



Elderly Nutrition Provider Manual: Policies and Procedures

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The purpose of the Older Americans Act (OAA) Elderly Nutrition Program (ENP) is to provide older individuals; particularly those with low incomes, with low cost nutritionally sound meals served in strategically located congregate sites or delivered to the homes of the homebound individuals at least five days a week. Besides promoting better health among the older segment of the population through improved nutrition, these programs focus on reducing the isolation of old age and providing a link to other social and community services.

I. Who is eligible?

Refer to *Title 22 Code of Regulations, Division 1.8 Title C-Elderly Nutrition Program* §7638.7 and §7638.9.

A. Congregate Meals

- Individuals 60+;
- Their spouse of any age;
- A disabled person under age 60 if they are attending a meal site at their own housing facility;
- A disabled person who lives in the same home as a 60+ attendee.

1. Congregate Site Volunteer Meals

- Volunteers of any age as long as they do not deprive an older individual of a meal.

2. Guest Meals

- Each provider will develop a policy for guest and/ or staff meals.
- Those not eligible for the program will be served if there is food left after every eligible person has been served.
- For providers with related policies for serving guests, those not eligible who want a meal must pay a fee equal to the cost of producing the meal, developed by the local agency. Signage must be at the site indicating the cost of a non-senior meal. (Total Budget/Annual Contracted Number of Meals=Total Cost of Meal).

B. Home Delivered Meals

- Someone aged 60+ who is frail and homebound because of illness, disability or isolation. The person must be incapable of shopping and preparing meals and must be too frail to travel to a congregate meal site, have an acute illness or be recovering from an acute illness and/or be incapacitated due to chronic illness;

- ✓ In Marin County, a homebound individual is defined as someone who is not able to drive (even on an occasional or limited basis) and is dependent on others for transportation.
- ✓ Frail is defined as someone who gives a rating of 5 "Dependent" on the transportation question on the functional assessment and gives a rating of 4 "Lots of human help" or 5 "Dependent" on at least two functional areas.
- The spouse of that person, if it is in the interest of the homebound senior;
- A disabled adult, such as the child of the homebound senior, who is living in the home and it is in the interest of the homebound senior. To be considered disabled the person must be unable to work due to a medical condition and that condition must be expected to last at least a year or more and be able to provide verification such as SSDI or MediCare certificate.

F. Second Meal in Home Delivered Meals Program

Refer to Title 22 Code of Regulations, Division 1.8 Title C- Elderly Nutrition Program §7638.3.

- Home delivered meals clients may receive a second meal if they meet the following requirements:
 - They must not displace someone on a waiting list for C2 meals.
 - Criteria must be developed and approved by the AAA for distribution of a second meal.
 - Programs submit reimbursement requests to the AAA for the second meal.

II. Contributions in Congregate and Home Delivered Meals

Refer to Title 22 Code of Regulations, Division 1.8 Title C-Elderly Nutrition Program §7638.9 and OAA Section 315 (b)(4B)

A. Congregate Meal Program Contributions

The following general requirements must be met when determining suggested contributions for the ENP.

- Requests for contributions should not be coercive.
- Means testing is not allowed.
- All participants must be provided an opportunity to donate.
- All participants must understand that they are not obliged to donate.
- All contributions must remain confidential.
- Contributions must be protected from loss, mishandling and theft.
- All contributions must be secured in a safe location until time of deposit.
- Contributions must go back to support - not supplant - the ENP program.
- Suggested contribution amount must be reviewed and approved by AAA.

- Meal site managers must place contribution sign and box away from sign-in area.

B. Home Delivered Meal Contributions

Participants must be provided with written information regarding suggested contributions and procedures for making said contributions. Information should include the following:

- At no time should the participant be asked for their contribution by their driver or give a contribution directly to the driver.
- Providers must establish a procedure to collect contributions. Example: Use of envelopes will ensure the security and confidentiality of contributions made by participants.
- No person can be denied participation because of failure or inability to contribute.
- Contributions must be protected from loss, mishandling and theft.
- Contributions must be deposited on a regular basis and deposit slips must be maintained on file for assessment / audit purposes.
- Local program staff may not monitor individual contribution amounts.
- Contribution amounts should be recorded in aggregate.
- AAA must approve suggested contribution amount.
- AAA must review and approve contribution letter.

III. Congregate Program (C1) Requirements

Refer to Title 22, 7638.1 Requirements for Congregate Nutrition Providers

A. General requirements

1. Meal ordering and delivery from central kitchen procedures

Written procedures must be in place between the central kitchen and satellite sites for ordering and delivery, including ordering deadlines, methods of delivery and emergency contacts. Procedures will be reviewed and approved by the AAA RD.

2. Menu distribution

Menus should be set 30 days in advance. Menus should be available to the sites and posted at least two weeks in advance.

3. Staffing requirements

- The nutrition services provider must have a manager on staff who has either (1) an Associate Degree in food service management, (2) significant cooking experience and 20 hours of college level management classes, or (3) two years of experience as a food service manager. (Refer to *Title 22 Code of Regulations, Division 1.8 Title C-Elderly Nutrition Program §7636.3.*)
- Preference be given to older adults when hiring. (Refer to *Title 22, 7636.3 (d)*)

- Kitchen managers should have a valid ServSafe Food Manager certificate.
- Local programs must employ a dietitian to ensure completion of the following for the C1 program (*Refer to Section 339 of the OAA and 7500 of Title 22*)
 - ✓ Menu creation and analysis.
 - ✓ Quarterly central kitchen monitoring.
 - ✓ Quarterly nutrition education at sites for C1.
 - ✓ Approval and oversight of in-service requirements.
 - ✓ Quarterly monitoring of dining sites.

4. Reservations

- Providers must establish operational procedures for estimating the number of meals to prepare and serve and the amount of food to purchase so that leftovers must be kept to a minimum. To help reduce the number of leftover meals, it is recommended that providers use a reservation system. A reservation system should not exclude eligible participants who have not made a reservation but people who make a reservation will be served first.
- Specifics for determining reservation cut-offs will be developed by site and approved by the central kitchen and AAA.

5. Voluntary Contributions Requirement

- All participants shall be given the opportunity to contribute to the costs of the service.
- A sign indicating suggested contribution and guest fee amounts are to be posted near the contribution container in congregate meal locations. Amount is to be approved by the AAA.
- No eligible person shall be denied service due to inability to contribute.
- Providers shall establish procedures to protect contributions from loss, mishandling and theft. All contributions, including those for guest and staff meals, shall be used to increase the number of meals served, to facilitate access to such meals and to provide other supportive services.

6. Sign in's and Intakes

- Each participant must sign the meal roster. If a client cannot read or write, they may have a witness. Proxy signatures are not allowed.
- Each eligible person must complete an intake. Intake form to be approved by AAA.
- Eligible persons do not need to answer questions on intake but should not be encouraged to do so. Any item skipped, must be indicated "Decline to state." This box must be checked by the participant or proxy.
- Eligible persons must provide a birthdate indicating that they are over 60 to receive a meal.

