Introduction

The purpose of this guide is to provide general instruction to individuals who might be leading the meal service planning and execution for patients at UCSF Medical Center, Parnassus Camps, in the event of disaster. The activities described in this guide are coordinated with the overall UCSF Medical Center Emergency Management Plan. The following assumptions were made by the Department of Nutrition and Food Services (NFS) made in the development of this guide:

Planning Assumptions

- In the event of a major incident where utilities and/or supplies are seriously compromised, and the kitchen has no ability to support regular food production.
- This plan is for patients at Parnassus. MREs have been stored on patient care units sufficient to serve patients for the first day of a disaster. Each unit has 1 or 2 cases of MREs available from the nurse manager's office to be used buy the nursing unit for the first meal after the Hospital Command Center has declared a major disaster and the hospital is in a shelter in place condition. This is to buy time should Patient Food Services team to transition to emergency plan which will distribute all meals there after.
- All patients needing therapeutic restrictions in their diet must be served first. There are 6 types of meals in a case of MREs. Use the therapeutic diet distribution chart to serve the most restrictive diets first and then proceed to serve the patients on regular diets. A list of patients served the MRE must be maintained on the nursing unit . A list of patients on liquid diets or any other restrictions that need further attention will communicate to the main kitchen for service.
- **MREs will be distributed to patients twice a day**. Each patient will get two Eversafe MRE kits (meals). Meals will be distributed by the Patient Food Services team to all patients that are listed on the daily diet roster. There are adequate supplies in the main kitchen for 7 days.
- The Daily Diet Roster will be maintained and updated by Nursing Units. This list will provide the full name of the patient, the date or birth, the room location, the physician's diet order and food allergies. This information will be communicated to the patient food services team twice a day.
- All patients needing tube feeding and/or infant formula will be served from the kitchen. There are adequate supplies for most tube feeding formula to last for seven days in the main kitchen. Nursing must work towards minimizing formula waste as much as possible.
- All patients needing liquid diets will be served from the kitchen. The supplies for clear liquid diets are also maintained in the main kitchen.

Key Planning Issues

It is impossible to plan for every aspect of a disaster. Even if you have no food service experience, there are a couple of keys that you should take into consideration:

- 1. **Security** There will be a lot of demands for food for people who are under a great deal of stress. It is important to protect the food resources and make sure the staff who take care of our patients have food.
- 2. **Menu planning** This guide will give you MRE distribution guides for regular and therapeutic diets to meet the patient's need. You will also find attached menus for clear liquids, baby foods and puree diets.
- 3. **Staffing** NFS staff will give you the guidance about the technical aspects of working in the department. You will need to determine the number of people you need to prioritize and distribute meals. HCC can deploy resources from the personnel pool to assist as needed. All the staffing from the personnel pool will need to undergo quick food safety training.
- 4. **Communication** There may be limited communication. You should stay in contact with the HCC as much as possible. Use runners if necessary to coordinate communication.
- 5. **Delegate** There will be a lot of work to do. Take advantage of the experienced NFS staff to help get all of the work done.

Under normal circumstances, the Department of Nutrition and Food Service has staff on site from 4:30 am to 1:00 am. A supervisor is available from 5:30 am – 8:00 pm. The most senior NFS manager or supervisor will be in charge of coordinating meal preparation and service. Refer to the UCSF Leadership in a Disaster Guide about the roles and responsibilities of NFS personnel. Though all of these individuals may not be present, you can get an idea of who normally would be coordinating what activities for the department.

DAILY OPERATIONS CHECK LIST

PLANNING

- _ Lock and secure the patient pantries.
- _ **Relocate food from nursing unit Refrigerators** to kitchen for storage and future rationed distribution.
- **Review the meal plan** and menu for serving the patients.
- If the medical center is on emergency power, relocate foods from patient units to refrigerators to the four walk-in refrigerators and two walk-in freezers that operate on emergency power generators
- _ **Determine actual NFS staff on site**, their corresponding positions, and skills. Refer to the guide in Table 1. Suggested Staffing Levels for to determine additional

staffing needs. Contact HCC to report on NFS staffing available and additional staffing needed.

Contact Hospital Command Center (HCC) to report the number of employees available to you in NFS plus if any additional employees are needed.

