



**GLUTEN
INTOLERANCE
GROUP**



Assisted Living, Gluten-Free

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While living in their own home seniors are generally able to control their environment to manage celiac disease (CD) or non-celiac gluten sensitivity (NCGS). Transitioning to shared living spaces can present a challenge for these seniors in maintaining their gluten-free diet. Awareness of the importance of providing a safe environment is growing, but is not universal in assisted living facilities. Some facilities have been certified through the Gluten Intolerance Group's Gluten-Free Food Services (GFFS) Certification Program. For facilities that have not been certified, following are some factors to consider. This information can help inform your research and aid in your choice of facility, and can also be discussed and shared with facility staff.

Staff Training

All staff members should be aware of the importance of maintaining a safe environment for residents who require a gluten-free diet. It is important to maintain a high level of cleanliness, not only in the kitchen, but also in the dining room and common living areas where residents may eat snacks. Preventing cross-contact with gluten-containing foods is essential for providing safe gluten-free foods to residents. Gluten-free foods should be stored in a separate area or on top shelves in shared spaces; this prevents crumbs or other gluten-containing foods from falling onto gluten-free foods. Attention must also be paid to where items such as gluten containing bread are stored in active work areas so that crumbs do not fall onto items that may be used for preparing gluten-free meals. Any boxes or bins containing gluten-free foods should be clearly labeled so there is no confusion among staff.

In a shared kitchen, gluten-free meals should be prepared first, when possible, so gluten-containing ingredients and equipment are not accidentally used. When using bulk items such as mayonnaise, mustard, peanut butter, jam or others, it is important for staff not to double dip the spoon or other utensil into the container. If squeezable dispensers are used, the tip must not come into contact with gluten-containing items. If a utensil touches a gluten-containing ingredient and is then dipped back into the bulk item, or the tip of the squeezable dispenser touches gluten-containing ingredients, the entire bulk item and squeezable dispenser are no longer gluten-free.

- Even small amounts of gluten can initiate serious reactions in residents with celiac disease (CD).
- Exposure to gluten for those with CD leads to damage in the small intestine which can cause malabsorption and nutrient deficiencies.
- Individuals with non-celiac gluten sensitivity (NCGS) are not thought to experience intestinal damage when they consume gluten, but they must still avoid gluten for health reasons.
- Each person with CD or NCGS may react differently to gluten exposure.
- Symptoms include, but are not limited to, diarrhea/constipation, bloating, anemia, weight loss, fatigue, joint pain, depression, and migraines.

The best practice for preparing gluten-free meals in a shared kitchen is to have a separate set of cookware and utensils such as cutting boards, nonstick pans, food storage containers, muffin tins, and pastry brushes. This equipment should be stored in a separate area that will not come into contact with gluten-containing foods. If it is not feasible to maintain a second set of cookware and utensils, extra attention must be paid to make sure all food particles have been removed and items thoroughly cleaned prior to gluten-free food preparation. This also applies to cooking surfaces like the grill, which must be thoroughly cleaned to ensure that it is free of any gluten particles before use for gluten-free meal production. Toasters should not be shared between gluten-free and gluten-containing bread since thorough cleaning is not possible. Self-service areas such as a buffet, salad bar or pre-made, quick service food areas that have gluten-free and gluten-containing items in close proximity need extra attention. Due to the self-serve nature of buffets and salad bars it is challenging for even the most dedicated facility to maintain a gluten-free area. Residents on a gluten-free diet should be allowed to serve themselves first or have a plate made for them in the kitchen to ensure their meal is gluten-free. Any self-serve, quick service gluten-free food items should be kept in separate areas.

Dietary Choices and Nutritional Needs

For many, eating is a pleasurable activity. This is an important consideration when evaluating an assisted living facility. Many seniors eat smaller amounts as they age, which can make it more challenging to meet nutrient needs. Availability of sufficient variety of gluten-free options in a facility is important. If the menu is static there is a greater likelihood that residents may become dissatisfied and stop eating or choose gluten-containing menu items. A menu that rotates on a monthly or other sufficiently frequent basis will help prevent this dissatisfaction with meal choices. Another consideration is what gluten-free foods are being served. If the facility is using a lot of prepared or packaged gluten-free items there is the possibility the residents may not be getting all the nutrients they need. Some nutrients that may be lacking are calcium and vitamin D, vitamin B12, and fiber. These nutrients are common deficiencies in both older adults and people with celiac disease. Additionally, iron, potassium, zinc and magnesium may be lacking in an older adult's gluten-free diet. If the facility uses dietary supplements to help residents meet these nutritional needs they should also be verified as gluten-free.

Compliance with Gluten-Free Diet

Some gluten-free seniors may be reluctant to strictly comply when given the ability to choose other menu items. It is important to know a facility's policy regarding gluten-free residents' requests for gluten-containing menu items or food brought into the facility by guests. Senior living facilities, including assisted living facilities, are not required to follow or enforce a doctor's diet prescription. The level of monitoring will vary by facility. Residents are able to choose what they will eat and if they will follow a gluten-free diet.

Medications

While use of gluten as an ingredient in medications is uncommon, medications need to be confirmed gluten-free with each new prescription and refill. Brand name drugs and each generic branded drug may use different ingredients as binding agents. It is possible that ingredients may have changed or the prescription could be filled with a different branded generic medication. When moving into an assisted living facility, establish who is responsible for double checking the gluten-free status of medications, staff or resident/family members. Foods served with medications should also be considered. Soda or graham crackers are commonly given along with medications and will need to be replaced with a gluten-free option. For more information about gluten in medications visit: <https://gluten.org/2019/10/17/medications-and-the-gluten-free-diet/>

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Other helpful information is available at www.GLUTEN.org.

Advances in celiac disease are fast-paced. If this document is more than 2 years old, please visit our website for updated documents.

This information should not be used to diagnose or treat gluten-related disorders or other medical conditions. For questions about these conditions consult your healthcare team when considering this information.

Please consider your local GIG support group as another resource.

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The Mission of the Gluten Intolerance Group is to empower the gluten-free community through consumer support, advocacy and education.

To make a donation or become a volunteer to GIG, visit our website or call the office at 253-833-6655.