7. Leftovers

- a. Central Kitchen Leftovers

- Since there is no way one can anticipate every circumstance which might develop regarding the safe handling of leftovers, the program nutritionist is expected to exercise professional judgment in making decisions and recommendations concerning individual cases as they arise.
- Leftovers not distributed to serving areas may be held at the central kitchen for a maximum of two days. Leftovers which are frozen following HACCP guidelines and held at 0° may be retained for 90 days. Potentially hazardous foods suspected of contamination must be discarded immediately.

b. Food Taken from the Sites/Leftovers

- Central kitchen or caterer prepared foods transported to a satellite site must be handled and served in the following manner:
 - Food should be served and consumed at the site.
 - Food which has been transported to the site and not eaten must be discarded unless it is in the original unopened containers and been maintained at proper temperatures. Such items are canned juice, fresh fruits, vegetables, milk, bread, etc.
 - Priority must be given to serving leftovers as seconds to congregate participants.
 - Leftover meals cannot be counted as additional participant meals nor are they eligible for AAA reimbursement.
 - Satellite leftover meals may not be used for home-delivered meals.
 - Employees, volunteers or participants may not take un-served leftover foods from kitchens or sites.
 - Safety of the food after it has been served to a participant and when it has been removed from the congregate site is the responsibility of the recipient. Providers must post signs in appropriate languages stating that:

“For health reasons, taking out potentially hazardous food is not recommended. Doing so is at your own risk.”

B. Opening a New Site

The Older Americans Act C1 program was designed by Congress to support social engagement as well as good nutrition. Proposed new sites must be approved by the AAA. Keeping in mind the intent of the Older Americans Act, the following criteria apply when considering opening a new site.

- All sites must have a volunteer or paid site coordinator.
- All sites must adhere to ADA and Title 22 requirements regarding access. Restrooms, lighting and ventilation must be to code. Table, chairs and other equipment must be appropriate for older adults and arranged to maximize socialization. (*Refer to Title 22 7638.1 (b).*)

- Inspections by local fire and health officials will be secured for all sites prior to beginning service provision and annually thereafter.
- Health permits and regular inspections at the satellite meals sites have been waived by the Marin County Health Department.
- When considering a new site, local providers must consider opportunities for social engagement as well as a nutritious meal.
- When considering a new site, the cost effectiveness of opening a site should be considered.
- When considering a new site, the availability of other senior lunch options nearby should be considered.
- A lunch site may not also be an evening meal site, unless expressly approved by the AAA.
- Senior housing facilities may not be used as an OAA-funded C1 meal site unless there is clear and easy access to the meals program by seniors from outside the facility.
- Adult Day Health programs may not also function as OAA-funded C1 meal sites.
- All requirements for existing sites, including physical space requirements, safety and sanitation requirements and MIS reporting, also apply to new sites.

C. Closing an Existing Site

1. Conditions which may indicate the necessity for starting a process to close or relocate a nutrition site include:

- Documented evidence of the misuse or theft of public funds by contractor or contractor's employee.
- There is a threat to the health and safety of the participants, such as an unsafe, unsanitary building, inadequate facilities or an unsafe neighborhood.
- Costs for operating the site far exceed average costs for similar sites.
- Contractor has failed to comply with the terms of the contract.
- It can be shown that by closing or consolidating sites it is possible to serve more effectively and efficiently the same or a larger number of people, especially if another site is available within a reasonable proximity.
- Participants do not include a significant proportion of targeted seniors.

2. When attempting to close a site, all of the following steps be taken, necessitating a lead time of 60-90 days for site closures. However, the following reasons may allow the process to be abbreviated:

- There is documented evidence of the misuse or theft of public funds by the contractor or contracted employee.

- There is an immediate threat to the health and safety of the participants to continue to have meals at that site.
 - There is a natural disaster.
 - The site is no longer available to the project.
3. The following steps must be taken before closing or relocating a site:
- The will meet with the Nutrition Project Council or, if one does not exist, with representative senior project participants to discuss the situation at the site.
 - The Nutrition Project Director will advise in writing the AAA senior program coordinator of the conditions which indicate the necessity of starting the process to close or relocate the site.
 - The Nutrition Site Project Manager should utilize the AAA senior program coordinator as a liaison if a mutually acceptable solution to the problem cannot be found. The AAA should be kept informed at all times of the status of the site closure.
 - All computers should be wiped clean and AAA-purchased items returned to the AAA.
 - A transition plan should be created, to include planning for transfer of any confidential information, evaluation of clients to assure appropriate placement, informing the local community of the change and assurance that services will continue until the end of the contract period.

D. Right to Refuse Service/Removal from the Program

Violation of any of the rules described below may be grounds for a written or verbal warning, suspension or expulsion from the meal site without appeal. Client may follow established grievance policy (See XIII Grievance Policies). Anyone returning to the site in violation of the suspension or expulsion order will be asked to leave. If the returnee refuses, the police will be called to protect the staff and seniors present.

- ✓ Using derogatory or abusive language to staff or seniors;
- ✓ Unreasonable demands for service;
- ✓ Smoking where prohibited;
- ✓ Fighting;
- ✓ Damaging property;
- ✓ Threatening behavior;
- ✓ Having a weapon;
- ✓ Bringing alcohol or drugs or being drunk;
- ✓ Soliciting others for money;
- ✓ Offensive personal hygiene.

IV. Home Delivered Meals (C2) Requirements

Refer to Title 22, 7638.3, Requirements for Home Delivered Meal Services

1. Client enrollment and assessment

- a. Assessment of eligibility may be done over the telephone.
- b. A documented home visit by the assessment coordinator or designee must be completed within 14 days of the start of service. The comprehensive assessment covers physiological, socioeconomic and psychological factors including acute or chronic diseases, syndromes or conditions, limited functional ability and family/support system. Staff will review the HDM Client Rights and Responsibilities at the initial in-home assessment and annually thereafter, which the client (or the client's proxy) must sign in order to continue participation in the program.
- c. Assessment must include appropriate referral to other resources as needed.
- d. Re-assessment must be done at least quarterly. Re-assessment must be done in the home of the participant at least every other quarter.
- e. Qualified staff shall be appropriately trained in screening and assessment procedures.
- f. To the extent possible, participants shall be screened for need for other services and referred as appropriate.

2. Meal ordering and delivery

- a. Providers must establish written operational procedures for estimating the number of meals. Meal counts should be called into the main nutrition site as soon as the information is obtained, per the schedule established locally between kitchen and site operations. Routes must be designed to meet the following requirements:
 - Meal routes delivered hot should be completed within two hours of production. Exceptions must be approved by AAA.
 - Meals delivered cold should be delivered within three hours of leaving the kitchen. Exceptions must be approved by AAA.
 - Frozen meals must be received frozen by the client.
- b. Drivers should add additional meals to their meal count to accommodate for temperature checks or have received instructions on how to properly take a temperature of a meal without causing bacterial contamination.

