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### DEFINITIONS

**ALTCS:** Arizona Long Term Care System, refers to the state system of services provided to low income, elderly and disabled people.

**CNG:** Congregate program, refers to meals served to eligible participants at a senior center location.

**Contribution:** Term for revenue given voluntarily to the provider by participants or clients for meals or transportation.

**DES:** Arizona Department of Economic Security refers to the state agency overseeing the Aging and Adult Administration.

**FCG:** Family Caregiver program refers to a program funded through the Area Agency. The program provides a range of supports to assist family and informal caregivers to care for their loved ones at home for as long as possible.

**FY:** Fiscal Year; refers to the Area Agency on Aging fiscal year which runs from July 1 to June 30.

**HPR:** Health Promotion refers to services intended to protect and improve the health of community members.

**HDM:** Home Delivered Meals is a service that provides a nutritious meal to an individual, delivered to his/her place of residence.

**MCO:** Multipurpose Center Operations refers to non-meal related activities occurring within the senior center. The MCO Program Report tracks staff time spent planning and facilitating these activities.

**Provider Council:** A group chosen to be representative of the participants at multiple sites, tasked to provide guidance on a variety of matters. This representative body serves in an advising capacity without legal or corporate status.

**Project Income:** Revenue from contributions reported by provider on the monthly financial statement; source is contributions to all services from clients and participants. Refers to both the collection of contributions and the reporting category on a financial statement.
**DEFINITIONS (CONTINUED)**

<table>
<thead>
<tr>
<th>Provider:</th>
<th>Agency, non-profit, city, or town contracted with the Area Agency to provide direct service to clients.</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAIL:</td>
<td>Senior Adult Independent Living program refers to the Area Agency on Aging home and community based service system for elderly and physically disabled adults that help to maintain individuals in their own homes.</td>
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<tr>
<td>Pharos:</td>
<td>The computer program and database which contains information on all clients and participants.</td>
</tr>
<tr>
<td>Site Council:</td>
<td>A group chosen to be representative of the participants at a site, tasked to provide guidance on a variety of matters. This representative body serves in an advising capacity without legal or corporate status.</td>
</tr>
<tr>
<td>TSP:</td>
<td>A service that provides or assists eligible participants in obtaining transportation to and from the senior center facility.</td>
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ADMINISTRATION

PREFACE

The Area Agency on Aging, Region One funds senior centers to provide: Congregate Meals, Home Delivered Meals, Transportation, Multipurpose Center Operations, and Health Promotion activities. These services enhance the lives of older persons by assisting them in maintaining self-sufficiency, thereby preventing or reducing inappropriate or early institutional care.

PURPOSE

Standards Manual

To ensure quality senior center services, these standards have been developed to explain the operations and establish guidelines for the programs. All Providers funded by the Area Agency shall comply with these standards and requirements. Providers have a first responsibility to comply with the General Provisions, Special Provisions, Scopes of Work, and Service Specifications contained in their contract with the Area Agency.

The Standards Manual has been compiled from the Area Agency on Aging and Arizona DES - Aging & Adult Administration Scopes of Work for Congregate Meals, Home Delivered Meals, Multipurpose Center Operations, Transportation, and Health Promotion and the DES/DAAS Nutrition, Food Service and Wellness Manual. Area Agency assessments will be conducted in accordance with these standards and requirements.

GENERAL PROVISIONS

1. The senior services and programs are coordinated by the Area Agency on Aging, Region One, Inc. as provided by the Older Americans Act of 1965, Revised. The Older American’s Act defines the elderly as those persons who are 60 years of age and older (60+).

2. Each Provider shall seek out, identify, and target services to hard-to-reach, isolated elderly with greatest economic or social needs, with particular attention to low income and low-income minority elderly individuals.

3. In no case may a Provider operated by specific groups (i.e. churches, social organizations, homes for the elderly, or senior housing developments) restrict senior center participation to its own membership or otherwise show discriminating preference for such membership.
4. Each Provider, in connection with any service or other activity under contract with the Area Agency, shall not in any way discriminate against any client on the basis of race, color, religion, sex, national origin, age, disability, or political affiliation or belief.

5. The contract with the Area Agency may not include costs, planned or incurred, for religious or political activities.

6. Each Provider must retain all client service records and other documents relevant to the contract with the Area Agency for a period of five (5) years. Destruction of paper documents after the 5th year must be per contract requirements.

7. All advertisements, publications, and printed materials, which are produced by the Provider referring to contracted services, must identify that such services are funded in part by or in partnership with the Area Agency on Aging, Region One.

8. Providers must report to the Area Agency, in writing, all unusual incidents involving participants, clients, or staff within two (2) days of the incident. If the incident involves calling for 911 emergency assistance, the incident must be reported by telephone or fax within 24 hours to an Area Agency staff person. An unusual incident is defined as any potentially harmful or liable circumstance that occurs within the Provider’s facility or occurs while conducting services. An unusual incident would include but not be limited to medical situations or accidents, fights or major conflicts, or criminal actions.

9. Providers conducting any gambling related activity, (including Bingo, Loteria, and cards) that includes the exchange of currency and/or coin, must be licensed by the Arizona Department of Revenue for such activities.
**PROVIDER PERSONNEL**

**Staffing**

1. The Provider must employ adequate numbers of qualified staff to assure satisfactory performance of all contracted services.

2. The size of the Provider and the scope of services provided by the Provider will determine the number and type of full-time or part-time staff required. Such staffing patterns must include fiscal, administrative, programmatic, and clerical positions necessary for the management of each senior center.

3. Bilingual staff must be available when there are a significant number of participants who do not speak English.

4. Providers must have a designated director. The provider director must be empowered with the authority necessary to conduct the day-to-day operations and administrative management functions for the contract with the Area Agency.

