ADDRESSING BARRIERS TO PARTICIPATION THROUGH CUSTOMER-FRIENDLY MEAL SERVICE POLICY

A SUA Discussion Webinar

This project was supported, in part by grant number 90NU0001/01 from the U.S. Administration for Community Living, Department of Health and Human Services, Washington, D.C. 20201. Grantees undertaking projects under government sponsorship are encouraged to express freely their findings and conclusions. Points of view or opinions do not, therefore, necessarily represent official Administration for Community Living policy.

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Overview

- Overview - Customer-Friendly Meal Service
- North Carolina
  - Policy/Practices
  - Future direction
- Wisconsin Polity/Practices
  - Policy/Practices
  - Future direction
- Expectations of the OAA in state policy development
Leftover Food
Carry out Meals
Food Choice

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• NC does allow local service providers to decide if their program participants can take home their leftover meal.
• “Agencies need to have guidelines regarding the handling and storage of leftover food.”
  ○ Traditionally, participants may take home their own leftover food but must receive food safety training first (include participant signature and date)
• “Nutrition education on the sources and prevention of food borne illness must be provided at least annually to staff and participants.”
Carry Out Meals effective March 2014

“Per guidance from the Administration for Community Living, carry-out meals do not qualify for the Older Americans Act (OAA) funding. In Section 331, the OAA states operation of congregate nutrition projects shall be provided in congregate settings (See OAA Title III, Part C 1 below).

Furthermore, Section 330 states the intent of the Congregate Nutrition Program is to reduce hunger and food insecurity as well as “Promote socialization of older individuals and promote the health and well-being of older individuals and delay adverse health conditions through access to nutrition and other disease prevention and health promotion services”.

Carry-out meals are not considered a congregate setting and do not offer the opportunity for additional services and/or activities in an effort to improve or sustain the participant’s function and health status.”

Carry Out Meals

“An alternative approach that may be considered for carry-out meals:

If the nutrition service provider wants to provide carry-out meals, they can do so on a fee for service basis and not using any OAA funds, and not on a contribution basis. The nutrition service provider could set up a separate business arm to provide fee for service meals, etc. This separate business arm would charge a price for a meal, just as any restaurant would, this price would include the full cost of the meal, plus a “surplus” or “profit”.

None of the operation of the business arm could be supported with OAA funds. In order to do this, the nutrition service provider would at a minimum need to revise their mission statement, know and be able to document full cost of the meal, then educate about charging a price for meal, and have a cost centered accounting system so that they could pass an audit. There are nutrition service providers, who do implement fee for service operations alongside a contribution based OAA program, but the purpose of the program was not to be able to do carry out meals, it is simply a by-product of a broader program purpose which is to enhance the funding base for sustainability.”
Carry Out Meals

- Older American Act - Title III
- PART C—NUTRITION SERVICE
- Subpart 1—Congregate Nutrition Services
- PROGRAM AUTHORIZED
  - Section. 330. PURPOSES. The purposes of this part are—
    - (1) to reduce hunger and food insecurity;
    - (2) to promote socialization of older individuals; and
    - (3) to promote the health and well-being of older individuals by assisting such individuals to gain access to nutrition and other disease prevention and health promotion services to delay the onset of adverse health conditions resulting from poor nutritional health or sedentary behavior.

  - Section. 331.
  - The Assistant Secretary shall carry out a program for making grants to States under State plans approved under section 307 for the establishment and operation of nutrition projects that—
    - (1) 5 or more days a week (except in a rural area where such frequency is not feasible (as defined by the Assistant Secretary by regulation) and a lesser frequency is approved by the State agency), provide at least one hot or other appropriate meal per day and any additional meals which the recipient of a grant or contract under this subpart may elect to provide;
    - (2) shall be provided in congregate settings, including adult day care facilities and multigenerational meal sites; and
    - (3) provide nutrition education, nutrition counseling, and other nutrition services, as appropriate, based on the needs of meal participants.

Food Choice

- Offer vs. Served
  - (the local provider must offer each food item but a participant may decline)
- Food Choice
  - (local decision - Choice of entrees, dessert, etc. and still complying with the OAA requirements).
- Styles of Dining (Family style, cafeteria style)
  - restaurant voucher programs
  - salad bar
Carryout Meals (WI P&P 8.4.25)
Whole Meals Taken from the Dining Center

- Carryout meals, as a regular practice, are not allowed in the senior dining nutrition program.

- Nutrition programs may allow a small number of meals as “carryout.” These meals will be reported as congregate meals unless the individual has had a full in-home assessment for home-delivered meals.