3. Temperature documentation requirements

Each route must document time and temperatures of each component of the meal that is temperature controlled for safety (TCS), including milk, at least twice monthly. If the time or temperatures do not meet minimum standards, the temperatures must be taken weekly. Documented temperature sheets must be made available to the AAA during program monitoring.

4. Staffing requirements

- The nutrition services provider must have a manger on staff who has either (1) an Associate Degree in food service management, (2) significant cooking experience and 20 hours of college level management classes, or (3) two years of experience as a food service manager. *(Refer to Title 22 Code of Regulations, Division 1.8 Title C-Elderly Nutrition Program §7636.3.)*
- All paid or volunteer meals on wheels drivers must have a current driver's license and driver's insurance. Agency staff must verify validity of current license for all drivers, paid or volunteer, at least annually.
- Kitchen managers must have a valid ServSafe certificate.
- Preference must be given to older adults when hiring. *(Refer to Title 22, 7636.3 (d).)*
- Local programs must employ a dietitian to ensure completion of the following. *(Refer to Section 339 of the OAA and 7500 of Title 22.)*
All documentation of monitoring will be available for review at annual AAA site monitoring.
 - ✓ Menu creation and analysis;
 - ✓ Quarterly central kitchen monitoring;
 - ✓ Monthly nutrition education for C2;
 - ✓ Approval and oversight of in-service requirements;

5. Home delivered meals leftovers

- Extra meals may be distributed to needy clients on the driver route or used for taking temperatures. Under NO circumstances will leftover meals be returned to the central kitchen for future consumption.
- All agencies will have a system in place for documenting extra route meals and their disposition.

6. Client not at home

Refer to Title 22 Code of Regulations Title IIIC Elderly Nutrition Program β 7636.1 (b) 4 and the California Retail Food Code (CRFC) 113996 (a).

- Safety and sanitation considerations preclude meal delivery to homes in which no one is available to receive them at the door. Leaving a meal unattended is not considered "delivery to the customer". Leaving the meal in a cooler, in a bag, or on a chair by the door is not acceptable.
- Delivery provider must have a policy in place for documenting missed meals and contacting client's emergency contact, if needed.
- Drivers are encouraged to not enter the home. Bedridden or disabled seniors should have a caregiver to receive meals at the door.
- Home delivered meal clients should be told that they will be asked to donate for meals that were prepared and sent, even if the client was not home to receive the meal.

7. Meal cancellations

- Information pertaining to meal cancellations for Home-Delivered Meal participants must be documented so as to monitor participants' status.
- Home-Delivered meal drivers should be notified of any cancellations as soon as possible so that adjustments can be made to the delivery route.
- Follow-up with the participant must be conducted to determine when meal delivery is to resume.
- Local programs must inform clients at enrollment of cancellation policies and expectations.

8. HD Meals Waiting List Guidelines *(Refer to Title 22 7638.3 (c))*

- Inform senior that s/he may be put on a waiting list at intake enrollment.
- Take a complete intake.
- Send local food resource information to client, if available.

9. Route Placement Procedures

- Determine priority need of client.
- Add senior to local program “waiting list” form. Waiting list form should include, at a minimum, the Date Client Placed on Waiting List, Client Name, Priority Ranking, Route Placement, Start Date and initials of appropriate staff.
- As clients drop off program, offer the slot to waiting list seniors based on priority, date and route—in that order.
- Call the senior to inquire if they still have a need for meals on wheels. If yes, document the start date of their meal service and remove from the “waiting list” form.
- Provide a menu, contact information, nutrition education and/or additional outreach materials to client on start day.

10. Priority Ranking

- A priority ranking will be developed by the AAA in partnership with local meal providers when a waiting list is instituted.
- If a client is physically unable to receive meals at the front door and does not have caretaking support, the meals on wheels program should refer the client to a skilled nursing or other supportive care. Clients must meet criteria within a priority to qualify at that level of need.

11. Removal from the Program/Right to Refuse Service

Clients can be temporarily suspended or terminated from the home-delivered meals program. Organizations serving older adults in the community have the right to work in a safe environment and staff must be treated with courtesy and respect. The right to suspend or terminate service in the home delivered meal program for the following reasons.

- Making unreasonable demands for service;
- Operating a motor vehicle
- Misrepresenting the need for service;
- Personally threatening and/or offensive language;
- Threatening or erratic behavior;
- Inappropriate physical contact;
- Three unsuccessful delivery attempts (no-one is at home to receive the meal);
- Excessive cancellations without providing at least 24-hours of notice.

In lieu of immediate termination for any of the above reasons, staff will attempt to contact the client by telephone. This is considered a verbal warning. If the problem does not resolve, the client will be suspended from the program for a period of thirty (30) days, at which time a client can request resumption of service. Depending on the nature of the problem and if a continued problem exists, clients may be terminated from the program. Clients are then able to file a grievance with provider if they wish to do so.

V. Temperature Documentation *(Refer to California Retail Food Code)*

All programs must maintain temperature documentation forms until inspected by the AAA or send such forms monthly to the AAA.

All C1 sites must have readily available a sanitized, accurate and easily readable thermometer. All C2 drivers should have access to thermometers and alcohol swabs to take end-of-route temperatures and receive appropriate training on how to take a temperature.

All kitchen thermometers must be calibrated daily and after being dropped. All agency thermometers must be calibrated regularly, per instructions from provider dietitian.

Site staff or volunteers must take the temperature of the food at arrival and at the time of meal service, if that is more than 30 minutes after delivery. If the hot meal is under 135° at arrival, the meal should be reheated to at least 135° F. Hot and cold food temperatures must be documented and records shall be kept for AAA inspection for:

- All refrigerators and freezers at the kitchens.
- All refrigerators and freezers at meal sites that store ENP chilled meal items.
- Dry food storage area temperatures, ideally at 70° or lower.
- Bi-monthly end-of-route home delivered meals temperatures.
- Weekly end-of-route home delivered meals temperatures if on-going temperature readings are not in compliance with stated requirements.
- Daily end of production temperatures per HACCP standards.
- Daily receipt of meal at senior meal site.

- Daily start of congregate meal service, unless service begins less than 30 minutes after receipt of meal and documented temperatures are within acceptable range.

Local providers may develop their own forms or use those from the AAA. Go to http://www.aging.ca.gov/ProgramsProviders/AAA/Nutrition/Nutrition_Program_Resources/ for resources.