5. Providers must provide volunteer opportunities for seniors and may also include other community citizens and students in as many aspects of the senior center operations as possible.

6. All staff and volunteer positions must have written job descriptions.

**Staff Training**

1. Each Provider must provide orientation and ongoing training for all staff and volunteers delivering Congregate, Home Delivered Meal, Transportation and Multipurpose Center Operation services. Such training must be designed to enhance staff and volunteer performance as related to the specific job responsibilities, to ensure quality services, and to ensure full contract compliance in all service areas. A training schedule should be developed annually, with documentation of each training session maintained.

2. All cooks must possess proper competencies and skills to provide adequate services at the sites through experience, training or certification. It is recommended that all cooks obtain a Food Manager’s certification. Continuing education should include attending seminars, food shows, and workshops.

3. Providers must comply with all Maricopa County Health Department certification requirements for staff and facility. All staff and volunteers that work directly with food must obtain a Maricopa County Health Department Food Handler's Card. Providers are responsible to provide training on Health Department and Area Agency food service requirements.

4. Provisions should be made for staff and volunteers to attend training sessions offered by the Area Agency and other organizations whenever feasible and appropriate.
**Physical Facility**

The following minimum requirements related to the physical facility and equipment of each site must be met by each senior center. Physical facilities must be maintained in accordance with all applicable federal, state, and local health, fire, safety, building, zoning, and sanitation laws, ordinances, and codes. All facilities must have a Permit to Operate from the Arizona Department of Health Services.

**Site**

1. Facilities must be free of architectural barriers that limit the participation of older individuals.
2. Adequate lighting must be provided in all areas of the facility.
3. Emergency and/or back-up lighting must be provided in areas of the facility without sufficient natural light.
4. Exits must be clearly marked.
5. Lighted exit signs must be in proper working order.
6. Exits must be kept free of obstacles and obstructions.
7. Equipment, including tables and chairs, must be sturdy and appropriate for older individuals.
8. Adequate aisle space must be provided between tables to allow persons with walkers, canes, or crutches to walk with ease and to accommodate wheelchairs.
9. A ramp must be available for wheelchairs where needed.
10. Steps, ramps, and sidewalks must be kept in good condition.
11. Stairs must have handrails.
12. Floors must be kept dry and free from debris.
13. The facility should be cleaned daily.

**Safety**

1. Required fire and health inspections must be obtained annually and posted for public review. Senior centers must comply with all corrective action identified by inspectors.
2. Written evacuation plans must be developed, posted, and explained to all staff and participants.
3. Emergency Evacuation (fire) drills must be held at least quarterly. Depending on recommendations from the local fire authority, drills may not include a complete building evacuation. Participants must receive instruction on the closest exits, the designated meeting place, and safe evacuation procedures. All provider staff members at the site should participate. Drills must be documented on a provider report log.

4. Room capacity signs must be posted and room occupancy must be kept at or below the authorized number.

5. Fire extinguishers must be inspected annually, readily accessible, and fully charged at all times.

6. All staff must be trained in the use of fire extinguishers.

7. The site address and emergency phone numbers must be posted on/near all telephones.

8. All staff must be trained on how to respond at the first sign of a serious problem or emergency.

9. Provider must ensure there is always at least one staff member present who is certified in First Aid and Cardiopulmonary Resuscitation (CPR).

10. All sites must have a fully stocked, easily accessible first aid kit.

11. Portable hazard signs must be used for temporary hazards (i.e. wet floors).

**Restroom Safety**

1. At least one toilet stall must be wheelchair accessible and equipped with grab bars.

2. The locks in the stalls must be easy to manipulate and in proper working order.

3. Soap dispensers, disposable towels and/or air-drying devices must be accessible to individuals with disabilities.

4. Restrooms must be thoroughly cleaned daily.
CONTRIBUTION POLICIES

1. Each Provider shall create the opportunity for participants to make a voluntary and confidential contribution for congregate meals, home delivered meals, and transportation services.

   PLEASE NOTE: Clients receiving home delivered meals under the funding source of ALTCS should not be asked to contribute. Due to program requirements specific to ALTCS funding, these clients should be excluded from all solicitations.

2. Participant contributions are included as revenue in the contracted budget with the Area Agency. Contribution revenues must be used and reported for the specific service program for which it was given within each month received.

3. Suggested contribution amounts for each service must be reviewed annually by the site council and revised as needed. When conducting the annual review, site councils should take into consideration the economic status of the participants, contribution averages and patterns, and the efforts taken to encourage contributions. A copy of the minutes, which includes the annual site council’s review of the suggested contribution for each service, must be kept on file and made available to the Area Agency when requested.

4. Eligible participants shall be encouraged to contribute, but may not be denied participation in programs because of their inability or unwillingness to contribute.

5. Persons volunteering at the center are still encouraged to contribute.

6. Providers shall periodically remind participants of the value of contributions to the services and programs. The senior center should take a variety of approaches to continually encourage contributions for all services.

7. Home delivered meal clients must be given written contribution procedures (except for ALTCS clients). Written contribution information must be made available to congregate meal and transportation participants.

8. Suggested contribution posters shall be posted on/near the sign-in desk, on the contribution boxes, and at other strategic locations throughout the senior center.

9. The Provider must arrange for confidential methods for participants to make contributions. The procedures must ensure that participants will not be pressured by staff, volunteers, or other participants to contribute. Participants should be encouraged to give what they can, whether it is higher or lower than the suggested amount.
10. Upon request from participants, Providers shall provide receipts for contributions. However, the Provider may not maintain individual participant records, nor evaluate the contribution habits of individuals.

The following procedures must be used for the collection, handling, counting, and depositing of contributions:

a. Contribution boxes must be locked and opaque. There should be separate boxes for congregate and transportation contributions. Envelopes should be available.

b. Home delivered meal clients should be provided envelopes to ensure that their contribution is confidential.

c. Two persons, simultaneously, must count the daily contributions. Both persons should sign reports and records.

d. Records must be kept separately for each service: congregate meals, home delivered meals, and transportation.

e. Bank deposits should be made frequently to avoid having large sums of cash on hand.

