and that I shall not be allowed to change my decision through my entire stay.

Inmate Signature

Inmate Number

Staff Witness

Date