A. Procedures for Taking Temperatures of Food

- Wash, rinse, sanitize and air-dry thermometer stem before and after each use.
- Insert stem two inches (2") into the center of the food or until dimple of stem is surrounded by the food. Do not touch any meat bone or bottom of pan. Pack down less dense foods prior to inserting the probe. It is okay for lettuce salads (without dressing) to arrive above 50° F.
- Wait for the needle or the numbers on the digital readout to stop. When the needle has stopped moving for fifteen (15) seconds, record the temperature reading and the time.
- Sanitize thermometer between readings. To sanitize, use alcohol swabs or a solution of bleach: 1/2 capful of bleach to one cup of water.
- Recalibrate or adjust the accuracy of the thermometer as needed.
- If the temperature of the hot food is below 135°, the food must be reheated to 165°.
- All cold food must be below 41° F.
- Project dietitians will check thermometer accuracy during quarterly site monitor.

B. Procedures for Thermometer Calibration

- Ice Point Method: Insert the stem into a 50/50 ice and water slush until the needle stops. Turn the calibration nut (usually under the dial) until the needle reads 32°.
- Boiling Point Method: Insert the stem of the thermometer into boiling water until the needle stops. Turn the calibration nut until the needle reads 212°.

VI. Volunteers

Refer to Title 22 Code of Regulations §7636.5.

Programs are encouraged to use volunteers in the meal program whenever possible.

Local agencies must have a policy regarding eligibility of free meals for volunteers. All policies must be approved by the AAA. All meal site directors must receive instructions regarding volunteer meals policies. Instructions will include eligibility and documentation. A copy will be available at all meal sites.

Volunteer policies and procedures must be developed by all programs utilizing volunteers and must be approved by the AAA. The procedures will be available to all volunteers and to the AAA during on-site monitoring.

A. Volunteer Background Checks

Meals on wheels paid or volunteer drivers may not have a history of any felony, or any drug or elder or domestic abuse conviction. Local agencies should have established policies regarding volunteer drivers with a misdemeanor conviction history, particularly regarding DUIs.

All paid or volunteer meals on wheels drivers must have a current driver's license and driver's insurance. Agency must verify validity of current license for all drivers, paid or volunteer, at least annually.

B. Volunteer Training Requirements

All staff, paid and volunteer, must be oriented and trained to perform their assigned responsibilities and tasks. Training, at a minimum, must include: Food Safety, prevention of foodborne illness and HACCP principles, accident prevention, instruction on fire safety, first aid, choking, earthquake preparedness and other emergency procedures.

A yearly written plan for staff training will be developed, implemented and maintained on file by the nutrition services provider, as required in *Title 22 subsection 7636. (c)*. The training plan must identify who is to be trained, who will conduct the training, content of training and when it is scheduled.

The nutrition services provider's registered dietitian will review and approve the content of all staff training prior to presentation.

A minimum of four (4) hours of staff training must be provided annually, by providers, for paid and volunteer food service staff, including congregate and home-delivered meal staff.

Training sessions must be evaluated by those receiving the training.

Documentation of training must include evaluations and attendance records must be maintained, as required in subsection 7636.7(c).

VII. Participant Evaluation of Services

Refer to Title 22 7638.1 and 7638.3

Meal providers must develop and utilize procedures for obtaining the view of participants about the services they receive. All senior meals program providers will complete at a minimum an annual *Client_Satisfaction Survey* provided by the AAA in appropriate languages.

VIII. Nutrition Education

Refer to Title 22 Code of Regulations, §7638.11.

Nutrition education services are defined as regularly scheduled programs, such as demonstrations, audio-visual presentations, lectures and small group discussions,

which are planned, approved and coordinated by a qualified Dietitian/Nutritionist. Their purpose is to inform individuals about available facts and information that will promote improved food selection, eating habits and health and nutrition related practices. These activities will be designed to:

- a. Assist older persons in understanding the role of nutrition and physical activity in health promotion and chronic and acute disease prevention;
- b. Aid older persons in making sound food choices and in obtaining the best food to meet nutritional needs for the least money;
- c. Make older persons aware of community-sponsored nutrition programs which encourage and promote sound nutritional habits and good health; and
- d. Provide general information to older persons, where feasible, in the area of special diets and special menus required by health or social conditions.

A. General requirements

1. All nutrition education plans, activities and materials will be approved by the Service Provider Dietitian/Nutritionist and sent annually to the AAA Senior Nutritionist for review.
2. Nutrition education services will be provided by a Dietitian/Nutritionist or by personnel trained or approved by the Dietitian/Nutritionist. Priority will be placed on coordinating with community resources.
3. Nutrition education services will be planned for both C-1 and C-2 participants and will occur on a regularly scheduled basis. Anticipated expenses will be included in the program budget. Printed and other visuals materials will be available on a continuing basis at dining sites.
4. Nutrition education services will be based on the particular need of congregate and homebound older persons as determined by annual needs assessment and evaluation of service impact.
5. All nutrition education activities will be documented.
6. Copies of nutrition education “lesson plans” and distributed written materials will be kept on file for review at the AAA on-site monitoring.

B. Congregate dining nutrition education requirements

Nutrition and health promotion education must be offered in C-1 at least four times annually via written materials and augmented by on-site presentations. At least one presentation annually will be on safety and sanitation.

C. Home Delivered Meals Nutrition Education Requirement

Nutrition and health promotion education must be provided monthly in C-2, and may be printed material attached to the menu.

D. Nutrition counseling

Individual dietary evaluation and counseling for therapeutic needs is not provided. Clients needing this service are to be referred to a local hospital, nutrition service, or an appropriate nutritionist. Local agencies dietitians or the AAA can assist with referrals.

IX. Food Production Kitchen Standards

Refer to *California Retail Food Code (CRFC) 2015*.

A. Health and Safety Inspections

Refer to *Title 22 Code of Regulations, §7636.1*

1. Nutrition Service Providers will comply with regulations applicable to food service operations. Meals will be supplied only from premises which have a valid permit, license, or certificate.
2. A “test” meal will be kept on-site for 48 hours each day.

B. Employee Health Standards

1. All food handlers and servers will be free of communicable disease. If an employee or volunteer is believed ill or a carrier of a communicable disease, clearance from the local health officer may be requested by the provider prior to permitting the employee to return to work.
2. All food handlers and servers will wear clean, washable clothing and hairnets, caps, or other suitable hair coverings to prevent contamination of foods, beverages and/or utensils.
3. All food handlers and servers will use tongs or other implements while serving food. If hand contact with the food is unavoidable, disposable hand coverings will be worn.
4. All food handlers and servers are prohibited from using tobacco in any form while preparing, handling or serving food or beverages. Tobacco will not be used in any form in any room or space used primarily for the preparation or storage of food. Program will post and maintain "No Smoking" signs in such rooms or places.

5. All food handlers and servers will thoroughly wash their hands prior to beginning work, after using the toilet and every time hands are soiled.
 - a. Handwashing facilities must be in good repair and equipped with hot and cold running water will be provided for employees within or adjacent to the food preparation area;
 - b. A permanently installed detergent or soap dispenser and paper towels will be provided at all handwashing facilities;
 - c. Legible signs will be posted in each toilet room directing employees that they must wash their hands before returning to work.

