"Hella? Room Service?"

By Laura E. Vasilion

Offering room service to healthcare clients is catching on as a way to enhance patient satisfaction and reduce plate waste. Dietary managers who have implemented room service programs share their experiences and observations here.

week, with no cooking, no cleaning, and around the clock attention. A clean, quiet, relaxing atmosphere. Oh yes, and an extensive room service menu.

No, we're not talking about a Caribbean cruise or a trip to a luxury resort. We're talking about a stay at your local hospital or healthcare facility.

Sure, the "quiet, relaxing atmosphere" may be a stretch, but the extensive room service menu is no joke. For several years now, hospitals and healthcare facilities around the country have been experimenting with the idea of offering room service menus to patients and residents. Not only is the experiment working, it is thriving.

"For six months we talked it up. It became such a positive thing at my old facility, Auburn Regional Medical Center in Auburn, Wash., everyone was anxiously anticipating it," said Debbie Barnes, CDM, CFPP, a dietary manager at Northwoods Lodge in Silverdale, Wash.

"The staff was even tolerant of the hiccups because they were so excited about implementing the program." But it didn't start out that way.

"When I first suggested the idea they looked at me and said, 'You want to do what?' But I knew that room service was the way of the future. So I took my staff on a little field trip."

A neighboring hospital had recently added a new birthing wing to their facility, complete with room service. Barnes took her Auburn staff there to see how it was working. Once they saw it in full swing, they couldn't wait to get started at Auburn.

"Sometimes, when you can't visualize something, it's scary. After my staff saw the other hospital's room service operation they became jazzed. 'We can do that,' they said. They came up with some great ideas of their own. We even had a contest to name our new program. We ended up calling it 'Timely Choices: Food Service Ready When You Are.'"

Once implemented, the results were so astonishing it even surprised Barnes.

"We went from Press Ganey scores in the second percentile to scores in the eighty-second percentile. In the first quarter!"

That isn't to say there weren't start-up problems. Being enthusiastic is great for morale. Being over zealous, as Barnes learned, can sometimes land you in hot water.

"One day we just started, powee, with the new program. We were so excited about doing it, we wanted to have it available 24 hours a day. We also were excited about offering it to the staff. The patients and staff loved it, but we quickly learned that most people were using it at the same peak hours. We simply couldn't handle the volume. So, we had to adjust staffing patterns. Typically, the graveyard shift does the majority of the prep work for the next day. With them spending so much time handling room service orders, things weren't getting done. As a result, we cut back room service hours to 6:30 a.m. to 6:30 p.m. That helped a lot."

Tony Scorpino helps dietary managers like Barnes smooth out those kinks. President of Vision Software Technologies, headquartered in Nashville, Tenn., he and his company have been easing dietary managers across the country into room service for the past four years. To date, they assist several hundred healthcare facilities in making the transition.

"We provide everything – save the computers and printers – over the Internet," Scorpino explained. "All the software runs from our own, military-grade systems. The servers are ours. There are no tech fees, support or subscription fees to pay. No one comes into your facility to set things up. Everything is up to HIPAA (Health Insurance Portability and Accountability Act) standards. The only thing our clients need, besides their workstations, is a high-speed Internet connection."

The room service program Scorpino's company uses is similar to what resort hotels use. The software has the ability to alert the room service call center personnel to the fact that, for example, the casserole the patient wants has an item in it that they are allergic to or that is not on their prescribed diet. The call center person then asks the patient to make a different choice. The software also includes a program for printing tray cards for use in the kitchen.

By using this software, room service call center personnel can take a patient's order in 34-70 seconds. Their food arrives, on the average, in 30-45 minutes.

Once installed, a healthcare facility's room service program generally goes over very well. The staff loves it because patients are happier. The hospital's Press Ganey scores take off. Typically, they find themselves in the ninetieth percentile in just a month or so. This makes administration happy so they often commend the foodservice staff which continues to improve staff morale. And because the patients get to eat what they want, when they want, they are much happier.

"This appears to be a long-term trend," said Scorpino. "The results pretty much speak for themselves."

Jacqui Gustafson, RD, Director of Marketing at Dinex International, Inc., a leading provider of high quality insulated continued on page 13

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Sample Patient Room Service Menu, Auburn Regional Medical Center

Timely Choices: Food Service Ready When You Are

We are delighted to offer our patients and visitors room service. Dial **** to place your order. Ask about our daily specials. (Please allow 30-45 minutes for delivery.)

