

COUNTY OF SAN DIEGO  
HEALTH & HUMAN SERVICES AGENCY  
EDGEMOOR DPSNF

**Chapter: WEIGHT LOSS EDUCATIONAL GUIDELINE 109A**

**Key Words:** (Resident Care, Skin and Nutrition Committee)

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Eating enough to be healthy is the result of complex interactions between the appearance, taste and texture of food and a person's environment, social interactions, mood, mental and physical abilities, medical conditions and medications. Problems in one or more of these areas can lead to unintended weight loss.

**A. Why Is Weight Loss Something to Monitor?**

If a person cannot or will not eat enough or drink enough to stay healthy, it can be the first sign of a more serious problem. If the problem continues, the person will become malnourished or dehydrated, or both.

When a person consumes inadequate nutrition to stay healthy, they become malnourished. The complications of malnutrition are weakness with declines in function, greater incidence of developing pressure injuries, recurrent and severe bouts of pneumonia, and eventually death.

When a person drinks less fluid than they need to stay healthy, they become dehydrated. Dehydration can result in decreased kidney function, weakness with declines in physical abilities, decreased mental alertness, increased risk of pressure injuries, and eventually death.

As prescribed in 26.506 , insert the following clause: Drug-Free Workplace (May 2024) (a) Definitions .

As used in this clause- Controlled substance means a controlled substance in schedules I through V of section 202 of the Controlled Substances Act ( 21 U.S.C. 812 ) and as further defined in regulation at 21 CFR 1308.11 - 1308.15.

Conviction means a finding of guilt (including a plea of nolo contendere ) or imposition of sentence, or both, by any judicial body charged with the responsibility to determine violations of the Federal or State criminal drug statutes.

Criminal drug statute means a Federal or non-Federal criminal statute involving the manufacture, distribution, dispensing, possession, or use of any controlled substance.

Drug-free workplace means the site(s) for the performance of work done by the Contractor in connection with a specific contract where employees of the Contractor are prohibited from engaging in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance.

Employee means an employee of a Contractor directly engaged in the performance of work under a Government contract. "Directly engaged" is defined to include all direct cost employees and any other Contractor employee who has other than a minimal impact or involvement in contract performance.

Individual means an offeror/contractor that has no more than one employee including the offeror/contractor.

(b) The Contractor, if other than an individual, shall-within 30 days after award (unless a longer period is agreed to in writing for contracts of 30 days or more performance duration), or as soon as possible for

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contracts of less than 30 days performance duration-

- (1) Publish a statement notifying its employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Contractor's workplace and specifying the actions that will be taken against employees for violations of such prohibition;
  - (2) Establish an ongoing drug-free awareness program to inform such employees about-
    - (i) The dangers of drug abuse in the workplace;
    - (ii) The Contractor's policy of maintaining a drug-free workplace;
    - (iii) Any available drug counseling, rehabilitation, and employee assistance programs; and
    - (iv) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
  - (3) Provide all employees engaged in performance of the contract with a copy of the statement required by paragraph (b)(1) of this clause;
  - (4) Notify such employees in writing in the statement required by paragraph (b)(1) of this clause that, as a condition of continued employment on this contract, the employee will-
    - (i) Abide by the terms of the statement; and
    - (ii) Notify the employer in writing of the employee's conviction under a criminal drug statute for a violation occurring in the workplace no later than 5 days after such conviction;
  - (5) Notify the Contracting Officer in writing within 10 days after receiving notice under subdivision (b)(4)(ii) of this clause, from an employee or otherwise receiving actual notice of such conviction. The notice shall include the position title of the employee;
  - (6) Within 30 days after receiving notice under subdivision (b)(4)(ii) of this clause of a conviction, take one of the following actions with respect to any employee who is convicted of a drug abuse violation occurring in the workplace:
    - (i) Taking appropriate personnel action against such employee, up to and including termination; or
    - (ii) Require such employee to satisfactorily participate in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency; and
  - (7) Make a good faith effort to maintain a drug-free workplace through implementation of paragraphs (b)(1) through (b)(6) of this clause.
- (c) The Contractor, if an individual, agrees by award of the contract or acceptance of a purchase order, not to engage in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance while performing this contract.
- (d) In addition to other remedies available to the Government, the Contractor's failure to comply with the requirements of paragraph (b) or (c) of this clause may, pursuant to FAR 26.505 , render the Contractor subject to suspension of contract payments, termination of the contract or default, and suspension or debarment. (End of clause)

**B. What Are The Causes Of Malnutrition And Dehydration?**

- a. Appetite: The appearance, aroma, temperature, texture and taste of a meal have a great influence on a person's appetite. As people age, they have a decreasing sense of smell, and this decreases their ability to appreciate the taste of food. Pain, recent illness, depression or anxiety, and

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medications can all decrease appetite. As illnesses like heart disease, emphysema, kidney disease, and dementia get worse, they often decrease a person's appetite.