C. Hazard Analysis Critical Control Point (HACCP) Documentation

All food service operations will comply with HACCP expectations, including menus, documentation sheets and overall kitchen protocols. Providers will keep HACCP logs and have them available at the time of AAA on-site monitoring.

D. Kitchen Safety and Sanitation

All providers will comply with the *California Retail Food Code (CalCode)* and the National Restaurant Association *ServSafe* as minimum standards for kitchen safety and sanitation.

1. Food Procurement Requirements

- All foods shall be of good quality and shall be obtained from sources that conform to Federal, State and local regulatory standards for quality, sanitation and safety.
- Food in hermetically sealed containers shall be processed in a licensed establishment. No home-prepared or home-canned food shall be used.
- Food from broken containers, unlabeled, rusty, or leaking cans or cans with side seam dents, rim dents, or swells shall not be used.
- Milk shall be purchased from a reliable source whose standards of quality, sanitation and safety comply with Division 15 of California Food and Agricultural Code. All milk products used and served shall be pasteurized.
- All food contributions shall meet the standards of quality, sanitation and safety set forth in this manual. Fresh fruits and vegetables of good quality may be contributed to the program. Prior to use, all fruits and vegetables shall be washed to remove dirt or insecticide residues. The program shall not accept contribution of wild game. Fresh ocean going and frozen fish may be accepted.

- Providers are encouraged to participate in group food purchasing to the extent allowed by the above standard.
- A comparative cost analysis shall be performed either by the provider or its group purchasing organization on an ongoing basis to obtain the highest quality food for the lowest price available.

2. Food Storage Requirements

- Adequate and suitable space free from dirt, vermin and contamination or adulteration shall be provided for the storage of food, beverages and cooking, serving and eating utensils.
- The dry storage area shall be cool, dark, well-ventilated, clean, orderly and free from leakage, insects, rodents and vermin or other contamination. It shall have at least 10 foot-candles of light. It is recommended that the temperature of the dry storage area be maintained at *50-70°F*.
- Inventory systems shall be established and used. Stored goods shall be rotated to prevent deterioration. The first-in-first-out food rotation system shall be maintained.
- All foods shall be stored at least six inches above the floor, six inches from the ceiling and away from the wall to permit free circulation of air and prevent contamination.
- All food and non-food items shall be clearly labeled so that their contents are easily identifiable.
- All chemicals and cleaning supplies shall be stored in an area separate from food.
- Opened packages of foods, such as sugar, flour and noodles shall be stored in tightly closed containers and clearly labeled on the main part of the container.
- Windows shall be screened to prevent insect invasion. Open doors shall be screened or equipped with self-closing devices or high velocity fans when left open for extended periods of time, e.g., during delivery times.
- Street clothing and purses shall be stored in an area separated from toilets, food, paper, goods, utensils, kitchen equipment and other supplies used in the preparation or service of food.
- Refrigerators and freezers shall be kept clean and in good repair. All refrigerators shall maintain a maximum temperature of 41°F. All freezers shall maintain a maximum of 0°F. An accurate and readily visible thermometer shall be installed in all refrigerators and freezers.

- Refrigerators/freezers temperature log shall be maintained daily at the kitchen and satellite meal sites when elderly nutrition program (ENP) meals are served.

3. Food Production Requirements

Food production and meal service shall be under the supervision of a person trained in food service management and certified according to CRFC to ensure HACCP procedures are followed. All frozen meat, fish, poultry, shellfish and frozen products containing these foods shall be kept frozen until processing or cooking begins; defrosted in the refrigerator; or defrosted in cold running water of sufficient velocity to flush loose food particles into the sink drain.

4. Production Control

- Production schedules or worksheets shall be available in the food preparation area.
- Food shall be prepared in sufficient quantities to serve all participants. Careful planning shall minimize leftover food and prevent waste.
- Standardized recipes shall be used to ensure consistency of quality and quantity and adherence to menu guidelines.
- Appropriate utensils for correct and consistent portion control shall be available and used at each site.
- Sulfites shall not be added to fresh fruits, vegetables and potentially hazardous foods at the food production kitchen.
- Ground beef products shall be cooked to heat all parts of the food to at least 155°F for 15 seconds or until the meat is no longer pink and the juices are clear.
- Potentially hazardous food shall be cooled rapidly from 135°F to 41°F or below within a total of 6 hours and food must reach 70°F within two hours.
- No oil, shortening, or margarine containing artificial trans-fat shall be used in meal preparation. Food label shall be maintained for all food or food additives that is or includes any fat, oil, or shortening for as long as the food is stored, distributed, served, or used in the preparation of food.
- Home-delivered meals not assembled for same day delivery shall be packaged within two hours from the completion of preparation; and immediately refrigerated or frozen after packaging.
- Frozen Meals produce in the production kitchen which are not commercially prepared shall:

- ✓ Be prepared and packaged only in a central kitchen or on-site preparation kitchen;
- ✓ Be packaged within two hours of the end of food production. At the time of packaging, hot foods shall be at least 140°F and cold foods at <40°F;
- ✓ Be frozen as quickly as possible and assured that they have been cooled to a temperature below 70°F within four hours and <41 in 6 hours;
- ✓ Have food temperatures taken and recorded at the end of food production, at the time of packaging and throughout the frozen process. Temperature shall be recorded and kept on file for audit; (*Refer to V: Temperature Documentation*)
- ✓ Be packaged in individual trays, properly sealed and labeled with the date, contents and instructions for storage and reheating;
- ✓ Be frozen in a manner that allows air circulation around each individual tray;
- ✓ Be kept in a frozen state throughout storage, transport and delivery to the senior participant; and
- ✓ Be discarded after 90 days.

E. Meal Service Requirements

a. Food Transport

All food for congregate and home-delivered meals shall be packaged and transported in a manner which protects it from potential contamination, including dust, insects, rodents, unclean equipment and utensils and unnecessary handling. Assembling and transport equipment shall be capable of supporting or maintaining appropriate food temperatures.

b. Temperature Maintenance (*Refer to V: Temperature Documentation*)

Hot food shall be maintained at or above 135°F and cold food shall be maintained at or below 41°F throughout the meal service period or until delivered to the homebound participant.

c. Systematic Temperature Checks (*Refer to V: Temperature Documentation*)

- Congregate food temperatures shall be taken daily at the end of production, upon delivery and at the time of service.
- Home-delivered meal food temperatures shall be taken:
 - Daily at the end of production and at the time of meal assembly/packing;

- On a regular basis not less than twice a month at the end of each delivered route; and end-of-route temperatures not meeting temperature requirements shall have temperatures taken not less than weekly until the problem is corrected.
- A copy of the temperature records shall be returned to the provider for monitoring and review by management. Records of all temperature checks shall be kept on file for review by AAA Nutritionist.

F. Holding time

To maintain quality in prepared foods, holding times shall be kept to a minimum. Long periods of holding hot foods at required temperatures diminish the nutrient content and the palatability of foods.

