Supplementary material for Bennett MK, et al. (2015). Mealtime management in Australian residential aged care: Comparison of documented, reported and observed care. *International Journal of Speech-Language Pathology*, 17:451–459.

Appendix: Mealtime observation form

MEALTIME OBSERVATION FORM													
Resident ID:				Observation ID:				Mealtime ID:					
MEAL: Breakfast / Lunch / Dinner				DAY: Mon / Tues / Wed / Thurs / Fri / Sat / Sun				STAFF PRESENT:					
Location		Group dining room		Seating		Wheelchair		Reg. Chair		Other		Meal Presentation	
No. Res. at each table		Bedroom at table	Bed	Appropriate	Inappropriate	Utensils	Appropriate Normal	Appropriate Modified	Appropriate Normal	Appropriate Modified	Appropriate Modified	Separate Courses	
No. Res. in room		Bedroom in bed	Appropriate	Inappropriate	Crockery	Appropriate Normal	Appropriate Modified	Inappropriate	Privacy: No	Privacy: Yes	Privacy: No	Privacy: Yes	
Lighting:	Adequate	Inadequate	Noise:	Noisy	WNL	Quiet/Silent	Smells:	Adverse	Pleasant	Physical Barriers:	None/Minimal	Minimal	High
Attempt to change	Yes	No	Attempt to change	Yes	Yes	No	Attempt to change	Yes	Yes	Attempt to change	Yes	Yes	No
Privacy: Minimal – Resident in a public space or shared room with persons present not associated with the resident or resident in a shared room in full view of passing people; Fair – Resident in shared room with another resident or non-associated person present but with some degree of privacy, e.g. bed curtain drawn, or resident in a private room in full view of passing people; High – Resident in private room or shared room (alone or with persons associated with the resident) and out of site to passing people													
Feeding Assistance Provided													
Who is assisting	Yes	No	Nature of feeding assistance										
Usual Assistant	Yes	No	Full Assist (Fully physically dependent on staff for intake) Minimal Assistance Only (e.g. tray set up, verbal cue)										
Should assistance be given	Yes	No	Partial Assist (Some assistance required / some independent) No Assistance Provided										
No. of Physical Prompts	None	Minimal	Multiple		No. of Verbal Prompts		None		Minimal		Multiple		
Consistency in Assistance	Consistent	Variable	Does Res. respond appropriately to prompting		Yes		Sometimes		No		Assistance Appropriate		
Nature of interaction between support person and resident													
Ongoing natural interaction throughout meal													
Minimal Interaction: Appropriate comments relating only to the feeding process													
Diet													
Thin Fluids													
Level 150													
Level 400													
Level 900													
Smooth Pureed													
Soft													
Minced Moist													
Recommendations													
Res. may benefit from strategies to ↑ independence													
Res. may benefit from visual supervision													
Res. may benefit from physical assistance													
Res. may benefit from verbal prompts													
Res. may benefit from special positioning													
Res. may benefit from documented meal plan													
Specific Assistance													
Resident is independent													
Visual supervision is given													
Physical assistance is given													
Verbal prompts given													
Resident has special positioning													
Documented meal plan is observed													