**Food & Nutrition: Test Tray Evaluation Log**

**INSTRUCTIONS:** Quality assurance monitoring and/or if residents complain about the palatability/temperature of food served, a test meal should be obtained for **quantitative data** to assess the complaints.

1. Send the meal to the unit that is the greatest distance from the kitchen or to the affected unit or dining room.
2. Check food temperatures and palatability of the test meal at about the time the *last resident* on the unit is served their tray and begins to eat.

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Meal** | **Diet Order** | **Time of tray assembly** | **Time left kitchen** | **Time cart arrived on unit** | **Time test tray passed on unit** | **Total time lapsed** |
| **B** | **L** | **D** |
|  |  |  |  |  |  |  |  |

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| --- | --- |
| **HOT FOODS** | **COLD FOODS** |
| **Menu Item** | **Soup** | **Starch** | **Vegetable** | **Hot Beverage** | **Salad** | **Dessert** | **Fruit** | **Cold Beverage** |
| Temperature on tray line |  |  |  |  |  |  |  |  |
| Temperature at point of service |  |  |  |  |  |  |  |  |
| Appearance of food |  |  |  |  |  |  |  |  |
| Taste and aroma |  |  |  |  |  |  |  |  |
| All items served per menu |  |  |  |  |  |  |  |  |
| Observe and ask residents for overall satisfaction with theirmeal and write your observations |  |  |
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