- Temperatures of food during the holding time shall be maintained at 135°F or above for hot foods and 41°F and below for cold foods. Congregate site meal or the delivery of the last home-delivered meal shall not exceed two hours.
- Home-delivered meal holding time may be extended to three hours for isolated and remote locations which cannot be accessed in two hours, if approved by the Marin County Area Agency on Aging. Required temperatures shall be maintained.
- Frozen home-delivered meals may exceed the two-hour holding time when the food is maintained in a frozen state until delivery.
- Cold home-delivered meals may exceed the two-hour holding time when food is maintained at or below 40°F until delivery.
- Milk and products resembling milk shall be provided in individual, commercially-filled containers, or shall be poured directly from commercially-filled bulk containers into the glass or cup from which it is consumed.
- Single service utensils and tableware shall be used one time only and then discarded.
- Appropriate food containers and utensils for blind and disabled participants shall be available on request or other assistance provided.

G. Sanitation Requirements

State and local health, sanitation and safety regulations, applicable to the particular types of food preparation and meal delivery systems used by the project shall be followed in all stages of food service operations. Meals shall be produced and served at premises, which have valid permits, licenses or certificates.

- Health permits shall be posted at the production kitchen.
- Annual inspections by local health officials shall be secured for all kitchens.
- Photocopies of all initial inspection certificates and health permits shall be forwarded to AAA prior to the commencement of program operations. The

originals of all sanitation reports are to be retained in project files for three years.

- Photocopies of all renewal inspection certificates shall be forwarded upon receipt to AAA.
- Copies of all sanitation reports shall be submitted to AAA.
- Dish washing facilities and techniques shall comply with local and State Health Department regulations. Domestic dish washing machines may be used if they comply with sanitation regulations. Written approval by the AAA should be obtained before purchasing any equipment. A dishwashing temperature and sanitizer log must be maintained on a daily basis and posted in the kitchen or at the meal sites.
- All new and replacement equipment shall meet or be equivalent to applicable National Sanitation Foundation (NSF) standards, or in the absence of such standards, be approved by the local health department.
- All programs shall provide facilities and equipment necessary to properly store or dispose of all waste material.
- All food waste and rubbish containing food waste shall be kept in tight, non-absorbent, rodent-proof containers, covered with close-fitting lids. Trashcans in food production areas shall be kept covered, except during production time. Waste containers used for storing garbage shall be maintained in a clean and sanitary condition.
- Cleaning schedule and procedures shall be posted and followed at all kitchens and meal sites. Cleaning schedules are to include what is to be cleaned, frequency of cleaning, how it is to be cleaned and who is to do the cleaning.
- Safety Data Sheets (SDS) for all chemical products used in the kitchen or meal sites shall be obtained and maintained in the kitchen or at the meal sites. Instructions on SDS must be provided to food service workers, paid or volunteer, during the orientation and thereafter on an ongoing basis.
- Holding time between the end of production and the beginning of food service and the end of meal service shall be less than four hours.
- All food handlers and servers shall be free of communicable disease. If an employee or volunteer is believed ill or a carrier of a communicable disease, she/he shall be restricted from performing food preparation and service activities. Clearance from a physician may be requested by the provider prior to permitting the employee to return to work.
- All food handlers and servers shall wear clean, washable clothing, close-toed protective footwear and hairnets, caps or other suitable hair coverings to prevent contamination of foods, beverages and/or utensils.
- All food handlers and servers shall use tongs or other implements while serving food. If hand contact with the food is unavoidable, disposable hand coverings shall be worn.

- All food handlers and servers are prohibited from using tobacco in any form while preparing, handling, or serving food or beverages. Tobacco shall not be used in any form in any room or space used primarily for the preparation or storage of food. Projects shall post and maintain “No Smoking” signs in such rooms or places.
- All food handlers and servers shall thoroughly wash their hands prior to beginning work, after using the toilet and every time hands are soiled. Hand washing facilities in good repair and equipped with hot and cold running water shall be provided for employees within or adjacent to the food preparation area. A permanently installed detergent or soap dispenser and single use paper towels or hot air blowers shall be provided at or adjacent to all hand washing facilities. Legible signs shall be posted in each toilet room directing employees that they shall wash hands with soap before returning to work.

H. Training Requirements for Food Service Workers

Refer to *Title 22 Code of Regulations, §7636.5.*

1. Quarterly in-service training will be provided for all paid and volunteer food service personnel.
2. A yearly written plan for in-service training will be developed and sent to the AAA dietitian. The training plan will identify who will conduct the training and when it will be conducted. Training topics may include portion control, food preparation methods, sanitation, food spoilage, food handling techniques, food delivery, prevention of foodborne illness, equipment operation and maintenance and nutrition service standards;
3. All Food Service Managers, kitchen supervisors and dietitians must be *ServSafe* certified by the National Restaurant Association. It is strongly recommended that paid and volunteer site coordinators attend *ServSafe* training.
4. Food handlers are not required to obtain a food handlers card and are specifically excluded from SB 303: Food Handlers. SB303 states that " This section does not apply to a food handler who is employed by any of the following: An elderly nutrition program, administered by the Department on Aging, pursuant to the Older Americans Act of 1965." However, it is recommended that food handlers attend a food safety training class.

X. Menu Planning

Refer to *Title 22 Code of Regulations §7638.5.*

The basic pattern of a normal diet should be followed. Individual problems of the senior population, such as difficulty in chewing, special diet considerations and limited mobility

should be considered. Fixed habits and food preferences developed through many years may influence, but should not determine entirely, the meals planned for them.

Menu planning must consider basic food characteristics and food combinations, including consideration of color/texture, consistency, shape and flavor combinations. Since the populations served are relatively static, variety in menus and food preparation is particularly important. Menus must retain optimum nutritional content while providing maximum flavor and appearance.

A. Defining a Meal

Each meal served will contain at least one-third of the current RDA as established by the Food and Nutrition Board, National Research Council-National Academy of Sciences. Fractions of meals or snacks may not be counted even when such snacks cumulatively equal one third RDA.

The following table describes the elements in the California 1600 Calorie meal pattern. Serving sizes are based on the USDA Dietary Guidelines. This sample component meal pattern does not assure that meals meet 1/3 of the DRIs and the DGA. Meals will require specific types of fruits and vegetables, whole grains and high fiber foods in order to assure the target nutrients are provided. The component meal pattern may be deficient in vitamins E, B12 and Zinc, requiring additional nutrition deduction for participants on the selection of foods that are good sources of these nutrients. The meal pattern below is based on the minimum requirements for a sedentary female 70 years old.