MEAL ASSEMBLY

- **Coordinate with storeroom** or designated person to gather supplies for Day 1.
- Determine a location in the department for meal assembly. Consider using natural light in the café dining room if necessary. A lot of MRE cases will need to be broken down and a tight count will need to be maintained.
- **Assemble Tube feeding, clear liquid and formula meals** needed for Day 1
- Plan for time to accommodate MRE exceptions for patients with multiple allergies and other specific needs.
- _ Huddle with food assembly staff to assign assembly duties

NOTES:

Consider waste when making the decision about how to prepare meals. If waste removal from the patient care areas is limited, meals should be prepared as much as possible in bulk to maximize food safety but minimize the amount of packaging to dispose of after meal service.

MEAL DISTRIBUTION

- Meals will be served or distributed twice every 24 hours. Hours of service to be determined by HCC. It suggested that one meal is served starting at least by 8:30am and second meal be served at least by 6:30pm. It is important to maintain no more than 14 hours between meals overnight.
- Meals will be served to all patients on the diet roster. All MREs must be distributed according to the physician's diet order and must take into considerations patient's documented allergies.
- Activate the MRE distribution-MREs will need to be checked for each patient against the doctor's order. If specific meals need manipulation, prepare these ahead of time before distribution. Serve in a specific unit sequence. Document when each unit was served and cross check to ensure all the patients were served.
- _ Plan the meal for the next day

NOTES:

Dirty supplies will accumulate if dishwasher is not working. Make arrangements to move trash to the loading dock prior to disposal. Avoid using café trays; trays should be used for patients only.

Table 1. Suggested Staffing Levels forAssembly and Delivery of Patient Meals atParnassus

Staff Position	Minimum Number	General Duties
	Needed	
Security Team	2	Secure all MRE storage locations.
		Keep count of number of issued cases
		each dayAssist in Communications
		 Collect patient diet rosters with diets and
Diet Dester Teem	4	allergies from patient units and bring them to kitchen.
Diet Roster Team		 Know the patient meal count
		 Estimate the number of cases of MRE needed by floor.
		 Estimate the number of Tube feed, clear liquids, purees and infant formula needed by the unit
		Hand off accurate lists to the label team
Patient Meal Checking	8	Secure markers or labels
and Labeling team		Assemble meals by unit or patient areas
		 Label each MRE for the designated patient
		 Check that MRE does not contain allergens if patient has allergies
		 Assemble them by the unit and hand off the delivery/distribution team.
		 Assemble and label Tube feeding bags with required cans of enteral formula
		 Assemble/mix and label infant formula need
		 Assemble and label any exception meals needed
		 Hand off meals as they are ready to distribution team
Distribution team	6	Deliver meals to patients in their rooms.Know the patient meal count
		Check name and date of birth of patient before delivery
		Assist patient with opening package if
		necessary.Maintain list of name and time the meal
		 Maintain list of hame and time the mean was delivered.
TOTAL	20	

The Following Tables are from the UCSF Emergency Management Plan PP 0910001

Table 3

Eversafe MRE Meal Kit Distribution Table

1. First, distribute MRE meals to patients on Renal, Cardiac, Dysphagia and ADA diets according to the following table.

2. Next, distribute remaining MRE meals to patients on a Regular diet.

2. Make a list of all other patients that have not received a meal. Include their diet orders.

3. Communicate this list to the diet office by manual delivery, phone at 3-1345, or fax at 3-8902.

		Give ONLY to	
Meal:	Description:	patients with diet restrictions of:	Instructions:
#1	Chicken with Noodles Spice Cake, M&M's, Peanut Butter, Vegetable Crackers, Lemon-Lime Beverage	1. Dysphagia 2. ADA 3. Regular	Remove Peanut Butter for Dysphagia patients.
#2	Chicken Fajita Spice Cake, M&M's, Peanut Butter, Vegetable Crackers, Lemon-Lime Beverage	1. Renal 2. Cardiac 3. Regular	Remove Peanut Butter and M&M's for Renal pts.
#3	Vegetable Lasagna Pound Cake, M&M's, Cheese Spread, Vegetable Crackers, Lemon-Lime Beverage	Regular	
#4	Bean & Beef Chili Pound Cake, Cheddar Crackers, Cheese Spread, Vegetable Crackers, Orange Beverage	1. ADA 2. Regular	
#5	Beef Chili & Macaroni Pound Cake, Cheddar Crackers, Cheese Spread, Vegetable Crackers, Orange Beverage	1. Dysphagia 2. ADA 3. Regular	Remove Cheese Crackers for Dysphagia patients.
#6	Spaghetti with Meat Sauce Pound Cake, Skittles, Cheese Spread, Vegetable Crackers, Orange Beverage	Regular	