11. All guests and staff (less than 60 years old) who eat lunch at the senior center must pay the full cost of the meal. The price of the meal for guests/staff must be posted on/near the sign-in desk of each senior center. The guest fee for meals must be established by the Provider based on the fair, full cost of the meal. Guest meal fees are not subject to site council review or action.

12. Transportation tickets/rides may not be used by guests/staff less than 60 years old. All individuals using transportation tickets/rides must be registered in Pharos as a participant at the senior center.
EQUIPMENT

1. "Equipment" is considered any single item costing $5,000 or more as set by the contract with the Area Agency.

2. Equipment purchases should be made after obtaining three price quotes. Quality, longevity and warranty programs should be considered when reviewing and accepting bids. Documentation of all bids and justification(s) for the bid accepted must be maintained by the provider.

3. All equipment purchased with Area Agency funds must be specifically approved and must be reported on the Monthly Financial Report. Copies of the original invoices with corresponding serial number for each piece of equipment must be submitted with the billing.

4. All equipment must be maintained in good working condition.

5. Providers must participate in the annual equipment audit with Area Agency staff. Providers must maintain a list including verification of status and location of all equipment.

6. Provider may not dispose of, transfer, donate, or sell any equipment without written consent from the Area Agency.


**FOOD SERVICE**

**MEAL STANDARDS**

Each meal served must contain at least ⅓ of the current Daily Reference Intake (DRI) as established by the Food and Nutrition Board of the National Academy of Science-National Research Council. Nutrition is an important factor in the continuing health and independence for older adults; therefore, the following guidelines will ensure high quality meals. These guidelines are for programs providing congregate and home delivered meals under Title IIIc of the Older Americans Act, Revised. Meals must contain an average of 650 calories (between 500-800 calories for each meal), and 500-800mg of sodium.

Meat / Protein Group: Two to three (2-3) ounces cooked edible portion of meat, fish, fowl, luncheon meats, eggs, or cheese per meal. The recommended serving size is three ounces; however dishes such as casseroles, stews, and lasagna might include just two ounces in a reasonable portion. Additional protein foods may be included for variety such as dried beans and peas, nuts, peanut butter, etc. (See next section called Food Sources)

Vegetables: Two (2) ½ cup servings for a total of 1 cup of vegetables per meal that could include all vegetables, vegetable blends, and full strength vegetable juices. The vitamin A and C requirements must also be considered when making selections. A week of menu items must include a total of 10 vegetables selected as follows:

- Two to three from **dark green vegetables**: spinach, mustard greens, kale, broccoli, romaine lettuce, Brussels sprouts, and bell peppers.
- One to two from **orange/deep yellow vegetables**: carrots, yams, sweet potato.
- Two to three from **legumes**: peas, lentils, pinto beans, navy beans.
- Two to three from **starchy vegetables**: acorn squash, yams, sweet potato, corn, peas, potatoes.
- Two to three from **other vegetables**: summer squash, zucchini, green beans, wax beans, cauliflower, tomatoes.

Garnishes, salsa, condiments, and chips do not satisfy the vegetable requirement.

Fruits: One (1) ¾ cup serving (approximately 5-6 ounces) daily. Fresh fruit in season is preferred over canned items. Canned items should not include added sugar.

Whole Grains: One serving per meal for a total of two ounces (could include one 2-ounce item or two 1-ounce items) selected from the following:

- **Whole grain foods**: including oats, barley, rye, wheat germ, flax seed, bulgur wheat, quinoa.
- **Rice**: preferred selection is whole grain brown or wild rice.
- **Bread**: preferred selection is whole wheat/grain bread, whole wheat or corn tortillas.
- **Other foods containing grains could be included, such as**: pastas, oatmeal cookies, fruit shortcake, fruit cobbler using oatmeal or whole grain flour, bread pudding, and other baked goods using whole grain flour.
Desserts: Can be served as a meal extra but is not required. Desserts could include fruit (at least ¾ cup would meet the daily fruit requirement), or other items (i.e. pudding, gelatin with fruit, ice cream, sherbet, etc.). The dessert can include one or two 1-ounce whole grain servings to meet the grain requirement. Cake, pie, cookies and similar baked items may be included occasionally, not to exceed one time per week.

Milk Group: One (1) ½ pint (8 ounces) per meal. Milk may include vitamin A and D fortified skim, 2 %, 1%, chocolate or buttermilk.

Vitamin Requirements: Foods rich in vitamin C must be served each meal and foods rich in vitamin A must be served four (4) times a week. Sources may be from one item or combination of two or more foods. Vitamin/mineral supplements may not be given. (See next section called Food Sources)

Fortified Margarine: One (1) teaspoon may be used in the cooking process or served with the meal. Margarine should be non-hydrogenated.

Optional Beverages: Water, coffee, tea and other decaffeinated beverages should be offered.

Iodized Salt: Salt should be used only sparingly in cooking, seasoning with more herbs and spices. All salt must be iodized.

**Food Sources:**

Meat / Protein Sources: Required serving is two to three (2-3) ounces cooked edible portions and may include the following one (1) ounce equivalents to help meet the requirement.

1-Ounce Protein
1 large egg (2 medium)
1 ounce cheese slice
½ cup cooked dried beans, peas, or lentils
2 tablespoons peanut butter
¼ cup cottage cheese
**Vitamin C Sources:**

The optimal sources of vitamin C supply at least one-third of the DRI. Serving size is usually a total of \( \frac{1}{2} \) cup and must be offered daily as a single food or a combination of two or more foods.