California 1600 Calorie per Day Component Meal Pattern Minimum Recommended Elements

Food Group	Servings for 550 calories per meal	Serving Size for 1600 calorie level
Protein – meat, fish, poultry, legumes, eggs, cheese	1 serving, 2 –3 ounces cooked edible	2 – 3 ounces = 1 serving
Vegetables	1-2 servings	¹ / ₂ cup = 1 serving
Fruit	1 serving	¹ / ₂ cup = 1 serving
Bread or Grain	1-2 servings (¹ / ₂ be whole grain)	1 slice Bread – 1 serving
Low-fat milk or milk alternate	1 serving	1 cup or equivalent measure
Dessert	Optional – limit sweets, use fruit	Foods high in fiber and low in fat and sugar

Protein. At least 14 grams must be provided. Legumes should not be counted as both vegetable and protein. Providers may use other protein sources such as those in the vegetarian meal to meet the protein requirements.

Vegetables. Vegetables as a primary ingredient in soups, stews, casseroles, or the combination dishes should total ¹/₂ cup per serving and raw leafy vegetables (salads) should equal 1 cup if they are to be considered a serving.

Fruit. A serving of fruit is generally a medium sized whole fruit, 1/2 cup fresh, chopped, cooked, frozen or canned, drained fruit, or 1/2 cup 100 percent fruit juice. Fresh, frozen, or canned fruit should be packed in juice, light syrup, or without sugar.

Breads/Grains. One-half of the daily intakes of grains should be from whole grains. Grains that are processed (not whole) must be fortified.

Milk. Each meal shall contain 8 ounces of pasteurized fortified skim, low fat, or buttermilk. If religious preference precludes the acceptance of milk with the meal, it may be omitted from the menu; however, an equivalent substitute must be used.

B. Menu Analysis

Conformity to the above requirement will be assured by submitting to the AAA either detailed nutritional analysis along with the menus or by submitting menus planned using the following criteria;

- a. All menus will comply with the specifications set forth in *Title 22 Code of Regulations §7638.5*.
- b. Menu analysis is required monthly and submitted to the AAA RD for approval. See Menu Certification Procedures, below.
- c. All programs will comply with all specifications set forth in the RFP.
- d. Menus will be posted weekly in a spot conspicuous to participants at each congregate meal site, as well as in the preparation area.
- e. All meals on wheels recipients will receive a monthly menu before the start of each month.
- f. Menus will be legible, easy-to-read and in the language of the participant group. If over 5% of participating clients read in another language, the provider should make every attempt to have the menu translated into that language monthly. If that is unreasonable, a sample menu in the participant language should be created.
- g. Salt should not be used in the kitchen. Herbs and spices should be used to provide flavor.
- h. No trans fats will be used in meal preparation.

No Added Salt and Carbohydrate Controlled Diets should be able to be accommodated by the above menu guidelines. Participants may request that fruit be substituted for a sweet dessert or that the dessert not be sent; however, additional accommodations by programs are not required. All high sodium meals (> 1000 mg NA) must be noted on the menu and the recipient may request an alternative, either a frozen meal or two meals on the day before. High sodium meals will be limited to once a month.

Renal Diets are considered therapeutic and will require approval from the health care provider/physician if offered by the local program.

Mechanical Soft diets should be offered in consultation with the clients' local health care provider.

Supplemental foods, (i.e. formulas such as Ensure or vitamins, minerals or nutritional powders may not be distributed through either the C1 or C2 program.

C. Menu Certification Procedures

- a. All providers are expected to adhere to PSA 5 Policies and Procedures. Any variations from that policy be approved in writing in advance by the AAA Registered Dietician.
- b. If component meal pattern is used all monthly and cycle menus be analyzed for Vitamin A, Vitamin C, protein, fiber and sodium at a minimum.
- c. Monthly menus and nutritional analysis will be submitted to the AAA Registered Dietician either by email attachment or with a hard copy at least 4 weeks prior to use. The AAA RD will review menus within 7 working days of submission unless other arrangements have been made.
- d. The AAA RD will communicate questions and/or concerns regarding the menu to the provider dietitian either by email or telephone. Together they will finalize monthly menu. Provider will amend menu to reflect menu changes. Provider dietitian will send final monthly menu to AAA RD.
- e. The AAA RD will send written certification of the menu to provider dietitian upon receipt of final menu submission.
- f. "As served" or menu substitution list will be sent to AAA RD monthly.
- g. If menu has already gone to print, "as served" menu will reflect menu changes.
- h. All clients in both C1 and C2 will be notified in advance of menu entrée changes not reflected on distributed menu.

D. Use of Donated Food

The AAA Title III Elderly Nutrition providers may accept donated produce from commercial food suppliers, grocery stores and farmers' market vendors.

In addition, produce may be accepted from local gardeners if the program's certified food safety manager feels it is reasonably safe, knowing there is inherent risk of contamination of all food.

1. Procedures

The Certified Food Safety Manager will inspect the produce upon receipt.

- Do not accept produce that is excessively dirty.
- Do not accept produce that does not meet the quality standards of the program.
- Do not accept produce that is moldy or showing signs of decay.

- Do not accept fruit that has dropped to the ground.
- Produce must be whole. Do not accept any produce that has been cut into pieces.
- Elderly Nutrition Program (ENP) may incorporate the produce into their menu or donate to recipients.
- Refrigerate immediately if reasonable to retain nutrients and prevent the growth of bacteria.
- If in doubt, do not accept the contribution.

2. Documentation

If accepted, program will:

- Retain a log of all accepted donated produce including date accepted, gardener's name, address and phone number.
- Log must be retained for a period of one year.

3. Washing/Storage

- Wash your hands before and after handling unwashed produce.
- Remove as much dirt from the produce as possible, to retain freshness avoid washing until ready to prepare if possible.
- Before use, it must be washed under cold running potable water, being sure all folds, crevices and surfaces are free of dirt and contamination. It is not acceptable to soak produce in a water bath. Do not wash produce with soap.
- Use a brush or friction on vegetables with textured surfaces, such a melons, pineapples, etc.
- Keep clean and dirty produce separate.

XI. Emergency and Disaster Planning Requirements

Refer to Title 22, 7636.1 (b) 8.

It is the responsibility of all the AAA contractors to prepare to respond to clients and staff in their facilities at the time of a disaster and to plan for the continuation or restoration of services after a disaster. All AAA contractors must have a disaster plan in place that is reviewed annually by the AAA.

All administrators of Meals on Wheels programs will have a back-up system in place for meal production if their kitchen is inoperable.

XII. Confidentiality and Recordkeeping

Refer to Title 22 7637.7 Records, Reports, Distribution of Information and Confidentiality, to CDA Service Categories and Data Dictionary and AAA Data Reporting Policy and Procedures Manual.

Misinformation related to congregate participants must be documented and sent

to the AAA within the first month of their participation.

- A. Providers must develop and maintain records on participants which document:
 - Eligibility for service;
 - Emergency contact;
 - Economic and social need indicators; and
 - Need for and referral to other appropriate services.
- B. All information obtained is to be maintained in a manner that confidentiality will not be violated.
- C. Information cannot be released without the written consent of the participant.
- D. Providers must ensure that no older persons are denied services if such persons refuse to provide written informed consent.
- E. All staff handling intakes must complete the CDA Security Awareness Training.