- Carryout meals are allowed if all of the following conditions have been met:
  1. A written procedural policy must exist regarding the handling of carryout meals, and must have been approved by a qualified nutritionist.
  2. The meal must be served to a registered program participant.
  3. Instances when a carryout meal may be appropriate include:
     - A spouse, family member, roommate, or close neighbor can safely deliver a meal to a regular congregate participant who has an acute illness or condition. When the duration exceeds two weeks, the participant must be evaluated for a home-delivered meal.
     - A spouse, family member, roommate, or close neighbor can safely deliver a meal to a participant who qualifies for a home-delivered meal. When done appropriately, this could be a means of reserving program resources.
     - The person taking the meal must be instructed in food safety guidelines for the meal and written food safety instructions must accompany the meal.
     - The dining center manager or other individual in charge of releasing the meal has the responsibility to not send the meal if they feel it cannot be delivered safely.
CARRYOUT MEAL FOOD SAFETY GUIDELINES

• Keep food at the proper temperature (Hot Food Hot and Cold Food Cold).
• Eat the meal when you arrive home and any uneaten portion promptly.
• If not going straight home put food into a cooler with ice pack and reheat before eating.
• Do not keep food at room temperature longer than 2 hours, 1 hour if the outside temperature is above 90 degrees.
• Discard meal after 3 days.

Green Lake County Nutrition Program

Taking Leftovers Home (WI P&P 8.4.24)
Portions of the Meal Taken from the Dining Center

• Senior dining participants have the option to take home any part of a meal served to them at a dining center.
• The safety of food after it has been served to a participant and when it has been removed from the dining center is the responsibility of the participant.
• Program staff and volunteers should educate participants on safe food-handling practices.
• Leftovers should not be served for the purpose of taking food home.
Moving forward...

WI Nutrition Program Revitalization
Mission Statement

“To foster, encourage, and promote choice, innovation, and opportunities for partnership that increase the nutritional and social well-being of older adults throughout Wisconsin.”
Revitalization Pilot Projects

- *Local level* projects focused on innovation and significant, novel changes
  - Not minute changes to routine program operations!
  - Changes that:
    - Meet the needs of a changing older adult population
    - Are sustainable
    - Can be replicated in other areas of the state
  - Fall into 4 focus areas developed via the statewide task force
  - Must adhere to the intent of the nutrition program & mission of the revitalization effort
  - Congregate dining centers only

Revitalization Pilot Projects

- 11 pilot projects funded from May 2014 to May 2015
- Examples of some specific enhancements being made include:
  - Changes to hours of operation so that multiple meals are being served throughout the day
  - Elimination of the need to make reservations for meals
  - Collaboration with other community organizations to provide enhanced programming
  - Enhancement of the dining environment to a café style service
  - Use of local foods and gardening on location
  - Providing a healthy venue for people of all ages
Thank you!

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Overview

• Older Americans Act
• U.S. Public Health Service Food Code 2013
• Older Americans Act State Program Report
• Administration on Aging Nutrition Program Frequently Asked Questions

Older Americans Act
http://www.aoa.gov/AoARoot/AoA_Programs/OAA/oaafb_full.asp

• Nutrition Program Sections
  – Section 331 Authorization of Congregate Nutrition Services
  – Section 336 Authorization of Home Delivered Nutrition Services
  – Section 339 Nutrition General Provisions

• State Responsibility
  – Section 305
Section 331 - Authorization of Congregate Services

- The Assistant Secretary shall carry out a program for making grants to States under State plans approved under section 307 for the establishment and operation of nutrition projects that—
  - (2) shall be provided in congregate settings, including adult day care facilities and multigenerational meal sites...
  - (3) provide nutrition education, nutrition counseling, and other nutrition services, as appropriate, based on the needs of meal participants.

Section 336 – Authorization of Home Delivered Nutrition Services

- The Assistant Secretary shall establish and carry out a program to make grants to States under State plans approved under section 307 for the establishment and operation of nutrition projects for older individuals that provide—
  - (2) nutrition education, nutrition counseling, and other nutrition services, as appropriate, based on the needs of meal recipients.
Section 339- General Provisions Nutrition Services

- A State that establishes and operates a nutrition project under this chapter shall—
  - (2) ensure that the project—
    - (A) provides meals that—
      - (i) comply with the most recent Dietary Guidelines for Americans, published by the Secretary and the Secretary of Agriculture, and
      - (ii) provide to each participating older individual—
        - (I) a minimum of 33 1/3 percent of the dietary reference intakes established by the Food and Nutrition Board of the Institute of Medicine of the National Academy of Sciences, if the project provides one meal per day,
        - (II) a minimum of 66 2/3 percent of the allowances if the project provides two meals per day, and
        - (iii) to the maximum extent practicable, are adjusted to meet any special dietary needs of program participants,
    - (B) provides flexibility to local nutrition providers in designing meals that are appealing to program participants...

