Name of Policy:	Patient Meal Survey		THE UNIVERSITY OF TOLEDO MEDICAL CENTER	
Policy Number:	3364-104-502			
Department:	Food & Nutrition			
Approving Officer:	Chief Experience Officer		CONFIDENT. CO	OMMUNITY. CARE.
Responsible Agent:	Director, Food & Nutrition			
Scope:	Food & Nutrition			5/1/2019 3/2002
New policy proposal X Major revision of existing policy			nical revision of existing poon of existing policy	olicy

(A) Policy Statement

Data is collected to measure performance in meeting patient's needs, expectations and satisfaction.

(B) Purpose of Policy

To monitor satisfaction and obtain feedback from patients regarding meal acceptance, quality and temperature of food.

(C) Procedure

- 1. Patient Meal Surveys are completed by Press Ganey.
- 2. FANS staff complete patient rounds in order to get feedback on meal service and correct any potential problems.
- 3. Respect the patient's privacy while conducting rounds.:
 - * Knocking on the door and requesting permission to enter the patient's room
 - * Asking the patient for permission to ask questions
- 4. Present yourselves professionally, and in a courteous manner, and handle complaints diplomatically.
- 5. Honor special requests by patients, administration, Food and Nutrition staff, medical and nursing staffs, etc., as soon as possible.
- 6. Communicate any pertinent information obtained to the appropriate personnel, while maintaining patient confidentiality.
- 7. Trend the data and provide a written action plan for all problems.

Approved by:		Review/Revision Date:
		8/2002
		6/2005
_ /s/	4/23/19	6/2/2008
Joshua Krupinski	Date	7/1/2011
Director, Food & Nutrition		7/1/2014
		3/3/2017
		4/23/2019
_/s/	4/23/19	
Mario Toussaint	Date	
Chief Experience Officer (CXO)		
Review/Revision Completed By: Food & Nutrition		
гооа & мигшоп		Next Review Date: 5/1/2022