



INTERNAL MANAGEMENT POLICY & PROCEDURE

Applicability: ☐ Adult Operation Only ☐ JUVENILE Operations Only ☒ DEPARTMENT-WIDE

IMPP #: 10-119D

PAGE #: 1 of 7

PROGRAMS AND SERVICES: Medical and Religious Diets and Vegetarian Alternative Diet

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Approved By: , Secretary

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POLICY

Nutrition and medical diets shall be provided that enhance resident health and are modified when necessary to meet specific requirements related to clinical conditions. Residents at any facility within the Department of Corrections may receive or refuse medical and/or dental diets.

All modified diets shall be consistent with instructions developed and authorized by a registered dietician and in accordance with the provisions of IMPP 10-106D.

DEFINITIONS

Director of Health Care Compliance: Acts as the administrative health authority for the Department. This position manages health care systems, directs the health care services model, and has final approval on all policies and procedures in the health care system.

Health Care Practitioner: A person who has met the requirements of and is engaged in the practice of medicine, dentistry or nursing.

Health Services Administrator (H.S.A.): The individual responsible for ensuring the organization and delivery of all levels of quality accessible health services in the facility. The H.S.A. works under the direction of the Regional Medical Director clinically and the Regional Vice President or designee administratively.

Medical Diet: A diet with certain specific items included or excluded as prescribed by KDOC facility medical or dental personnel for medical purposes.

Modified Diets: Diets most commonly prescribed to meet residents' medical, dental, therapeutic or religious needs, developed from written instructions provided by the treating physician, dentist, health services administrator, and/or chaplain and which conform as closely as possible to the standardized menu. More specific modified diets are prescribed as individualized diets.

Religious Diet: A diet based on a program intended to comply with religious dietary requirements.

Vegetarian Alternative Diet: A diet approved by a registered dietitian, that contains a meal pattern consisting of nuts, vegetables, fruits, legumes, grains, eggs and milk products.

PROCEDURES

I. Medical Modified Diets

- A. The Regional Medical Director shall be responsible for determining the types of medical diets as approved by the Director of Health Care Compliance, to be made available to residents.
 - 1. Unless a facility obtains its food service from another governmental agency, all medical diets prescribed shall be consistent with the standardized menu modified diets and:
 - a. Be specific;
 - b. Be kept as simple as possible;
 - c. Conform as closely as possible to foods served other residents; and,
 - d. Meet the medical needs of the resident.
 - 2. In those instances when food service is obtained from another governmental agency, the facility shall accommodate the need for a medical diet to the extent possible within the menu plan of the providing agency.
- B. The Health Care Practitioner shall be responsible for determining an individual resident's medical need for a diet that deviates from the standardized menu. Such a medical diet shall be provided only upon prescription by the Health Care Practitioner.
- C. Once a medical diet is prescribed, it shall begin within twenty-four (24) hours.
 - 1. The services administrator, or designee shall, within 24 hours, provide a copy of the medical diet list to the facility's chief of security or warden/superintendent's designee and food service manager.
 - 2. The effective period of the medical diet shall be specifically set out in prescription of the diet by the health services administrator or designee and shall be documented in the resident's health record.
 - a. The provider may prescribe a medical diet for up to a year. The Health Services Administrator shall ensure the diet report is reviewed every 90 days in the Care Management Committee.
- D. Any deviation from the standard modified medical diets must be approved by the Regional Medical Director.

II. Religious Modified Diets

- A. The chaplain shall be responsible for approving resident requests for modified diets to comply with religious dietary laws and shall maintain a current list of residents approved to receive such modified diets.
- B. Unless a facility obtains its food service from another governmental agency, all religious diets shall be consistent with the approved religious diet menu.
 - 1. In those instances when food is obtained from another governmental agency, the facility shall accommodate the resident's request for a religious diet to the extent possible within the menu plan of the providing agency.
- C. Resident requests for a religious diet shall be made via Form 9 to the chaplain.
- D. Approval of the request shall be based on the resident's declaration that he/she wishes to eat from the modified diet.
 - 1. Each resident wishing to follow a religious diet shall sign a statement to that effect

2. Each resident requesting a religious diet shall be advised that failure to adhere to the modified diet may result in the resident's removal from the modified diet program. Failure to adhere to the modified diet shall include taking a meal tray from or eating items from the standardized menu, or any menu other than that of the religious diet.