- b. Diet: A diet designed to help control heart disease, diabetes or hypertension may restrict salt, simple sugars or fat. These diets may not allow the person to eat their favorite foods, so they eat less. Some diets change the texture of foods and liquids, making them less appealing to the eye and less satisfying to eat or drink.
- c. Environment and socialization: People tend to eat more when they are in a pleasant environment and have appropriate socialization. The ideal eating environment is different for each person and may change as their condition changes.
- d. Mood: Depression and anxiety can cause people to lose interest in eating.
- e. Mental abilities: People with decreased mental abilities due to dementia may eat and drink less for several reasons. They may have less awareness of hunger and thirst sensations, be unable to remember to seek out food or water if hungry or thirsty, or have poor coordination of chewing and swallowing.
- f. Loss of function: A person may lose their ability to feed themselves for several reasons. They may have problems with vision. Problems of muscle strength, coordination, contractures, and paralysis can decrease the function of fingers, hands, arms, or cause difficulty with proper body position, chewing, and/or swallowing.
- g. Ineffective or unsafe chewing and swallowing: Although chewing and swallowing seem 'automatic', effective and safe eating and swallowing involves a precise sequence of steps and requires proper muscle strength and coordination. Conditions that result in mental confusion, muscle weakness or decreased coordination can decrease the efficiency of chewing and swallowing. A person with advancing dementia may require a long time to eat and need help with each step of eating. They eventually may be unable to chew and swallow even with constant help and reminders. These factors can lead to dehydration and/or malnutrition. Any condition that makes the swallowing muscles weak or uncoordinated can make eating and drinking unsafe. Unsafe eating or drinking can create a risk of pneumonia when food, liquids and saliva "go down the wrong pipe" (aspirate) and damage the lungs.
- h. Conditions affecting the mouth, esophagus and stomach: Poor dentition, missing teeth, or poorly fitting dentures and painful chewing can decrease food intake. Aging can decrease the strength and coordination of the esophagus. Inflammation and pain in the esophagus and stomach due to some cancers, ulcers, acid reflux or medications can decrease appetite.
- i. Medical condition: It is common for people to have a decreased appetite, confusion, weakness and even weight loss during an illness like pneumonia, gastroenteritis, or a severe urinary infection. It may take a few weeks before they regain their appetite and regain any lost weight.

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- j. Medications: Many medications can affect taste, cause dry mouth, nausea or upset stomach, and cause sleepiness or confusion.
  
- k. Wasting: In some illnesses, people seem to ‘waste away’. Wasting occurs when chemical messengers produced by the body decrease appetite and decrease the body’s ability to use nutrients to heal and get stronger. If a person has a wasting condition, they may not be able to reverse their weight loss and get stronger even if they could eat a healthy recommended amount of food. Advanced illnesses that can result in wasting include emphysema, heart failure, kidney or liver disease, and cancer. Wasting occurs in some elderly people who do not have an identified medical condition, but who are increasingly frail and dependent on others for activities of daily living.

**C. How Can Weight Loss Be Treated?**

After the evaluation, the team may recommend dietary and environmental changes to improve appetite and intake. Speech, occupational and physical therapy may be used to improve strength and coordination needed to eat and to swallow safely. Medications may be stopped or decreased to improve appetite and function. If present, depression and any acute or chronic conditions will be treated.

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**D. Medications To Stimulate Appetite:**

Several medications are marketed to try to improve appetite, promote weight gain and improve health. Most of these medications have potentially serious side effects. None of the medications have been proven to help wound healing, increase function and strength, or improve the quality of life of frail elderly nursing home residents, but their use in individual situations can be considered. Medications will be used per MD order.

**E. What If The Treatment Plan Doesn't Work?**

Despite the team's best efforts, a person may be unable or unwilling to take enough nutrition or liquids to stay healthy. Continued malnutrition and dehydration can lead to serious complications and death. In this situation, it is important to meet with the team and review the short-term and long-term goals of care. Decisions about goals of care should consider the resident's values and prior wishes, their current condition and likelihood of meaningful improvement, the benefits and burdens of different treatment options, and a plan to monitor for and treat any physical or emotional suffering. Refer to supportive nutritional care protocol. ([Palliative Feeding Supportive Nutritional Care \(SNC\) Protocol / Guideline 1304](#); [Supportive Nutritional Care \(SNC\) / Program Form 5058](#))

**I. QUESTIONS / INFORMATION**

Edgemoor Chief of Nutrition Services: (619) 596-5577

**II. RELATED DOCUMENTS**

A. [Weight and Height Assessment-Measurement and Response of Interdisciplinary Team to Changes 109](#)