Please note: Your doctor must order a diet for you before we can send your meals. If you need assistance or would prefer not to use room service, please let your nurse know as soon as possible. Otherwise, meals will only be sent when you call to place your order. One entree will be sent per meal. If you would like to order additional meals for visitors, please use the guest menu.

Numbers in parenthesis indicate the number of carbohydrate choices that the selection contains. (Example: (1) after a choice indicates 1 carbohydrate choice, which is equal to 15 grams of carbohydrate.)

Based on the calorie level ordered by your physician, choose the following number of carbohydrates for each meal:

1500/1600 calories = 3 carbs per meal = 45 grams carbs

1800/2000 calories = 4 carbs per meal = 60 grams carbs

2200/2400 calories = 5 carbs per meal = 75 grams carbs

Beverages × ♥ Juices

Apple (1), Grape (1), Cranberry (1), Orange (1)

× Soda - 8 oz. cans

Cola - regular (2) or ♥ diet

Lemon Lime - regular (2) or ♥ diet × **Hot Chocolate** - Regular (2) or ♥ diet (1)

 \times Bottled Water

 \times Smoothies - 16 oz.

Raspberry (5), Strawberry (5), Banana (6),

Mocha Glacier (9), Vanilla Frost (5)

× Bottled Sodas - 20 oz. bottles Coke (5), ♥ Diet Coke, Sprite (5), Mr. Pibb (5)

× Coffee - Regular or ♥ Decaf

 \times Flavored Latte - 16 oz. (4)

X Mochas - 16 oz. (6)

× Milk

2% (1), ♥ Nonfat (1), Chocolate (2)

× Tea - Hot or Iced Regular, ♥ Decaf

Cereals, Fruits, & Yogust Served with milk (1) or creamer,

brown sugar (1) and raisins (1) on request.

Cheerios (1)

♥ Corn Flakes (1)

♥ Rice Krispies (1)

♥ Raisin Bran (2)

♥ Lowfat Granola (2)

♥ Oatmeal (2)

X ♥ Cream of Wheat (1)

♥ Cut fresh fruit (2)

♥ Stewed prunes (2)

× ▼ Applesauce (1)

♥ Bagel (2)

♥ English muffin (2)

♥ Bran muffin (2)

Buttermilk biscuit (2)

Danish pastry (3)

× Fruited yogurt (2) - regular or ♥ lowfat

Peaches (1)

▼ Pears (1)

♥ Bananas (1)

Rise & Shine Breakfasts Served 7 a.m. until 10 a.m.

Scrambled eggs ♥ egg substitute available upon request

Pancakes served with margarine and regular (4) or ♥ diet syrup (5)

French toast served with margarine and regular (3) or ♥ diet syrup (2)

Breakfast burrito (2) ♥ vegetarian or with sausage

Breakfast sandwich (2) served with bacon or ham

Crispy bacon

Sausage links Country fried potatoes (2)

Salads

Chicken or Shrimp Caesar Salad (1)

Fresh cut Romaine lettuce topped with grilled chicken or shrimp. Served with garlic toast.

Fresh Cut Fruit (2) - in season

Dinner Salad

Dressings - regular or ♥ lowfat

Bleu cheese (1), Ranch (1), Italian, Caesar (1), 1000 Island (½), honey mustard (1), French (1)

Heart Healthy Options
▼ Gardenburger (4) served with Baked Lays chips and fruit garnish

Calories 420; fat 6 gm; protein 12 gm; cho. 56 gm; sodium 490 mg

♥ Grilled Chicken Sandwich (4) served with

Baked Lays chips and fruit garnish Calories 430; fat 6 gm; protein 39 gm; cho. 51 gm; sodium 430 mg

♥ Cottage Cheese and Fruit Plate (1) Calories 150; fat 2.5 gm; protein 13 gm;

cho. 19 gm; sodium 410 mg **♥** Lean Cuisine Vegetarian Lasagna (2) served with steamed vegetables

Calories 280; fat 9 gm; protein 14 gm; cho. 36 gm; sodium 590 mg

♥ Grilled Salmon Fillet Platter (1) served with steamed vegetables and sliced tomatoes or cut fruit

Calories 305; fat 12 gm; protein 34 gm;

cho. 20 gm; sodium 115 mg

♥ Grilled Chicken Breast Platter (1) served with steamed vegetables and sliced tomatoes

Calories 225; fat 3 gm; protein 34 gm; cho. 20 gm; sodium 115 mg

Lotsa Pasta, Potatoes, & More

Baked Potato (4) with your choice of toppings: whipped butter, bacon bits, salsa, sour cream, green onions, ♥ vegetarian chili (2), ♥ steamed broccoli

▼ Spaghetti - meatless or with meatballs (3) served with steamed vegetables and Texas toast Macaroni and Cheese (2) served with steamed vegetables and Texas toast

× ♥ Seasoned Mashed Potatoes and Gravv (2) served with your choice of brown, poultry, or country gravy

French Fries **Onion Rings**

♥ Steamed Vegetables

X Okay for patients on full liquid diets

♥ Okay for patients on restricted diets

Soup & Sides
Soup of the Day (1) - call to find out what our chef is making today!

