

## **NUTRITION PROGRAM**

### **Responsibilities of the Area Agency on Aging and Independent Living**

#### **Policy**

The Department for Aging and Independent Living contracts for direct service provision through the Area Agencies on Aging and Independent Living (AAA) and ensures meals are in compliance with the requirements of the Older Americans Act and 910 KAR 1:190. The department also requires that the AAA's provide guidance and monitoring to subcontracted providers.

#### **Procedure**

The Area Agency on Aging and Independent Living shall:

- (1) Retain one copy of the daily menu, as served, for a period of three years;
- (2) Assess the level of need for congregate and home-delivered meals within the planning and service area. Establish procedures, subject to the approval of the Department for Aging and Independent Living, for prioritizing participants to receive home delivered meals. This prioritization shall include both Homecare and Title III-C-2 eligible individuals;
- (3) Maintain a policy and procedure on prioritizing the waiting list based on greatest social and economic need and the Older Americans Act target population (low income minority, older individuals with limited English proficiency, older individuals residing in rural areas, and low-income minority communities).
- (4) Coordinate with other appropriate services in the community and assure that these services do not constitute unnecessary duplication of services;
- (5) Conduct monitoring to ensure compliance with 910 KAR 1:190 and the Department for Aging and Independent Living's Standard Operating Procedures ;
  - (6) Maintain policy and procedure to: (a) minimize the overproduction of food;
  - (b) tracking the overproduction of food;
  - (c) action to be taken when overproduction of food occurs; and
  - (d) to ensure provider agencies operate in compliance with the established policy;
- (7) Develop procedures for use by service providers to assess the need for home-delivered meals among the participants, including procedures for reassessments;
- (8) Develop clear, written policies subject to the approval of the Department for Aging and Independent Living for use by its service providers regarding contributions for services. These policies shall address as a minimum, the use of suggested contribution schedules, contribution policies for staff and guests  
  
and provisions for protecting the confidentiality of individual client contribution amounts;
- (9) Monitor the food service operation (production, distribution and service systems including both congregate and home delivered) a minimum of 12 times per year to evaluate compliance with the Nutrition Program Policy;
- (10) When the Area Agency on Aging and Independent Living is designated as the Nutrition Service Provider as a result of a waiver; the Area Agency on Aging and Independent Living shall be responsible for compliance with the Nutrition Program Policy;

(11) When the food service is to be contracted, the request for proposal shall describe the complete service.

- (12) Assure that a nutrition service provider provides: (a) At least one (1) meal per day in a congregate nutrition site or provide home delivered meals based upon a determination of a participant's needs;
- (b) That the maximum number of eligible older individuals, with emphasis on the frail, those with greatest social and economic need, and the isolated, have the opportunity to participate.

**NUTRITION PROGRAM                      Home Delivered Meals Eligibility**

**Policy**

Home delivered meals are available and provided to only those individuals that meet the eligibility requirements.

**Legal Authority**

Older Americans Act of 1965 as revised.

910 KAR 1:190

**Procedure**

- (1) The case manager or Independent Care Coordinator shall review documentation that shows an applicant for home delivered meals: (a) Is unable to attend a congregate meal; or  
(b) No one lives in the home that is capable of preparing a nutritious meal on a regular basis.
- (2) Eligibility for a home delivered meal through the Homecare program shall be in accordance with 910 KAR 1:180.
- (3) All assessment, eligibility, home visits, and service provisions shall be entered into the Aging Services data base within ten (10) business days.

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**Home Delivered Meals Delivery**

**Policy**

Home delivered meals are to be handled in a safe and time sensitive manner to ensure the correct temperatures are maintained from production of the food until the delivery process is complete.

**Legal Authority**

Older Americans Act of 1965 as revised.