Fruits: cantaloupe, honeydew, watermelon, oranges, mandarin oranges, kiwi, tangerines, blackberries, raspberries, strawberries, peaches (frozen only), mangos, pineapple, papaya.

Juices: (4 fluid ounces) 100% cranberry, orange, pineapple, grapefruit, tomato and vegetable.

Vegetables: asparagus, broccoli, cauliflower, cabbage, coleslaw, Brussels sprouts, spinach, tomato (medium sized), pea pods, greens (beet, chard, collard, turnip, kale), peppers (green, red, yellow), lima beans, fresh potatoes (skin on), boxed/commercial potatoes, fortified with vitamin C.

Other Foods: liver (3 ounce edible portion), Spanish rice made with tomatoes

To conserve vitamin C in cooking use as little water as possible, steam vegetables, cover pan and do not overcook. Vitamin C is destroyed by heat and light.

Identify the daily vitamin C foods on the menu worksheet with a “(C)” behind the item for approval by the contracted Nutritionist.

**Vitamin A Sources:**

The optimal sources of vitamin A supply one-third of the DRI. Serving size is usually \( \frac{1}{2} \) cup for vegetables and \( \frac{3}{4} \) cup for fruits, and must be offered four (4) times a week as a single food or a combination of two or more foods.

Fruits: apricots, cantaloupe, pumpkin, mango, papaya.

Juices: (4 fluid ounces) full strength apricot nectar, tomato and vegetable.

Vegetables: carrots, broccoli, spinach, hubbard or acorn squash, peas & carrots, sweet potatoes/yams, greens (beet, chard, collard, kale, mustard, turnip), rutabaga.

Other Foods: liver, liverwurst, whitefish (3 ounces).

Identify the daily vitamin A foods on the menu worksheet with a “(A)” behind the item for approval by the contracted Nutritionist.

**Combining Food Groups:**

Food groups can always be combined into one menu item as long as the serving size is the mathematical equivalent of the individual requirement. Examples include:

- Protein and Vegetable: 2-3 ounces + \( \frac{1}{2} \) cup
- Whole grain and Fruit: 1-2 ounces + \( \frac{3}{4} \) cup
- Vegetable and whole grain: \( \frac{1}{2} \) cup + 1-2 ounces
MENU REQUIREMENTS

Menu Approval Process

1. Menus are divided into two (2) major cycles; Spring/Summer (April – September) and Fall/Winter (October – March). Lighter meals like entrée salads should be offered in the warmer weather and heartier foods in the cooler weather. The requirement is to submit a six (6) week menu twice a year to the Area Agency Contract Specialist and contracted Nutritionist for approval.

2. Menus must be approved in advance by the Area Agency contracted Nutritionist. The Nutritionist will make recommendations to ensure compliance with the Meal Standards. The deadline dates that menus are due to the Nutritionist and the date beginning the next cycle are as follows:

<table>
<thead>
<tr>
<th>Menu due</th>
<th>Menu Approved By</th>
<th>Start Date of Menu</th>
</tr>
</thead>
<tbody>
<tr>
<td>August 31</td>
<td>September 30</td>
<td>October 1</td>
</tr>
<tr>
<td>February 28</td>
<td>March 31</td>
<td>April 1</td>
</tr>
</tbody>
</table>

Menu Planning Guidelines

1. Prior to planning the menu, staff is encouraged to conduct a formal or informal survey of participants’ likes and dislikes, i.e. site council, nutrition committee, menu planning sessions, suggestion box and surveys. Home delivered meal participants must be included in this process.

2. One staff member at each site must successfully complete a Certified Food Manager course and participate in on-going training.

3. Menus should be planned to provide a variety of color, form, texture, temperature, flavor and cultural customs.

4. Fresh fruits and vegetables should be used when in season to provide optimal nutrition and be cost efficient.

5. Do not repeat the same flavor too often, in the same meal, or the same week. Example: stewed tomatoes should not be the vegetable served with spaghetti. Lasagna and spaghetti should not be served in the same week.

6. Do not serve the same food two days in a row or the same day two weeks in a row.

7. Limit fried foods to no more than two (2) times in the six (6) week cycle. A program that offers two (2) or more menu choices daily may include fried foods up to four (4) times in the menu cycle. Plan menus that are low in salt, sugar, and fat.

8. Limit processed meats (i.e. ham, hot dogs, sausages, lunchmeats, chicken/turkey rolls) to no more than three (3) times in a six (6) week cycle. High fat cheeses and meats as entrees should be used one (1) time in the six (6) week cycle.
9. Reduce the use of sodium/salt.

10. Ground meat should be lean and not be used more than 2 times in a week.

11. Mixed green salads should include a variety of lettuces, greens, and at least three (3) additional vegetables, four (4) vegetables total. Do not serve only iceberg lettuce as a salad. Identify the specific salad vegetables on the menu (i.e., tossed salad with tomatoes, cucumbers, and carrots).

12. Limit gelatin, pudding, frozen desserts, yogurt to once (1) weekly. Gelatin may not be served plain; it must contain fruit, fruit juice, or vegetables to provide appropriate nutritional value. Identify the gelatin on the menu as “Fruited Gelatin.” Do not use the term “Jell-O,” as this is a brand name.

13. Always consider the highest nutritional values for each menu item:
   - whole grain breads, rolls, muffins, and biscuits
   - fresh fruits at least weekly
   - fresh fruits and vegetables instead of canned or frozen

14. No meal shall include more than three (3) high carbohydrate items including dessert.

15. Limit baked desserts to one (1) time a week. Nutritious baked desserts include peanut butter and oatmeal raisin cookies, apricot cobbler, pumpkin pie, custard, carrot cake, pineapple upside-down cake, rice crispy squares, lemon pie, and strawberry shortcake. Substituting fruit juice for water in the mix or recipe will increase the nutritional value.

