

Texture-Modified Meal Service Checklist

Texture-modified diets play a critical role in supporting residents with dysphagia and swallowing difficulties. However, without the right systems, presentation, and oversight, they can also increase the risk of poor intake, weight loss, and reduced mealtime satisfaction. This checklist is designed to help aged care teams identify opportunities to strengthen safety, nutrition, and the resident dining experience.

1. Nutrition Risk & Intake

- Meals are designed to support adequate nutritional intake for residents on texture-modified diets.
- Texture-modified meals are fortified where appropriate to support energy and protein needs.
- Strategies are implemented to minimise the increased risks of weight loss and malnutrition caused by inadequate nutritional intake.
- 3 main meals and 3 mid meals (high in calories) are offered daily to minimise the risk of weight loss.
- The menu is structured to consistently deliver protein targets across all choices and modified textures.

2. Meal Presentation & Food Recognition

- Meals are visually recognisable as their original food items.
- Pureed or modified meals maintain visual appeal and distinction between components.
- Presentation supports appetite and encourages intake.
- Meals are designed to avoid “unidentifiable” or uniform appearances.

3. Mealtime Experience & Enjoyment

- Texture-modified meals reflect the meals provided to residents on a regular diet where possible to combat reduced mealtime pleasure.
- Residents are supported to have a positive dining experience despite texture modification needs.
- Efforts are made to reduce the negative impact of modified textures on appetite.
- Meals maintain dignity and normalised dining experiences where possible.

4. Food Variety & Menu Fatigue

- Menu variety is maintained for texture-modified diets.
- Repetitive or limited “safe options” are avoided where possible.
- Meal variety is maximised to prevent the monotony of menu items.

5. Swallowing Safety & Texture Integrity

- Meals are prepared to the correct texture consistency for safe swallowing.
- Meals are prepared as standardised texture-modified meals utilising the common terminology of the IDDSI Framework.
- Diets are strictly aligned with speech pathologist prescriptions to prevent aspiration and aspiration pneumonia.



6. Dining Dignity & Social Experience

- Staff provide appropriate assistance and encouragement during mealtimes to address resident refusal or food dissatisfaction.
- Dining experience is considered alongside clinical swallowing requirements.
- Action is taken to address and minimise resident embarrassment from eating texture-modified foods in front of others.

7. Communication & Continuous Improvement

- Conduct regular questionnaires to collect feedback from both the residents and staff on mealtime experience and food satisfaction.
- Changes are actively implemented based on the feedback collected from residents and staff.

Source:

[1. Nutrition Challenges Associated With a Texture Modified Diet - Cater Care](#)

Looking at strengthening your texture-modified meal service? A specialist aged care catering partner can help improve consistency, compliance, confidence and resident dining experiences.



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