910 KAR 1:190

**Procedure**

- (1) Meals shall be delivered only to eligible persons in their homes.
- (2) Meals may be left with a designee of the older person provided that the designee has been informed of the requirements of the Nutrition Program, and has indicated a willingness to comply with those requirements.
- (3) The designee shall provide assurance that they are able to store hot foods in a manner that maintains the temperature above 135° F or store the hot food below 41° F and store the cold food below 41° F.
  - (4) All meal drivers shall be trained on proper meal delivery; including:
    - (a) Transporting meals in a sanitary manner;
    - (b) Methods to help maintain meal temperatures;
    - (c) Only leaving a meal when the delivery driver sees or hears the participant and shall not leave a meal without acknowledgement of the delivery by the participant.
- (5) The AAAIL shall monitor the delivery routes to ensure proper delivery of meals.

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**Meal Planning Therapeutic Diets**

**Policy**

Meals that are in compliance with the Dietary Guidelines and provide 1/3 of the Dietary Reference Intakes are suitable for most persons that require a therapeutic diet and don't require further modifications.

**Legal Authority**

Older Americans Act of 1965 as amended

910 KAR 1:190

**Procedure**

- (1) Monitor the provider agency to ensure compliance with the approved menus;
- (2) Provide applicants and participants with information on the nutritional requirements of the program and as a result the meals meet participant dietary needs for low sugar, low salt, low fat and low cholesterol without further modification.

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**Meal Planning Additional Foods**

**Policy**

Condiments and additives to allow individuals to prepare their meals to their own taste shall be provided when meal appropriate, and shall not be counted as fulfilling any part of the nutritive requirements.

**Legal Authority**

Older Americans Act of 1965 as amended

910 KAR 1:190

**Procedure**

- (1) The meal service provider shall provide meal appropriate condiments to include:
  - (a) sugar substitutes;
  - (b) pepper;
  - (c) herbal seasonings such as Mrs. Dash;
  - (d) lemon;
  - (e) vinegar;
  - (f) non-dairy coffee creamer;
  - (g) salt;
  - (h) sugar;
  - (i) mayonnaise,
  - (j) catsup;
  - (k) mustard;
  - (l) fat-free butter flavoring;
  - (m) any other condiments that are meal appropriate
  
- (2) Butter or margarine shall be provided as appropriate and will count as part of the nutritive value of the meal.

**NUTRITION PROGRAM  
Policy****Food Preparation Food Preparation Guidelines**

The preparation of food for the nutrition program for older adults shall be in accordance with the nutritional guidelines to meet the 1/3 daily nutritional allowance and shall be made pleasing to the taste by utilizing appropriate seasonings that do not alter the nutritional analysis.

**Legal Authority**

Older Americans Act of 1965 as amended

910 KAR 1:190

**Food Preparation Guidelines**

- (1) Prepare foods without adding salt unless salt is specified in the recipe and has been calculated in the nutritional analysis.
- (2) Flavor foods by using herbs, spices, salt-free seasoning, lemon juice, lime juice, vinegar, etc
- (3) When using high sodium condiments such as ketchup, barbeque and teriyaki sauce, prepared mustard, seasoned salts, bouillon, pickles and olives, balance the menu with low sodium choices. Light soy sauce should be used to replace regular soy sauce and used infrequently. Low sodium condiments are strongly encouraged. The sodium content of the condiments should be considered in menu planning.
- (4) Monosodium glutamate, MSG, shall not be used in food preparation.
- (5) Use low fat cooking methods such as baking, broiling or steaming. Minimize the addition of fat to vegetables.
- (6) Use all types of fish, lean cuts of meat, and poultry without skin.
- (7) Select low sodium versions of canned soups, tomatoes, vegetables, and salad dressings in place of regular canned/bottled items.
- (8) Offer fruit desserts: fruit cup, fruit crisp, fruit cobbler, fruited gelatin
- (9) Select low fat, low sodium cheese when feasible.
- (10) Make sauces and gravies without fat. Add starch to cold liquid, instead of blending starch with fat, before cooking to thicken.
- (11) Substitute vegetable oils (ex. canola oil) for shortening, margarine for butter. The amount of trans and saturated fats should be limited. Lard should not be used.
- (12) Expand the use of fresh and frozen vegetables and fruits, which contain no added salt.