16. Any variety of chips (potato, corn, tortilla etc.) does not count as a vegetable or bread serving, and can only be offered in addition to the meal standard.

17. If a three-compartment container is used for home delivered meals, plan to fill each compartment. The third compartment can be filled with a ¼ cup hot fruit, vegetable or hot bread. This provides better temperature retention and adds visual and aesthetic appeal.

18. Consider food costs, cooks’ skills and production considerations when planning menus. Obtain volume cookbooks or computer software like “Food for Fifty” to assist with planning and provide recipes.

19. The meal presentation is equally important, use garnishes such as parsley, kale, a lemon or an orange slice, a tomato wedge, a melon slice, etc.

20. Plan each Monday menu with foods that do not require advance preparation (i.e. gelatin, baked dessert).

21. The current Area Agency approved menu must be posted in the kitchen. Post menus in all cooking kitchens as well as the catered kitchens.

22. Monthly menus should be posted/distributed one week in advance.
23. Menus and Menu Change Reports must be available for audit purposes and kept on file for at least five years.

Menu Substitution

Menu substitutions should only occur because of the following situations:

- the food item planned for that meal is of poor quality and cannot be served
- food item not available
- fresh food item becomes available unexpectedly
- utilize overstocked items
- special occasion or holiday meals

All substitutions must be documented on the Menu Substitution Report and on the menu. The filed menu must indicate the meal as served. Substitutions must meet the Meal Standard requirements.
FOOD PROCUREMENT GUIDELINES

All providers serving congregate and/or home delivered meals must adhere to the regulations and standards outlined in the Arizona Department of Economic Security Nutrition, Food Service and Wellness Manual.

Site Prepared Food Procurement

The following standards apply only to those senior centers that have on-site food preparation. This would include a provider that prepares food at one center (central kitchen) then transports the food to other senior center(s).

1. Periodic price quotes should be compared between vendors.

2. Food deliveries must be checked for accuracy and quality of products before receiving.

3. Food purchasing procedures must ensure that raw food costs remain at the level established in the contract with the Area Agency.

Catered Food Procurement

The following standards apply only to those senior centers receiving commercially catered meals. This would not include a provider that prepares food at one center (a central kitchen) then transports to other site(s).

1. Providers receiving catered food from an independent caterer must conduct a bidding process prior to contracting with a caterer. A copy of the subcontract with the caterer must be sent to the Area Agency annually.

2. The temperatures of all hot and cold foods must be taken and recorded upon delivery. It is recommended that hot foods be 165° F or above; cold foods 40° F or lower. These temperatures must be kept on file and reviewed periodically for compliance.

3. Catered hot foods received with temperatures below 140° F must immediately be reheated to 165° F, and must not be served until the temperature is reached.

Donated Foods

All food contributions must be from an approved source, such as grocery stores and food vendors. Meat must be federally inspected and milk must be pasteurized and homogenized. Do not accept any food that is grown, prepared or packaged at home, cans that are expired, bulging, dented, leaking or rusty, food with an off-odor, or any food which shows signs of mold or spoilage.
**FOOD STORAGE**

1. Internal thermometers must be used to monitor daily temperatures in the freezers and refrigerators. External integral digital thermometers on refrigerators and freezers are not acceptable. A separate thermometer must be placed inside the unit at a place near the door to ensure acceptable temperatures. Thermometers should be calibrated regularly.

2. Storage temperature standards (in Fahrenheit):
   - ✓ Storeroom: between 40° F and 70° F
   - ✓ Refrigerator: between 32° F and 40° F
   - ✓ Freezers: 0° F or below

3. Food items must be rotated to use in order of date purchased, First in First Out (FIFO).

4. Food items and paper good must be stored at least 6” off the floor in dry storage, refrigerators, and freezers.

5. All chemicals and cleaning equipment must not be stored near food or food preparation equipment and must be labeled.

6. Arts & crafts and other program supplies must not be stored in food storage areas.

7. Food removed from their original containers must be labeled.

8. All dented cans should be removed.

9. Follow proper cold/frozen food storage procedures.
## Table 1
### Food Storage Guide

**Refrigerated Storage of Foods**
Sources: Tyson, Egg Board, Safe Food Storage Times and Temperatures by Mar L. Tamplin, Ph.D.

**Recommended Product Temperatures**
35°F to 41 F (2 C to 5°C)

<table>
<thead>
<tr>
<th>Food</th>
<th>Maximum Storage Periods</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meat</td>
<td></td>
</tr>
<tr>
<td>Roasts, steaks, chops</td>
<td>2 to 5 days</td>
</tr>
<tr>
<td>Steaks</td>
<td>2 to 5 days</td>
</tr>
<tr>
<td>Chops</td>
<td>3 to 4 days</td>
</tr>
<tr>
<td>Ground and stewing</td>
<td>1 to 2 days</td>
</tr>
<tr>
<td>Variety meats</td>
<td>1 to 2 days</td>
</tr>
<tr>
<td>Whole ham</td>
<td>7 days</td>
</tr>
<tr>
<td>Half ham</td>
<td>3 to 5 days</td>
</tr>
<tr>
<td>Ham slices</td>
<td>3 to 5 days</td>
</tr>
<tr>
<td>Canned ham</td>
<td>9 months to 1 year</td>
</tr>
<tr>
<td>Frankfurters</td>
<td>1 week</td>
</tr>
<tr>
<td>Bacon, unopened</td>
<td>5 to 7 days</td>
</tr>
<tr>
<td>Luncheon meats</td>
<td>3 to 5 days</td>
</tr>
<tr>
<td>Leftover cooked meats</td>
<td>1 to 2 days</td>
</tr>
<tr>
<td>Gravy, broth</td>
<td>1 to 2 days</td>
</tr>
</tbody>
</table>