X Tomato Soup (1)

♥ Chicken Noodle Soup (1) X ♥ Cream of Chicken Soup (1)

Saltines (1)

Oyster Crackers (½)

♥ Salt-free Crackers (1)

♥ Graham Crackers (1)

Dinner Roll (1)

Texas Toast (1)

Shrimp Cocktail (1)

Chicken Strips (2)

Veggies & Dip

Made-to-Order Sandwiches

Half (3) or Whole (4) Sandwiches served with

regular or baked potato chips

Meats: ♥ turkey, beef, ham, egg salad, ♥ tuna salad, or V chicken salad

Cheese: American, cheddar, natural swiss, ♥ provolone, or havarti

Toppings: ♥ lettuce, ♥ sliced cucumber, ♥ red or green peppers, dill, or sweet pickles

Spreads: mayonnaise, ♥ light mayonnaise, ♥ Dijon or regular mustard, herb cream cheese

Breads: ♥ multigrain, ♥ country white, ♥ sourdough, ciabatta roll, croissant, ♥ rye

All American Favorites

Grilled Hamburger/Cheeseburger (4) lettuce, pickle, ketchup, mustard on side. Served

with your choice of chips, fries, or onion rings Grilled Cheese Sandwich (4) - with or without ham. Served with your choice of chips, fries, or onion rings

French Dip Sandwich au Jus (4) - served with your choice of chips, fries, or onion rings

Wraps ¥ Bowls ▼ Fajita Chicken Wrap (2) - Tender chicken strips sauteed with onions and peppers, wrapped in a flour tortilla. Guacamole, salsa, and sour cream on the side.

Chicken Caesar Wrap (2) - Tender chicken breast strips with crisp Romaine lettuce, parmesan cheese, and Caesar dressing, wrapped in a flour tortilla

▼ Teriyaki Chicken Bowl (3) - Lean chicken strips in teriyaki sauce served over steamed rice.

Yummy Desserts Lemon Cake (2)

▼ Angel Food Cake (1)

Apple Pie (3)

Chocolate Brownie (2)

Giant Cookie (3) - chocolate chip, oatmeal, or snickerdoodle

× Pudding (2) - tapioca, chocolate, vanilla, custard, or diet vanilla (1)

X Ice Cream (1) - chocolate or vanilla

× Popsicle (2)

X ▼ Sorbet - strawberry or orange Drumstick (2)

X Gourmet Ice Cream Bar (4)

X Orange Sherbet (2)

(Numerous condiments are also listed on the menu for patient choice.)

Room Service

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dishware, tray line equipment and meal delivery systems for healthcare food service, echoed Scorpino's sentiments. "The main advantage to room service in hospitals and healthcare facilities is the achievement of patient satisfaction. Survey scores are raised while tray waste and, in some cases, food cost goes down. Even though the client may be buying better quality food, there isn't the waste there is when trays are routinely filled with items many patients never eat."

So, if staff morale and survey scores rise, patient satisfaction soars, and food cost and waste decreases, are there any potential drawbacks when implementing a room service program?

Matt Hart, CDM, CFPP, Director of Dietary Services at Mary Greeley Medical Center in Ames, Iowa, said there may be a few.

"At our facility, I personally adapted our current tray line computer software to accommodate our new room service program. That saved us a lot of money. Not every facility can afford to purchase that type of software. Also, we had to hire two new full-time staff people to handle the load. For smaller facilities, that may not be a cost they can justify. And sometimes there are renovations that need to be made when

Room Service Stats and Facts

In a 2004 survey conducted by the National Society for Healthcare Foodservice Management (HFM), 68.4 percent of the more than 200 operators responding reported they either already have implemented room service or plan to. Other survey findings include:

- 65 percent of HFM members with room service reported using a hotel-style room service with a call center
- 88.5 percent said increased patient satisfaction was the driving force for implementing room service.
- 72.1 percent of operators reported that the whole house is on room service. For operations with room service only for specific units, Maternity (88.2 percent), Oncology (52.9 percent), the Women's Unit (47.1 percent), and Pediatrics (29.4 percent) were the top choices.
- 15 percent said they used an outside consultant to help get the program online, and 66.1 percent said a computer system was part of their room service strategy.
- 76.5 percent said room service required 10-20 percent more labor. While labor increased with room service, 85.7 percent reported food costs decreased by 10-20 percent. And 14.1 percent reported food costs being slashed by 30-40 percent.