**NUTRITION PROGRAM      Food Safety and Personal Hygiene State Food Service Code  
Policy**

The handling and preparing of food shall be conducted in safe and hygienic conditions to ensure the safety of the food service workers and participants of the nutrition program.

**Legal Authority**

Older Americans Act of 1965 as amended

910 KAR 1:190

**Procedure**

- (1) Standards for food handling and personal hygiene shall be in accordance with the State Food Service Code (902 KAR 45:005).
  - (2) These standards include but are not limited to the following:
    - (a) Hairnets, hats or scarves shall be required for all persons preparing food. Persons serving food shall wear appropriate hair restraints to prevent the contamination of food, equipment and utensils. All staff and volunteers shall wear protective clothing such as aprons or smocks. Disposable gloves shall be used to serve those foods, which are not served with utensils.
    - (b) All staff and volunteers shall be free of contagious disease and transmittable infections while preparing and serving food.
    - (c) Hands shall be washed before starting work and as often as necessary to keep them clean particularly alter smoking, eating, drinking, or using the toilet. Hand sinks shall be accessible.
    - (d) Food handlers' certificates shall be up-to-date and posted, when required by the local regulatory agency.
    - (e) All vehicles used to transport food shall be kept clean and sanitary.

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**Congregate Meal Service Carryout Foods**

**Policy**

Congregate meals are to be consumed at the congregate site and are not to be distributed as a carry out meal. The congregate meal service is not only to provide a nutritionally balanced meal, but to provide for social interaction with others.

**Legal Authority**

Older Americans Act of 1965 as amended

910 KAR 1:190

**Procedure**

- (1) Participants shall be allowed to carry out leftover food items from their own meal;
- (2) Left over foods that are carried out shall comply with 910 KAR 1:190
- (3) The United States Department of Agriculture Food Safety and Inspection Service Food Safety Information handout titled “Leftovers and Food Safety” shall be provided to participants and posted in a visible location near the food service area.

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## **Nutrition Education**

### **Policy**

An ongoing Nutrition Education Program shall be implemented that provides education for all participants of the nutrition program for the elderly.

### **Legal Authority**

Older Americans Act of 1965 as amended

910 KAR 1:190

### **Procedure**

- (1) An annual nutrition education plan shall be developed by the Area Agency on Aging and Independent Living and the nutrition service providers.
- (2) The plan shall include a minimum of one session each month at each nutrition site.
- (3) The plan shall include a variety of topics using a wide range of teaching techniques.
- (4) The plan shall include how educational materials shall be provided to home delivered meal clients at least monthly.
- (5) The DAIL Senior Health and Wellness Newsletter may be utilized to meet the nutrition education requirements monthly.
  - (6) Nutrition Education topics shall include at least the following:
    - (a) Nutrition and its relevance to health promotion and disease prevention;
    - (b) Consumer approaches to food safety and food purchasing;
    - (c) Food fads and diets;
    - (d) Physical activity; and
    - (e) Activities to modify behavior and improve health literacy, including providing information and optimal nutrients.

**NUTRITION PROGRAM****Nutrition Program Costs****Policy**

Complete and accurate information regarding the cost of nutrition program is critical to the statewide operation of the program and reporting costs at the state and federal levels.

**Legal Authority**

Older Americans Act of 1965 as amended

910 KAR 1:190

**Procedure**

A standardized single method for computing actual meal costs shall be used. This computation shall be referred to as the ready-to-serve meal cost and the food service and delivery cost.