**Poultry**
Whole chicken, turkey, duck, goose
Giblets                1 to 2 days
Stuffing               1 day
Cut-up cooked poultry  1 to 2 days

**Fish**
Fresh fish             1 to 2 days
Fish (smoked)          1 to 2 days
Clams, crab, lobster (in shell) 2 days
Scallops, oysters, shrimp 1 day

**Eggs**
Eggs in shell          4 to 5 weeks beyond pack date
Leftover yolks          1 to 2 days
Leftover whites         4 days
Reconstituted dried eggs Use immediately
Cooked Dishes with eggs, meat, milk, Serve day prepared

**Dairy Products**
Fluid milk             5 to 7 days after date on container
Butter                 2 weeks
Hard cheese            1 month
(cheddar, parmesan, romano) 1 week
Soft cheese            1 week
Reconstituted dry milk 1 week

### Frozen Storage of Foods
Sources: Tyson and Safe Food Storage Times and Temperatures by Mar L. Tamplin, Ph.D.

**Recommended Product Temperatures**
0 to 10°F (-12 C to -18°C)

<table>
<thead>
<tr>
<th>Food</th>
<th>Maximum Storage Periods</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meat</td>
<td></td>
</tr>
<tr>
<td>Beef, roasts and steaks</td>
<td>6 to 9 months</td>
</tr>
<tr>
<td>Beef, ground and stewing</td>
<td>3 to 4 months</td>
</tr>
<tr>
<td>Pork, roasts and chops</td>
<td>4 to 8 months</td>
</tr>
<tr>
<td>Pork, ground</td>
<td>2 months</td>
</tr>
<tr>
<td>Lamb, roasts and chops</td>
<td>6 to 9 months</td>
</tr>
<tr>
<td>Lamb, ground</td>
<td>3 to 5 months</td>
</tr>
<tr>
<td>Veal</td>
<td>8 to 12 months</td>
</tr>
<tr>
<td>Variety meats</td>
<td>3 to 4 months</td>
</tr>
<tr>
<td>Ham, frankfurters, bacon, luncheon meats</td>
<td>2 weeks</td>
</tr>
<tr>
<td>Leftover cooked meats</td>
<td>2 to 3 months</td>
</tr>
<tr>
<td>Gravy, broth</td>
<td>2 to 3 months</td>
</tr>
<tr>
<td>Sandwiches with meat filling</td>
<td>1 to 2 months</td>
</tr>
</tbody>
</table>

**Poultry**
Whole chicken, turkey, duck, goose
Giblets                12 months
Cut-up cooked poultry  4 to 6 months

**Fish**
Fresh fish             2 to 3 months
Frozen fish            3 to 6 months
Clams, lobster         3 months
Scallops, shrimp       3 months

**Ice Cream**
3 months; original container;
Quality is maintained better at 10 F (-12°C)
# Table 2

## Shelf Life of Dried Goods

<table>
<thead>
<tr>
<th>Food</th>
<th>Recommended Maximum Storage Period if Unopened</th>
<th>Food</th>
<th>Recommended Maximum Storage Period if Unopened</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Baking Materials</strong></td>
<td></td>
<td><strong>Grains and Grain Products</strong></td>
<td></td>
</tr>
<tr>
<td>Baking powder</td>
<td>8 to 12 months</td>
<td>Cereal grains</td>
<td>6 months</td>
</tr>
<tr>
<td>Baking soda</td>
<td>2 years</td>
<td>Cereals, ready-to-eat</td>
<td>6 to 12 months</td>
</tr>
<tr>
<td>Chocolate, baking</td>
<td>6 to 12 months</td>
<td>Macaroni, spaghetti, and other dry pasta</td>
<td>2 years</td>
</tr>
<tr>
<td>Chocolate, sweetened</td>
<td>2 years</td>
<td>Rice, white</td>
<td>2 years</td>
</tr>
<tr>
<td>Cornstarch</td>
<td>2 to 3 years</td>
<td>Rice, flavored or herb</td>
<td>6 months</td>
</tr>
<tr>
<td>Flour, bleached</td>
<td>6 to 8 months</td>
<td><strong>Seasonings</strong></td>
<td></td>
</tr>
<tr>
<td>Flour</td>
<td>6 to 8 months</td>
<td>Flavoring extracts</td>
<td>2 years</td>
</tr>
<tr>
<td>Dry milk (nonfat), unopened</td>
<td>1 year</td>
<td>Monosodium glutamate</td>
<td>indefinite</td>
</tr>
<tr>
<td>Yeast, dry (whole eggs and yolks)</td>
<td>18 months</td>
<td>Mustard, prepared</td>
<td>2 to 6 months</td>
</tr>
<tr>
<td>Beverages</td>
<td></td>
<td>Salt</td>
<td>indefinite</td>
</tr>
<tr>
<td>Coffee, cans</td>
<td>2 years</td>
<td>Sauces (steak, soy, etc.)</td>
<td>2 years</td>
</tr>
<tr>
<td>Coffee, ground, not vacuum packed</td>
<td>8 to 12 months</td>
<td>Spices and herbs (whole)</td>
<td>2 years to indefinite</td>
</tr>
<tr>
<td>Coffee, instant</td>
<td>8 to 12 months</td>
<td>Paprika, chili powder, cayenne</td>
<td>1 year</td>
</tr>
<tr>
<td>Tea, bags</td>
<td>1 year</td>
<td>Seasoning salts</td>
<td>1 year</td>
</tr>
<tr>
<td>Tea, loose</td>
<td>12 to 18 months</td>
<td>Vinegar</td>
<td>2 years</td>
</tr>
<tr>
<td>Tea, instant</td>
<td>8 to 12 months</td>
<td><strong>Sweeteners</strong></td>
<td></td>
</tr>
<tr>
<td>Canned Goods</td>
<td></td>
<td>Sugar, granulated</td>
<td>2 years</td>
</tr>
<tr>
<td>Fruits (in general)</td>
<td>1 year</td>
<td>Sugar, confectioners</td>
<td>18 months</td>
</tr>
<tr>
<td>Fruits, acidic (citrus, berries, sour cherries)</td>
<td>6 to 12 months</td>
<td>Sugar, brown</td>
<td>4 months</td>
</tr>
<tr>
<td>Fruit juices</td>
<td>6 to 9 months</td>
<td>Syrupa, corn, honey, molasses, sugar</td>
<td>1 year</td>
</tr>
<tr>
<td>Seafood (in general)</td>
<td>1 year</td>
<td><strong>Miscellaneous</strong></td>
<td></td>
</tr>
<tr>
<td>Pickled fish</td>
<td>4 months</td>
<td>Dried beans</td>
<td>1 to 2 years</td>
</tr>
<tr>
<td>Soups</td>
<td>1 year</td>
<td>Cookies, crackers</td>
<td>1 to 6 months</td>
</tr>
<tr>
<td>Vegetables (in general)</td>
<td>1 year</td>
<td>Dried fruits</td>
<td>6 to 8 months</td>
</tr>
<tr>
<td>Vegetables, acidic (tomatoes, sauerkraut)</td>
<td>7 to 12 months</td>
<td>Dried prunes</td>
<td>6 months</td>
</tr>
<tr>
<td>Dairy Foods</td>
<td></td>
<td>Relish</td>
<td>2 to 3 years</td>
</tr>
<tr>
<td>Cheese, parmesan (grated)</td>
<td>10 months</td>
<td>Ketchup</td>
<td>1 month</td>
</tr>
<tr>
<td>Milk condensed</td>
<td>1 year</td>
<td>Jams, jellys</td>
<td>1 year</td>
</tr>
<tr>
<td>Milk, evaporated</td>
<td>1 year</td>
<td>Nuts</td>
<td>6 months</td>
</tr>
<tr>
<td>Non-dairy creamer</td>
<td>9 months</td>
<td>(whole or packaged meats)</td>
<td></td>
</tr>
<tr>
<td>Fats and Oils</td>
<td></td>
<td>Potato chips</td>
<td>1 month</td>
</tr>
<tr>
<td>Mayonnaise</td>
<td>2 months</td>
<td>Pickles, relishes</td>
<td>1 year</td>
</tr>
<tr>
<td>Shortening, solid</td>
<td>8 months</td>
<td><strong>Miscellaneous</strong></td>
<td></td>
</tr>
<tr>
<td>Salad dressings</td>
<td>10 to 12 months</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Salad oil</td>
<td>6 to 9 months</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