Source: HFM

you switch over to room service," he explained.

Some areas of a hospital are ideally suited for room service. Maternity wards, short-term surgery units, pediatrics, oncology, and some behavioral health units are well-served by such a program. Geriatric and psychiatric wards, on the other hand, are not well-suited for these needs for obvious reasons.

But for Hart, whose room service program was implemented all at once in his 226-bed facility, the change has been nothing but positive. In fact, it's even popular with guests.

"Our room service program is also available to family members. That has been received very favorably. Patients love to be able to eat with their loved ones."

Just one question, what's for lunch? ■

Laura Vasilion is a staff writer for DIETARY MANAGER.

Tips for Starting A Successful Room Service Operation

Debbie Barnes, CDM, CFPP offers the following advice if you are considering implementing a room service program.

1. Be realistic about your goals, which means understanding what your facility's administration will allow.

"Some administrations work in a vacuum. Before you approach them with the idea of changing over to room service, work up figures on what it will cost, how many more staff people you will need, and whether you'll need to make renovations."

2. Start slow.

"Get a feel for how your facility is adapting to room service before you implement it in every department. Go unit by unit instead of changing suddenly from one to the other. It can be challenging doing it this way, having two programs running together, so scale the menu back in the beginning. You can always add to it.

3. Get the whole facility involved.

"I think it's very important, right from the start, to get everyone excited about the new program – to be anxiously anticipating it. Do this and everyone is working towards a positive outcome right from the beginning."

4. Have a good computer program.

"This is an absolute must. You cannot implement a room service program with hand-written orders. In order to take calls correctly and get meals prepared and delivered promptly, you must have a top-grade computer program."

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Case Study

Putting Patients in Charge: Internet-Based Room Service

t the hospitals of the Heritage Valley Health System in Pennsylvania, every patient meal tray is on time and precisely to order, thanks to new technology that supports patient-centered nutrition care, says Steve Mihalick, System Director of Dietetics. In fact, there is no such thing as a "late tray" or "second tray," he explains. The Internet-based room service system provided by Vision Software Technologies (VST) is an excellent solution, says Mihalick.

Advantages of an Internet-based Solution

A hosted service means that the complex application software is located on an Internet server, which the dietary staff uses through secure Internet channels and user-friendly Web interfaces. Advantages of the hosted solution include centralized management for the dietary systems, with minimal overhead, as well as virtually no capital expenditure.

"We used our existing equipment," says Mihalick, "with the start-up addition of three new PCs for each call center." He adds that the health system did not have to invest in customized networking because the network oper-

ates on existing Internet connectivity. "We did not purchase software, either," he notes. "Instead, we operate on a monthly subscription basis."

Notes Michael Babines of VST, Heritage Valley Health System is the first hospital in the nation to use a turnkey hosted solution to drive a room service model. "It is not only low-overhead in terms of capital budgets, it requires minimal in-house labor for maintenance of daily operations. Costs are fixed and predictable, and healthcare industry experts say hosted solutions (also called application service providers or ASPs) save 30-50 percent or more in computer-related operational costs. Hosted solutions leverage the technologies already in place in today's sophisticated highsecurity HIPAA-compliant health information networks for reliable, cost-effective performance."

Press Ganey Scores Soar

As a result of the room service implementation, Press Ganey satisfaction scores are soaring, says Mihalick. "At Sewickley Valley Hospital (Sewickley, PA), we started out at the 5th percentile for meal satisfaction in 2003," he explains. "Three months

after starting room service, we registered at the 90th percentile." In 2004 Mihalick revved up the same Internet-based system at The Medical Center in Beaver, PA, with impressive results: "We're now at the 90th percentile here, too," he notes.

All this is because patients order meals on their own terms, in their own time. Each tray is custom-prepared on demand in a true room service model. In their rooms, patients receive a standing restaurant-style menu based on diet assignments. For example, a patient following a sodium-controlled diet receives a menu with suitable choices. The menu touts "the best of the old cycle menu," says Mihalick, along with familiar brand-name products. Fare also includes single-service entrees such as chicken breasts and pizza, baked to order in a flash bake oven.