Note: Patients will need to add approximately two tablespoons (30 mL) of water to the MRE heater (the green bag included in MRE meals) to heat their entrees. Water is not included in MRE package. CAUTION: MRE heater bag will be very hot upon addition of water.

Created 12/2010 by MEC & Bhow

UCSF Medical Center Nutrition & Food Services

Table 4

Item Name	Pack Size	7-Day Par Level Needed (cases)
Duocal Powder	CASE (6 - 14oz)	2
Benecalorie, Resource	CASE (24 - 1.5oz)	2
Benefiber Powder	CASE (4 - 7.2oz)	2
Beneprotein,Powder,Instant,Drink Mix	CASE (6 - 8oz)	2
Boost, Glucose Control (all flavors)	CASE (27 - 8floz)	3*
Compleat Adult 250ml	CASE (24 - 250ml)	2
Cyclinex-2 Powder	CASE (6 - 14.1oz)	1
Ensure Plus (All Flavors)	CASE (24 - 8oz)	2
Ensure (all flavors)	CASE (24 - 8oz)	14*
Fibersource HN, Unflavored	CASE (24 - 250ml)	2
Carnation Instant Breakfast, Ind Packet (all flavors)	CASE (60 - 1.3oz)	5*
Jevity 1.0	CASE (24 - 8oz)	8
Jevity 1.2	CASE (24 - 8oz)	5
Jevity 1.5	CASE (24 - 8oz)	6
Juven, Orange, Nutritional Powder, Supplement 24gm	CASE (180 - 24g)	1
Ketonex-2 Powder	CASE (6 - 14.1oz)	1
Nepro Carb Steady Complete	CASE (24 - 8floz)	4*
Novasource Renal, Vanilla, 8ozTetraPk	CASE (27 - 8floz)	4
Nutren 2.0	CASE (24 - 8oz)	4
Nutren Glytrol, Vanilla	CASE (24 - 8oz)	1
Osmolite 1 Cal	CASE (24 - 8oz)	2
Osmolite 1.2	CASE (24 - 8oz)	2
Peptamen 1.5, Unflavored	CASE (24 - 8oz)	12
Peptamen AF*	CASE (24 - 8oz)	1
Peptamen, Unflavored	CASE (24 - 250ml)	2
Promote	CASE (24 - 8oz)	2
Promote w/Fiber	CASE (24 - 8oz)	3
Propimex-2 Powder	CASE (6 - 14.1oz)	1
Resource Breeze,8oz (all flavors)	CASE (27 - 8oz)	23*
Scandishake Lactose Free (all flavors)	BOX (24 - 3oz)	1
Scandishake (all flavors)	BOX (24 - 3oz)	7*
Suplena Carb Steady	CASE (24 - 8oz)	2
Two Cal HN	CASE (24 - 8oz)	11
Vivonex RTF,Unflavored	CASE (24 - 250ml)	3

*Does not account for supply needed in Disaster Plan Menu with the exception of puree and clear liquids diets.

Created 4/2011 by Tabrizi



Table 5a Adult Thickened Beverages 7-Day Emergency Pars Location L 215		
Thickened Juice, Honey, RTU, Ind, 8oz (all flavors)	CASE (27 - 8oz)	10*
Thickened Juice, Nectar, RTU, Ind, 8oz (all flavors)	CASE (27 - 8oz)	11*
Thickened Milk, Dairy Thick, Nectar, RTU, Ind, 8 oz	CASE (27 - 8oz)	21*
Thickened Milk, Diary Thick, Honey, RTU, Ind, 8 oz	CASE (27 - 8oz)	21*
Thickened Water, Honey Consistency	CASE (27 - 8oz)	2
Thickened Water, Nectar Consistency	CASE (27 - 8oz)	2
Thickener,SimplyThick,Honey Consistency,100pk/bx	BOX (100 - 15g)	1
Thickener,SimplyThick,Nectar Consistency,200pk/bx	BOX (200 - 115g)	1
ThickenUp,6.4gm pkts,CASE(75each)	CASE (75 - 6.4g)	1