Section 339- Nutrition Service Provisions

- A State that establishes and operates a nutrition project under this chapter shall—
  - (2) ensure that the project—
    - (F) comply with applicable provisions of State or local laws regarding the safe and sanitary handling of food, equipment, and supplies used in the storage, preparation, service, and delivery of meals to an older individual,
    - (G) ensures that meal providers solicit the advice and expertise of—
      - (i) a dietitian or other individual described in paragraph (1),
      - (ii) meal participants, and
      - (iii) other individuals knowledgeable with regard to the needs of older individuals...
Section 305
State Administrative Authority

- Section 305(a)(1)(C): In order for a State to be eligible to participate in programs of grants to States from allotments under this title— (1) the State shall, in accordance with regulations of the Assistant Secretary, designate a State agency as the sole State agency to—
  - (C) be primarily responsible for the **planning, policy development, administration, coordination, priority setting,** and **evaluation** of all State activities related to the objectives of this Act

Administrative State Functions

- **Planning & developing**
  - Data & evidence informed process
  - Area plans
  - State plans

- **Implementing**
  - Regulations, policies & procedures, standards, guidance, including prioritization
  - Grants/contracts
  - Services, targeting
  - Expertise
  - Training & technical assistance
  - Leveraging/collaborating/coordinating/integrating activities
Administrative State Functions

• Managing
  – Fiscal management, resource development, budgeting
  – Quality assurance
  – Monitoring
  – Reporting, data collection, analysis, utilization
  – Evaluation

• Advocating

Methods to Ensure Adherence

• AoA
  – State Plan
  – Notice of Grant Award language
  – AoA monitoring, programmatic, fiscal
  – AoA technical assistance through regional offices
  – AoA technical assistance through Nutrition Resource Center activities

• SUA
  – Area plans
  – Grant/contract award language
  – Regulations/policy & procedures/standards/guidance
  – Monitoring
  – Technical assistance
  – Audits
Food Code 2013
http://www.fda.gov/Food/GuidanceRegulation/RetailFoodProtection/FoodCode/ucm374275.htm

- Model for State, City, County, Tribe, Territory and Industry
- Chapter 1 1-2 Definitions
- “Highly susceptible population” means persons who are more likely than other people in the general population to experience foodborne disease because they are:
  1. Immunocompromised; preschool age children, or older adults; and
  2. Obtaining food at a facility that provides services such as custodial care, health care, or assisted living, such as a child or adult day care center, kidney dialysis center, hospital or nursing home or nutritional or socialization services such as a senior center

AoA State Program Report
http://www.aoa.gov/AoARoot/Program_Results/SPR/Reporting_Tools.aspx
AoA State Program Report

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• Definitions – Page 29
  • **Congregate Meal (1 Meal)** – A meal provided to a qualified individual in a congregate or group setting. The meal as served meets all of the requirements of the Older Americans Act and State/Local laws...
  • **Nutrition Education (1 session per participant)** – A program to promote better health by providing accurate and culturally sensitive nutrition, physical fitness, or health (as it relates to nutrition) information and instruction to participants, caregivers, or participants and caregivers in a group or individual setting overseen by a dietician or individual of comparable expertise.

Frequently Asked Questions – Nutrition

http://www.aoa.gov/AoARoot/AoA_Programs/OAA/resources/Faqs.aspx

• Does each meal provided through the nutrition program have to offer every older adult the nutrition requirements contained in the Older Americans Act (Sec. 331, 336 and 339)?
  – The OAA requires that meals meet the nutrient and food requirements found in the Dietary Reference Intakes and the Dietary Guidelines for Americans. **An older adult may be offered a particular food, but that individual may refuse the food and it does not need to be served.**
Frequently Asked Questions – Nutrition
http://www.aoa.gov/AoARoot/AoA_Programs/OAA/resources/Faqs.aspx

- Does the OAA provide options for self-directed nutrition choices?
  - The OAA definition of "self-directed care" (Sec. 102(46)) indicates that SUAs, AAAs and ITOs have the opportunity to expand decision-making roles of consumers in the type, amount, management, and budgeting of home and community based services they receive. For an individual able to actively participate in informed decision making and able to make appropriate choices, these services may include congregate and home delivered meals.
  - Individuals choosing self-directed nutrition services may benefit from nutrition education and nutrition counseling. This counseling may include an appropriate nutrition care plan, instruction on appropriate food choices based on needs, and other mechanisms such as vouchers.
  - One example of enhanced nutrition choice is offering a soup and salad bar or soup and sandwich bar as an alternative to a hot meal. The Older Americans Act (OAA) does not prescribe a meal pattern and therefore offers considerable flexibility in menu format, meal pattern and method of service.
  - Each State will determine whether to include self-directed care options in the nutrition service, as well as how the service is to be implemented and requirements of the OAA are met.

The Older Americans Act Nutrition Program HELPS!
Thank you for your attention and time.
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