Timing is Key

Ultimately, the secret is in the timing, according to nutrition staff. Any time from 6 a.m. to 7 p.m., a patient can order a meal by picking up the phone or asking a hostess. "It's entirely on-demand," says Computer Systems Specialist Diane Peck, "so the patient is in complete control." A



Photo courtesy of Heritage Valley Health System

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patient dials the meal call center, and speaks to a service specialist who has the patient's menu up on the screen.

Explains Mihalick, "As soon as we type in the patient's room number, we have all the details, including diet order. We go down the menu together with the patient, suggest sides and beverages, click a mouse, and complete the transaction in under 70 seconds. The tray reaches the patient in less than 45 minutes."

Diet Checking

"We actually have 20 different restaurant menus to accommodate various therapeutic diets," explains Roberta Sams, Manager, Nutrition Services. In addition, she says, automated diet-checking software behind the scenes addresses multiple diet restrictions and allergens. "It keeps us from having to create thousands of specialized combination menus," she says. "The system is the failsafe. It's interfaced with the diet order so that only permitted options even show up on the screen. Patients feel like they are ordering exactly as if they were in a restaurant. The only difference is that they receive feedback and always receive foods that match their diets," Sams savs.

The system is fully integrated with the hospital information system, she adds. "We receive HL7 messages, admissions, discharges, transfers, and diet orders automatically and in real time." They also receive records of all patients' medications and lab results, which are used as data for the food/drug interaction and nutritional risk screening software systems. As part of the hospital's HIPAA compliance program, data is fully secured.

Patient-Centered Production

Just what does a patient-centered food production system look like? Once issued from the call center, each

meal request prints out as a tray ticket, which is picked up for assembly on three assembly stations: cold/deli foods, beverages, and hot foods. Orders for hot foods enter the production area, says Mihalick, where two employees custom-produce the tray. This system replaces a traditional trayline of 12 positions, he adds. "Everything is made to order, so there's less food waste."

Employees load trays on carts and run them to patient units, where hosts and hostesses take over. "Patients just can't believe the choice and the service," says Mihalick, who reinforces the first-class room service image with staff members dressed in tuxedos and bow ties.

Former trayline employees are now in the units offering face-to-face service as personal ambassadors, explains Sams. "They do a lot of troubleshooting for patients. Before, a patient was an anonymous entity to a dietary worker. Now, our empowered staff members truly interact and provide personalized service," she says.

In one of the many system controls, adds Mihalick, a routine exception report identifies any patients who have not placed a meal order. "The hostess visits the patient in person to provide assistance," he says.

Food Costs Plunge

This system presents a situation previously unimaginable in the sphere of hospital food service, says Mihalick: *No late trays*. "It's not a guessing game anymore," he points out. "We have completely eliminated second trays." The upshot: at \$6.21 per tray, and 2,500 late trays per month for the two hospitals (160 beds at Sewickley and 300 at The Medical Center), food costs have plunged by 20 percent, says Mihalick. Besides paring away duplicate tray costs, he adds, "Patients are ordering what they

want," which means no wasted food on first trays, either.

Employee Morale is High

While bringing high scores to client satisfaction ratings, this room service solution has one more gratifying effect, according to Mihalick. "Staff morale is absolutely unbelievable. The system has the whole-hearted backing of nursing and administration, too."

He adds, "The VST system has transformed dietary workers, who used to make three meals per day and never actually see a patient, to professional employees. Even our kitchen staff members interact with patients, families, nurses, and others as part of the team. They see their input as valuable, and their efforts rewarded." With no change in FTEs from the traditional trayline system, adds Mihalick, nearly every dietary employee functions in a new role where effectiveness and teamwork rule, and employees feel important.

Among the roles of dietary staff are to maintain close coordination about individualized meal times with nursing staff, who often administer medications before or after meals. "Schedules are not as predictable," says Mihalick, "but nurses buy in because the system is absolutely patient-centered." He adds that the room service model extends to day areas such as emergency room, catheter labs, and IV therapy.

"It's amazing what this system is doing for dietary services. The service stays upbeat and the menu is fresh every day," says Mihalick, who adds, "There is no downside. If you're costconscious and patient-driven, it's the ultimate solution."

For more information, contact Vision Software Technologies, Inc., by phone (412) 373-8696, or visit www.vstech.com.

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