This table is a general guideline for best product quality and overall safety. Where applicable, always use any product by use-by date marked on package, if purchase date is unknown, or if quality or safety is compromised in any way, discard product.
**FOOD PREPARATION**

1. Standardized recipes must be utilized in the preparation of all foods. Obtain volume cookbooks or software programs like “Food for Fifty” to assist with planning and provide recipes.

2. Food preparation procedures must be designed to maximize labor, equipment, and time efficiency.

3. Frozen foods should not be thawed at room temperature but be thawed in the refrigerator, in the microwave or under cold running water.

4. Preservation of nutrients must be considered when preparing, serving, holding, and storing food.

5. The holding time from cooking to service should not exceed two (2) hours.

6. See Table 3 for a summary of minimum cooking temperatures.

---

**Table 3**

**MINIMUM COOKING TEMPERATURES**

<table>
<thead>
<tr>
<th>ITEM</th>
<th>TEMPERATURES</th>
</tr>
</thead>
<tbody>
<tr>
<td>POULTRY (whole or ground chicken, turkey and duck)</td>
<td>165° F</td>
</tr>
<tr>
<td>BEEF/PORK (steaks, chops and roasts)</td>
<td>145° F</td>
</tr>
<tr>
<td>GROUND BEEF/PORK (sausage)</td>
<td>155° F</td>
</tr>
<tr>
<td>FISH FILETS</td>
<td>145° F</td>
</tr>
<tr>
<td>EGGS EGG DISHES/CASSEROLES</td>
<td>Cook until yolk and white is firm 155° F</td>
</tr>
<tr>
<td>REHEATED FOODS</td>
<td>165° F</td>
</tr>
<tr>
<td>MICROWAVE COOKING</td>
<td>165° F</td>
</tr>
</tbody>
</table>
**Leftover Food**

1. Food production should result in minimal leftovers. Leftover food should first be offered as second helpings to participants. Those sites with the flash/quick freezer, should use the complete meal leftovers to create the frozen home delivered meals.

2. All leftover hot or potentially hazardous foods at catered sites must be discarded.

3. The only hot foods acceptable as leftovers are vegetables and meats. They should not be re-used as the original product. Most can be used in soups or casseroles (i.e. leftover roast beef may be made into soup; it may not be served again as a roast). Menus should be followed when using leftovers or a menu substitution may be made.

4. No starch foods should be re-used as they do not maintain good quality when re-heated; i.e. potatoes, noodles, pasta, and rice. Do not save or re-use fish or eggs. Foods not appropriate to re-use must be discarded.

5. Leftover food should be properly stored, sealed, and labeled with the following:
   - Name of the food
   - Date food was prepared
   - Date of discard
   
   Example: Green Beans 5/21, 5/24

6. Cottage cheese containers, pickle jars or like containers may not be re-used to store other foods.

7. Leftover food may not be stored longer than three (3) days in refrigerator or three (3) months in freezer.

8. Food prepared for the congregate meal program may not be taken out by staff or participants (except intact fresh fruit or baked goods by participants). Staff may not take any food from the site.
MEAL PORTION CONTROL

Meal Standard:

- 2-3 ounces cooked edible meat or alternate equivalent
- 2 servings (a total of 1 cup) of vegetables
- 1 serving (3/4 cup or 5-6 ounces) of fruit
- 2 ounces whole grain items
- 1 tsp butter/margarine or alternate (if appropriate)
- ½ pint milk (8 ounces)

1. Senior centers must ensure that the portions meet the meal standard. Correct serving utensils should be used. (See Table 4: Portion Control for further information on scoop and ladle sizes.)