XIII. Grievance Procedures

Refer to Marin County AAA Policy 7 Aging Grievances, Dated June 1, 2014 and Title 22 Code of Regulations, Chapter 5, Title III Programs, §7700 General Provisions

The meal provider must establish a Client Grievance and Complaint protocol according to the needs of the program and the AAA's grievance and complaint policy.

The policy must indicate a time frame within which a complaint will be acknowledged. The time frame must not exceed two working days after receipt of the complaint. The acknowledgement letter will clearly state the grievance levels within the agency. A written notification must be issued to the complainant stating the results of the review within ten working days of the receipt of the complaint. If more than ten working days are required to review the case, a written letter must be issued to the complainant regarding the proposed timeline of the review decision within 30 days of the receipt of the complaint. The time frame to resolve a complaint at the nutrition provider level must be no more than 30 days from the date of receiving a complaint.

All notifications to the complainant must include a statement that the complainant may appeal to the Area Agency on Aging if dissatisfied with the results of the nutrition provider's review.

The grievance process must include confidentiality provisions to protect the complainant's right to privacy. Only information relevant to the complaint may be released to the responding party without the consent of the complainant. The complaint has a right to remain anonymous but will need to provide an address for written correspondences. An e-mail address is acceptable.

XIV. Mandated Reporter Status for Elder Abuse

Refer to Title 22, 7636.1 (b) 9 and California Elder and Dependent Adult Abuse Reporting Law (15630 W&I).

The provider must comply with California Elder and Dependent Adult Abuse Reporting Law (15630 W&I) to report suspected dependent adult/elder abuse to the local County Adult Protective Services or Ombudsman.

All staff including paid and volunteer must report the abuse if staff has knowledge of an incident that reasonably appears to be one of the types of abuse listed below, or reasonably suspect abuse. The types of abuse include all of the following: Physical abuse, abandonment, isolation, financial abuse and neglect, including self-neglect.

The abuse must be reported immediately or as practically possible by phone, with a written report following within two working days. Failure to report abuse of an elder or dependent adult, in violation of the mandated reporting law, is a misdemeanor, punishable by not more than six months in the county jail or by a fine of not more than \$1,000, or by both that fine and imprisonment. Any mandated reporter who willfully fails to report abuse, where that abuse results in death or great bodily injury is punishable by not more than one year in the county jail or by a fine of not more than \$5,000.

KITCHEN/ MEAL SITE QUARTERLY MONITORING REPORT

Marin County AAA Nutrition Program

Site: _____ Nutrition Staff: _____ Date of Monitoring: _____

Meal Production Time: _____ Food temperatures taken: Delivery time _____ Y/N _____ Serving time _____ Y/N _____

Menu	Temp/Del .	Temp./Svg	Comments	Activities During Visit
Entrée				<input type="checkbox"/> Site Monitoring
Starch:				<input type="checkbox"/> F/up visit _____ (date)
Vegetable/ Salad				<input type="checkbox"/> Volunteers/Staff Training
Dessert/ Fruit				Topic:
Milk:				
Other:				

1. Food Production/ Service	NO	Comments/Corrective Action	Completed by (date):
a. Food served same as menu			
b. Meal served on time			
c. Proper temperature maintained			
d. # of portions sent matches # ordered			
e. Meal: appealing, good flavor			
f. Seconds made available; clean plates used			
g. Leftovers appropriately utilized or discarded			
2. Sanitation and Safety			
a. Thermometers calibrated, documented			
b. Counter tops, serving surfaces cleaned/ sanitized			
c. Utility carts cleaned and sanitized			
d. Clean—sinks, floor, walls, ceilings, backsplashes			
e. Garbage cans clean, lined, handles clean			
f. Serving utensils, cutting boards, trays properly cleaned/ sanitized, air-dried, stored safely			
g. Light shield cleaned, no burned out light bulbs			
h. Stove, oven, microwave, can openers, drawers clean and in good repair			
i. Hood / vent clean and in good repair			
j. Floor drain free from any debris			
k. Pest control procedures available; screens in use			
l. Handwashing soap dispenser / single-use towels available. Hand washing sign posted.			
m. Ice Machine cleaned/sanitized, documented			
n. Sanitizer strips available, utilized and logged			
o. Signs posted advising re. not removing food			
p. Fire extinguisher/ hood certificates current		Dates:	
q. Cleaning schedules posted and followed			
r. Cleaning cloths clean / sanitized			
1. Refrigerator / Freezer			
a. Internal thermometers visible, working			
b. Food covered, labeled and dated, stored in appropriate containers			
c. Temperatures taken, logged daily			
d. All Title III C food stored separately			
e. Refrigerator clean, orderly, working order			
f. Freezer clean, orderly, defrosted, working order			
g. Food 6" off floor			
h. Maximum of 41 degrees (R) and 0° (F)			

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Site _____ Date _____ Score _____ Visit by Adult & Aging Services Dietitian

4. Areas	NO	Comments/Corrective Action	Completed by (date):
a. Kitchen orderly			
b. Service area clean, orderly			
c. Dining area clean, orderly			
d. Dining tables clean/ sanitized w/ proper cleaner			
e. Adequate space between tables/ seating			
f. First aid kit			
g. Areas accessible			
5. Dishwashing			
a. Proper procedures			
b. Minimum of 2 compartment sink			
c. Appropriate final rinse; wash/rinse temps			
d. Minimum water temp at warewash sink (120°)			
e. Minimum water temp at handwash sink (100°)			
6. Staff and Volunteers			
a. Personal appearance clean and neat			
b. Have hair restraints, aprons, appropriate shoes			
c. Proper food handling techniques			
d. Thermometer sanitized before use			
e. Appropriate hand washing, use of gloves			
f. No drinking, eating or chewing gum			
g. Using cleaned/ sanitized utensils			
h. Correct portions served			
i. Staff/ volunteer training –quarterly			
j. Use of cell phone appropriate for food safety			
k. Courteous with participants			
6. Dry Food Storage			
a. Clean and orderly.			
b. Food stored at least 6" above the floor.			
c. Food/ Non-food (chemicals) separated			
d. Opened packages stored in covered containers, labeled and dated.			
e. Maximum temperature of 70°F (recommended)			
7. Operations and Site Management			
a. Site manager interaction with participants			
b. Sufficient volunteers			
c. Contribution box accessible/ locked/ confidential			
d. Money handling procedure being followed			
e. Sign-in accurate vs. actual participants			
f. Monthly menus posted in dining room			
g. Nutrition education material available			
h. Understand procedure for food borne illness report			
i. Method for handling participant complaints			
j. ServSafe Manager certification completed/posted		Date/Name:	
k. Environmental Health reports – current/on file		Date:	
8. Compliance with CRFC			
a. SDS Sheets			
b. Restroom Signs			
c. No Smoking			
d. Lighting and ventilation acceptable			
s. Current Health Certificate/Permit posted			

Other Comments: _____

Signature: _____ Date _____ CC: _____

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