*Includes supply needed for Disaster Plan Menu for dysphagia diets. Created 4/2011 by Tabrizi

Table 7											
CLEAR LIQUID MENU WHEN using MREs											
Patient Count: 10	Qty	Ser vin g	Scoop Size	Kcal	Protein (g)	Fat (g)	Carbs (g)	Sodium (mg)	K+ (mg)	Phos (mg)	Hydration (ml)
Breakfast:											
Resource Breeze (all flavors)	2	8 oz	ea	500	18	0	108	160	20	320	474
Meal Total				500	18	0	108	160	20	320	474
Lunch:											
Resource Breeze (all flavors)	2	8 oz	ea	500	18	0	108	160	20	320	474
Meal Total				500	18	0	108	160	20	320	474
Dinner:											
Resource Breeze (all flavors)	2	8 oz	ea	500	18	0	108	160	20	320	474
Meal Total				500	18	0	108	160	20	320	474
Total				1500	54	0	324	480	60	960	1422

Created 4/2011 by Tabrizi



Table 8 RTF Infant Formula and Related Items 7 Day Par Levels for Emergency	Manufacturer Catalog No	Annual Usage	Daily Usage	7 Day	Par Level	Total Units Need on Hand
FORMULA PREGESTIMIL 20 CAL 2-OZ 143301	143301	289	3	21	6EA/PK	126
FORMULA PREGESTIMIL 24 CAL 3-OZ 143401	143401	192	3	21	6EA/TY	126
FORMULA NUTRAMIGEN 20 CAL IRON 2-0Z 143701	143701	461	3	21	6EA/TY	126
FORMULA ENFAMIL GENTLEASE LIPIL 2-OZ PK/8 1464-01	1464-01	602	2	12	6EA/PK	69
FORMULA ENFAMIL PREMIUM NEWBORN 20 CAL IRON 20Z 165701	165701	1487	4	29	6EA/PK	171
FORMULA SIMILAC SPECIAL CARE 20CAL With IRON 52418	52418	581	2	11	4EA/PK	45
FORMULA SIMILAC ISOMIL ADV 20Z 56308	56308	295	3	21	4EA/PK	84
FORMULA SIMILAC EXPERT CARE 24 CAL IRON 2-OZ 51016	51016	1778	5	34	4EA/TY	136
FORMULA SIMILAC NEOSURE 22 CAL 20Z 59649	59649	1169	3	22	4EA/TY	90
FORMULA SIMILAC HIGH PROTEIN 24CAL With IRON 50849	50849	6478	18	124	4EA/TY	497
FORMULA SIMILAC 20CAL 20Z ADV 53365	53365	6809	19	131	4EA/PK	522
FORMULA PEDILYTE UNFLAVORED 20Z PLASTIC 59892	59892	1404	4	27	4EA/TY	108
SOLN WATER 5% GLUCOSE 2-OZ BOTTLE 51002	51002	1733	5	33	4EA/TY	133
SOLN WATER STERILE 20Z BOTTLE 134501	134501	5683	16	109	6EA/PK	654
NURSER BOTTLE 8-OZ WITH NIPPLE 284-01 28401	028401	9978	27	191	4EA/TY	765
BOTTLE BREAST MILK STORAGE 4 OZ 51950	51950	13294	36	255	3EA/PK	765
NURSER VOLU FEED DISPOSABLE 00180	00180	45795	125	878	EACH	878
NIPPLE REGULAR TERM 079	079	58252	160	1117	EACH	1117
NIPPLE PREMATURE AND RING 00094	00094	2423	7	46	EACH	46