(1) Ready-to-Serve Meal Cost

- (a) Food Costs: Include the cost of raw food
- (b) Non-Food Costs: Include the costs of serving supplies, disposables, cleaning materials, and all non-capital items used in the preparation of food. (Paper goods, disposables, eating and serving utensils, detergents and other cleaning supplies and equipment)
- (c) Labor Costs - Food Preparation: Include the costs of labor for food preparation; cooking, and portioning bulk foods; and delivery of food to the site of service. Labor costs shall include:
  - 1. Fringe benefits are also included;
  - 2. Wages paid to all persons who prepare food.;
  - 3. Wages for persons who prepare and maintain the sanitary condition of the kitchen and storage areas; and
  - 4. Wages paid for time spent in food and supplies inventorying, storing and receiving and in direct supervision of kitchen employees.
- (d) Equipment Costs: Include the costs of such capital items as ranges, dishwashers, trucks and vans, steam tables, freezers, etc.
- (e) Utility Costs: Include the costs of space and related utility costs incurred for food preparation, including equipment operation costs and costs for maintenance and repair.
- (f) Other Costs: Include the non-labor costs of transporting food, food storage, insurance, and general liability.

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(2) Food Service and Delivery Cost ( includes delivery cost at the kitchen as well as at the center)

- (a) Portioning Costs: Include the costs of labor for serving foods and labor for home delivery of meals to participants.
  - 1. Fringe benefits are also included;
  - 2. Wages paid to all persons who portion food;
  - 3. Wages for persons who maintain the sanitary condition of the service kitchen and dining areas; and
  - 4. Wages paid to persons who supervise these activities.
- (b) Delivery Costs: Include the costs of labor for delivering meals to homes of participants and mileage and maintenance of vehicles used for this purpose.
- (c) Other Nutrition Service Costs: Include costs incurred for nutrition education and nutrition outreach services needed to meet the needs of participants. These costs include personnel, equipment and supplies, etc., which can be properly allocated to the nutrition program. Include the cost, if any, for rental and maintenance of facilities used for nutrition services.
- (d) Project Management Costs: Exclude expenses incurred for nutrition education and nutrition outreach services.
  - 1. Personnel Costs: Include expenses incurred for the program director and related administrative staff, such as bookkeepers, clerical staff, nutritionists, registered dietitians, etc.
  - 2. Equipment and Supply Costs: Include equipment and supplies related to overall program administration, such as typewriters, computers, software for menu analysis, office supplies, office furniture, cleaning supplies, disposable paper supplies and janitorial supplies.
  - 3. Other General Expenses: Include costs related to overall program management, such as insurance, bonding, licenses, membership fees paid to professional organizations, utilities, repair and maintenance of equipment in centers, pest control, office and site rental, office supplies, insurance and other miscellaneous costs.

**NUTRITION PROGRAM****Non-Traditional Frozen Meal Approval****Policy**

Non-traditional frozen meals may be allowed when there are no alternatives available to providing a hot home delivered meal within the safe temperature and time range.

**Legal Authority**

Older Americans Act of 1965 as amended

910 KAR 1:190

**Procedure**

- (1) A request for waiver shall be submitted as part of the area plan in the Waivers and Special Program Approvals section and upon any revision of the plan, which affects this standard operating procedure
- (2) Waivers are only approved for one year.
  - (3) A waiver may be given under the following conditions:
    - (a) No traditional meal provider available;
    - (b) Demonstrated need for the individual or the community; and
    - (c) Demonstrated cost-effectiveness; and
    - (d) Ability of the individual to understand directions and utilize the non-traditional or frozen meal.
- (4) Prior to the delivery of non-traditional or frozen meals:
  - (a) An explanation of the reason for the waiver request will include the following:
    - i. Administrative reason for the request
    - ii. Cost effectiveness of the waiver request
  - (b) This waiver will include client assessment regarding the need for the non-traditional or frozen meal. The following information will be required:
    - i. Client's ability to prepare the meal themselves or with available assistance;
    - ii. Availability of a microwave or other appliance to properly prepare the meal;
    - iii. Availability of proper storage appliance (i.e. freezer)
    - iv. Client's choice to receive non-traditional or frozen meal.
  - (c) A policy and procedure for each step in the preparation of the non-traditional meal when prepared in the kitchen where current congregate and home delivered meals are prepared will include the following:

**NUTRITION PROGRAM****Non-Traditional Frozen Meal Approval**

- i. Preparation of meal (packaging of leftover food is not allowed);
  - ii. Packaging to assure quality and food safety;
  - iii. Freezing times: cooked potentially hazardous foods shall be cooled: (1) within two (2) hours from 135 degrees F to 70 degree 135° F. to 70° F and (2) within a total of 6 hours from 135° F to 41° f or less. Potentially hazardous food shall be cooled within 4 hours to 41° F or less if prepared from ingredients at ambient temperature, such as reconstituted foods and canned tuna. Be sure to identify the equipment used to rapidly freeze the food and the length of time that frozen meal will be stored before delivery.
- (d) A policy and procedure for delivery of vendor-produced meals will be provided;
- (e) A policy and procedure that addresses the following nutrition program requirements:
- i. Menu planning and approval
  - ii. Nutrition education;
  - iii. Participant evaluation
  - iv. Client provision of copies of the menu plan and preparation instructions.
- (5) The AAA will develop a policy and procedure for client contacts. This policy and procedure shall identify the criteria used to determine the frequency of contact. The criteria shall include at least the following:
- (a) Daily contact: Frail, isolated participants without a support system and have a history of falls or a high risk of falls, deficiency of three (3) or more ADL/IADLs, and be at high nutritional risk;
  - (b) Weekly contact: All Home Delivered Meal Participants must be contacted at least weekly.
  - (c) The person making the contact should identify any changes in the participant's support system, possible changes in ADL/IADLs, change in nutritional risk and change in fall risk. Identified changes shall be noted in the participant's record and forwarded to the person responsible for completing re-assessment.
- (6) AAA will develop a policy and procedure that requires assessments/re-assessments to be completed at least every six months using the assessment

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**Non-Traditional Frozen Meal Approval**

tool appropriate for the funding source of the meal. The following issues must be addressed in the assessment/reassessment: can participant safely handle the nontraditional meal, are adequate storage and heating facilities available, is the participant able to prepare and consume the meal alone or with available assistance and the frequency of contact that the participant will receive with supporting documentation as specified in #6 of this SOP.

- (7) A copy of the assessment will be kept in the client record.
- (8) A copy of the waiver will be kept on file, and
- (9) An approved waiver will be valid for one year.

**NUTRITION PROGRAM****Meal Planning Nutrient Requirements****Policy**

Meals are pre - planned and meet the required nutritional analysis as verified through the computer assisted nutrient analysis.

**Legal Authority**

Older Americans Act of 1965 as amended

910 KAR 1:190

**Procedure**

- (1) Menus shall be documented as meeting the nutritional requirements through computer assisted nutrient analysis.
- (2) When one meal is served per day the following shall be provided:

<b>Nutrient</b>	<b>Amount Required</b>	<b>Notes</b>
<b>Calories</b>	Average for week between 675 and 735 calories per meal	No one meal may be less than 625 calories
<b>Protein</b>	15 – 25% of calories	
<b>Carbohydrate</b>	93 Grams (acceptable range is 85 grams – 105 grams)	This requirement is in keeping with the high incidence of diabetes in Kentucky
<b>Fat</b>	Within a one week period the daily average should be $\leq$ 30% calories	No one meal may be more than 35% fat. Lard may not be used. Limit trans fats
<b>Fiber</b>	Within a one week period the daily average should be 8 g/meal	
<b>Calcium</b>	400 mg per meal averaged over one week	No one meal may be less than 360 mg
<b>Magnesium</b>	140 mg per meal averaged over one week	No one meal may be less than 126 mg.
<b>Zinc</b>	3.7 mg per meal average over one week	No one meal may be less than 3.33 mg
<b>Vitamin A</b>	300 mcg (RE), averaged over one week	