III. Vegetarian Alternative Diet

- A. The Chaplain, or other staff person designated by the warden/superintendent, shall be responsible to process and allow resident requests for the vegetarian alternative diet and shall maintain a current list of residents approved to receive the vegetarian alternative diet.
- B. Resident requests for the vegetarian alternative diet shall be made via Form 9 to the chaplain or other designated staff.
- C. Approval of the request shall be based on the resident's declaration that he/she wishes to eat the vegetarian alternative diet.
 1. Each resident requesting the vegetarian alternative diet shall be advised that failure to adhere to the vegetarian alternative diet may result in the resident's removal from the vegetarian alternative diet. Failure to adhere to the vegetarian alternative diet shall include taking a meal tray from or eating items from the standardized menu, the religious diet menu, or any menu other than that of the vegetarian alternative diet.
 2. Residents approved for the vegetarian alternative diet shall be served the vegetarian alternative diet prepared by food service at each meal.

IV. Implementation Procedures

- A. Residents approved for a modified diet for medical or religious reasons shall be served the modified diet prepared by food service at each meal.
 1. Such residents shall not have the option of eating from the regular menu during the period the individual is placed on the modified diet list unless and until that resident executes a refusal of medical treatment pursuant to Section VI. of this IMPP, or submits a request to the chaplain regarding a desire to terminate the modified diet for religious reasons.
 - a. Residents who are removed or who elect to withdraw from the modified diet for religious reasons must wait 90 days before requesting readmission to the modified diet.
 - b. The third time a given resident is removed or elects to withdraw from the modified diet for religious reasons, the resident must wait six (6) months before requesting readmission to the modified diet.
 - c. The fourth time a given resident is removed or elects to withdraw from the modified diet for religious reasons the resident must wait one (1) year before requesting readmission to the modified diet.
- B. Within 24 hours of receiving a list of residents approved for modified diet from the health services administrator/designee or chaplain or for the vegetarian alternative diet from the chaplain or other designated staff, the food service manager shall forward a copy of the list to the chief of security or his/her designee to facilitate preparation or modification of the residents' I.D. badges to reflect a modified diet or vegetarian alternative diet.

V. Identification Procedures

- A. Residents who have been placed on a modified or alternative diet shall be identified through the use of a two (2) or three (3) character alphabetical or alphanumeric code enclosed in a black bordered box on the front of their resident identification badges.

1. Residents shall be served the diet indicated on the identification badge.
- B. The following codes shall be used for medical, religious, and vegetarian alternative diets.
1. Medical diet codes:
 - a. Cardiac – CA
 - b. Diabetic 2800 calories (3 meals + evening/PM snack) – D28
 - c. Diabetic 2500 calories (3 meals + evening/PM snack) – D25
 - d. Diabetic 2200 calories (3 meals + evening/PM snack) – D22
 - e. Diabetic 1800 calories (3 meals + evening/PM snack) – D18
 - f. Pregnancy (includes snack) – PR
 - g. GI (Gastro-Intestinal) Soft/Bland – SO GI
 - h. Dental Soft – SO D
 - i. High Fiber - HF
 - j. High Protein / High Calorie (includes snack) – HP
 - k. Renal Pre-Dialysis – RD1 (Restricted Protein)
 - l. Renal Dialysis – RD2 (Increased Protein)
 - m. Full Liquid (Broken Jaw) Diet - FL
 - n. Clear Liquid Diet - CL
 - o. Severe Food Allergy Diet – SFA
 - p. Milk Intolerance Diet – MI
 - q. Finger Food Diet – FF
 - r. Gluten Restricted Diet – GR
 - s. Hospice - HO
 2. Approved Medical and Religious combined diets are referenced on the Medical and Religious Diet Combination Matrix and shall be identified by the following codes:
 1. Diabetic 1800/Religious Diet – D18 REL
 2. Diabetic 2200/Religious Diet – D22 REL
 3. Diabetic 2500/Religious Diet – D25 REL
 4. Diabetic 2800/Religious Diet – D28 REL
 5. Cardiac/Religious Diet (no snack) – CA REL
 6. Pregnancy/Religious Diet – PR REL

7. High Calorie High Protein/Religious Diet – HP REL
3. Religious diets shall always be identified by the three (3) character alphabetical code “REL”.
4. A vegetarian alternative diet shall always be identified by the two (2) character alphabetical code “VE.”
- C. When a resident ID badge with a printed dietary symbol is initially issued or reissued, the resident's previous badge shall be retrieved from the resident and either destroyed or maintained in a secure area for possible reissue/reuse at a later time.