Created 5/2011 Bhow & Reinert

UCSF Medical Center Nutrition & Food Services

Table 9 MRE ST	ORAGE L		NS
LOCATION	ROOM LOCATION	CASE COUNT IN LOCATION	DOOR CODE
MZ BASEMENT	R015	475	
PARNASSUS NFS	L215	166	
	M225F	376	
	M225D	111	
	TOTAL	653	
PARNASSUS FLOORS			
6L	L650	2	
6 PCRC	M613	1	
6 PICU/NORTH	M618-P	1	
7L	L710	2	
7 EAST		1	
7 NORTH	M731	1	
8L	L802	2	
8 SOUTH	M814B	1	468
8 EAST		1	
9L	L910	2	
9ICU		1	
10L	L1010	2	415
10 SOUTH	M1020	1	1057
10 ICC		1	
11M	M1115	1	
11 ICU	M1107	1	
11L	L1137	2	11371
12 GCRC	M1227	1	
12L	L1210	2	415#
13L	L1309	2	9470
13 ICU	M1311A	1	
14M	M1422A	1	3133
14L	L1437	2	
15L	L1509	2	432
LPPI	LP-133	15	
	TOTAL	32	

Created by Henderson 6/9/2011

UCSF Medical Center Nutrition & Food Services

Та	b	e	6

PUREE - BABYFOOD DISASTER MENU WHEN USING MREs

Patient Count: 28	Qty	Serving	Scoop Size	Kcal	Protein (g)	Fat (g)	Carbs (g)	Sodium (mg)	K+ (mg)	Phos (mg)	Hydra tion (ml)
Breakfast:											
Rice Baby Cereal	2	1/4 cup	#16	78	1.4	1	15.5	6	77	118	0
Babyfood Fruit (all types)	2	3.5 oz	ea	150	2	0.4	30	10	500	30	0
Meal Total				228	3.4	1.4	45.5	16	577	148	0
Lunch:											
Babyfood Protein (Chicken or Beef)	1	2.5 oz	ea	75	9	3	1	33	125	65	0
Babyfood Fruit (all types)	1	3.5 oz	ea	75	1	0.2	15	5	250	15	0
Rice Baby Cereal	2	1/4 cup	#16	78	1.4	1	15.5	6	77	118	0
Pudding	2	1/4 cup	#16	150	2	4.5	25	180	145	0	0
Meal Total				378	13.4	8.7	56.5	224	597	198	0
Dinner:											
Babyfood Protein (Chicken or Beef)	1	2.5 oz	ea	75	9	3	1	33	125	65	0
Babyfood Vegetables (all types)	1	3.5 oz	ea	35	2	0.5	6	10	125		
Babyfood Fruit (all types)	1	3.5 oz	ea	75	1	0.2	15	5	250	15	0
Rice Baby Cereal	2	1/4 cup	#16	78	1.4	1	15.5	6	77	118	0
Pudding	2	1/4 cup	#16	150	2	4.5	25	180	145	0	0
Meal Total				413	15.4	9.2	62.5	234	722	198	0
Puree Add-On:											
*Ensure (all flavors)	1	8 oz	ea	250	9	6	41	200	370	250	237
**Pudding	4	1/4 cup	#16	300	4	9	50	360	289	0	0
Puree Add-On Total	+			1050	31	27	173	960	1399	750	711
Total (Babyfood Only)				1019	32.2	19.3	164.5	474	1896	544	0
Total (Puree)				2069	63.2	46.3	337.5	1434	3295	1294	711

*Add to puree diet at each meal **Add to puree diet at breakfast

Created 4/2011 by Tabrizi



Table 5b Puree & Baby Food Men Location L 215	u Pars						
Puree - Babyfood Menu Food Items	Case Size	Servings per Case	Total Patient Servings	Total Daily Par Cases	3-Day Case Total	5- Day Case Total	7- Day Case Total
Ensure	Case (24 - 8oz bottles)	24	24	1	3	5	7
Pudding	Case (6 - #10 cans)	312	144	0.5	1.5	2.5	4
Rice Baby Cereal	Case (12 - 8oz boxes)	48	140	3	9	15	21
Babyfood Fruit Jar or Apple sauce*	Case (16 - 3.5oz packs)	16	112	7	21	35	49
Babyfood Meat Jar	Case (12 - 2.5oz packs)	12	56	5	15	25	35
Babyfood Vegetable Jar	Case (16 - 3.5oz packs)	16	28	2	6	10	14

* Applesauce (individual cups, no sugar added, 72-4oz per case) can be used as baby food fruit. 7-day par is 3 cases applesauce + 36 cases of baby food fruit (all types). Created 4/2011 by Tabrizi