VI. Refusal of Treatment by Medical Diet

- A. Each resident shall have the right to refuse a medical diet as an item of medical treatment pursuant to IMPP 16-104D.
- B. In the event a resident elects not to consent to the medical diet, the refusal shall be documented in the Electronic Medical Record (EMR) for that resident.
 1. **JUVENILE:** The resident's parent or legal guardian shall be contacted in the event he/she refuses a medically prescribed diet.
- C. The refusal shall become effective not later than 24 hours after the refusal is entered into the EMR.
 1. In the event a resident has previously consented to and is partaking of a medical diet, the resident shall be required to continue with the medical diet for 24 hours after the resident's refusal.
 2. The health services administrator/designee shall provide immediate written notification to the facility chief of security and the food service manager to:
 - a. Ensure the removal of the resident's name from the food service department's list of medical diets.
- D. If a resident refuses medical treatment by medical diet for any condition, such refusal shall not waive the right to other medical care for the same condition, and the resident shall continue to be entitled to such necessary medical care, including medication or otherwise, unless a Refusal of Treatment form, pursuant to IMPP 16-104D, is executed by the resident.
- E. If a resident refuses medical treatment by medical diet, food service staff shall be informed of the resident's refusal.
- F. If a resident refuses medical treatment by medical diet and executes a refusal form pursuant to section VI.B. above, the resident shall be bound by that refusal and that decision until the next examination by the health care practitioner who recommended the medical diet.
- G. If a resident indicates the intent to refuse treatment by medical diet, the health care practitioner shall counsel the resident about the consequences of refusing the medical diet and shall explain to the resident that other medical care may or will be less effective without the medical diet.
 1. A resident may at any time be referred for behavioral health counseling in circumstances where it may be beneficial to the resident in their decisions regarding the medical diet. Referral shall be completed in accordance with established medical and behavioral health policy and procedure.

VII. Work unit leaders (wardens, superintendents) shall develop a general order for this IMPP that addresses only the following:

- A. The coding of resident I.D. badges, including responsibilities for the initial issuance of the coded identification badges;
- B. Notification procedures to the chief of security (or warden's or superintendent's designee) and the food service manager, within a 24-hour period, of all modified diets for medical or religious purposes or for purposes of a vegetarian alternative diet;
- C. Preparation of the type of diet for each resident, a beginning date and/or meal, and a termination date, if known;
- D. Processes for the removal of a resident from a modified or alternative diet and for communicating that removal to applicable facility staff and/or chaplain;
- E. Processes for communicating and/or ensuring that medical diet designations follow the resident when transferred to a different facility;
- F. The method of serving such meals to residents, if special service or assistance is required due to the resident's condition; and
- G. Procedures that ensure that the chief of security or designee:
 - 1. Receives lists of residents' names that require a coded-symbol to designate a modified diet for medical or religious preference purposes or for a vegetarian alternative diet;
 - 2. Ensures the timely contact with residents to issue identification badges bearing the appropriate coded symbol prior to the beginning date/meal indicated, per written instructions from the health services administrator, chaplain, or other designated staff; and,
 - 3. Ensures the reissue of resident identification cards within 24 hours of the notification by the health services administrator, chaplain, or other designated staff to terminate a resident's medical or religious diet or vegetarian alternative diet.

NOTE: The policy and procedures set forth herein are intended to establish directives and guidelines for staff and residents and those entities that are contractually bound to adhere to them. They are not intended to establish State created liberty interests for employees or residents, or an independent duty owed by the Department of Corrections to employees, residents, or third parties. Similarly, those references to the standards of various accrediting entities as may be contained within this document are included solely to manifest the commonality of purpose and direction as shared by the content of the document and the content of the referenced standards. Any such references within this document neither imply accredited status by a Departmental facility or organizational unit, nor indicate compliance with the standards so cited. The policy and procedures contained within this document are intended to be compliant with all applicable statutes and/or regulatory requirements of the Federal Government and the state of Kansas. This policy and procedure is not intended to establish or create new constitutional rights or to enlarge or expand upon existing constitutional rights or duties.

REPORTS REQUIRED

None.

REFERENCES

IMPP 10-106D, 16-104D
5-ACI-5C-04, 5-ACI-5C-05, 5-ACI-5C-06, 5-ACI-5C-07, 5-ACI-6C-04
JCF 4-JCF-4A-06, 4-JCF-4A-07, 4-JCF-4C-44
NCCHC P-B-01, P-D-05, P-F-01, Y-B-01, Y-D-05, Y-F-01

HISTORY

03-08-16 Original
12-12-17 Revision 1
02-28-24 Revision 2
03-21-24 Revision 3

ATTACHMENTS

None.