2. Serving scoops/dishers are marked with a number that indicates the measurement. The higher the number, the smaller the amount. Spoodles and ladles are marked with ounces.

TABLE 4: PORTION CONTROL

<table>
<thead>
<tr>
<th>SCOOPO/DISHER NO.</th>
<th>APPROXIMATE</th>
<th>MEASUREMENT</th>
<th>FOOD</th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
<td>6 oz.</td>
<td>2/3 cup</td>
<td>casseroles</td>
</tr>
<tr>
<td>8</td>
<td>4 oz.</td>
<td>1/2 cup</td>
<td>vegetables/fruits</td>
</tr>
<tr>
<td>12</td>
<td>2-1/2 oz.</td>
<td>1/3 cup</td>
<td>extra item</td>
</tr>
<tr>
<td>16</td>
<td>2 oz.</td>
<td>1/4 cup</td>
<td>cottage cheese</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>LADLE</th>
<th>MEASUREMENT</th>
<th>FOOD</th>
</tr>
</thead>
<tbody>
<tr>
<td>8 oz.</td>
<td>1 cup</td>
<td>casseroles/soups</td>
</tr>
<tr>
<td>6 oz.</td>
<td>2/3 cup</td>
<td>casseroles (2 items)</td>
</tr>
<tr>
<td>4 oz.</td>
<td>1/2 cup</td>
<td>vegetables/fruits</td>
</tr>
<tr>
<td>2 oz.</td>
<td>1/4 cup</td>
<td>gravy/sauces</td>
</tr>
</tbody>
</table>

3. RAW MEAT: Meats will shrink 25% in cooking. Plan to purchase a 4-ounce raw amount to yield a 3-ounce portion. Poultry, 1 leg and 1 thigh yield 3-4 ounce portion. Pork chops with bone, 1 lb. will yield 2 portions.

4. CASEROLE: A casserole combining meat and one other item (vegetable or noodle or pasta etc.) would require a 6-ounce ladle/scoop. A casserole with 3 items would require an 8-ounce spoodle or ladle (beef stew with beef, potatoes, and carrots).

5. Entrée soups require an 8-ounce portion. A vegetable or other soup requires a 6-ounce portion.

6. Ladles are used for liquid foods like soups, gravy, and sauces. Slotted spoodles should be used for vegetables, noodles, and pasta to eliminate the excess liquid.
SANITATION

1. Non-disposable glassware, dishes, and silverware should be used when a 3-compartment sink or dish machine is available.

2. Proper use of a 3 compartment sink includes:
   - Sink #1 – washing
   - Sink #2 – rinsing
   - Sink #3 – sanitizing.
   All items should always be air-dried.

3. Dirty dishes must not be returned through the same window where food is served.

4. All floors in the kitchen and dining area must be swept and mopped daily.

5. The kitchen and dining areas must remain free of flies and insects.

6. Range hood filters must be removed and thoroughly cleaned monthly.

7. All windows and outside door openings must be effectively screened and/or self-closing. Openings should be protected by fly fans or pest control equipment.

8. The building must be serviced by a pest control company at least monthly.

9. The hand-washing sink in the kitchen must contain a soap dispenser, single use towels, and a foot operated closed waste container. A hand washing procedure sign must be posted at the sink.

10. All food service and volunteer staff must maintain a Food Handler’s Card. The original cards must be posted in the kitchen area. Cards must be obtained within 30 days of hire. One staff member is required to hold a Food Manager Certificate that must also be posted in the kitchen area.

11. State and local fire, health, sanitation, and safety regulations applicable to the particular types of food preparation and delivery system must be followed.

12. The Maricopa Health Department Permit to Operate and recent Environmental Services inspection report must be posted.
FOOD SERVICE FORMS

Menu Worksheet

The menu worksheet, designed on the provided Microsoft Excel template, must be submitted to the Area Agency twice a year as described in the menu approval process.

1. All congregate and home delivered meals provided by Area Agency contracted senior centers must be in accordance with menu standards and guidelines.

   Of secondary importance is to have a record on file of the menu “as served” for each meal should there be a question or issue about the food.

2. Be specific and detailed about the menu items. For example; instead of “Chicken”, identify “Lemon Baked Chicken”; instead of “Potato”, identify “Baked or Mashed Potato”.

Margarine: This is an optional serving. The fat may be used in cooking, as a salad dressing, tartar sauce or mayonnaise. Do not serve if there is nothing to put it on, no grain item or cooked vegetable.

Extras: This category is for the garnish and other items provided with the meal that do not count in the menu standard. This would include sliced tomato, lettuce, and pickle for a hamburger or any variety of chips.

Menu Change Report

Copies of all Menu Change Reports should be kept on file at the site, available for review by Area Agency staff.

1. If a menu item will not be served, then it must be reported on the Menu Substitution Report. The food substitution must still meet the menu requirements.

2. Generally, menu substitutions occur when a fresh alternate becomes available, the food item is unavailable, or for holiday celebrations. For example, if broccoli is unavailable from the supplier, the cook could substitute spinach on the menu and document the change on the report. If an overabundance of small amounts of frozen vegetables is on hand, the cook could change corn or peas to mixed vegetables.
Catered Food Temperature Report

Complete the Catered Food Temperature Report daily and maintain copies at the meal site.

1. Any catered meal site must maintain a record of the food temperatures from the preparation kitchen, upon delivery, and at the time of home delivered meal packaging and/or congregate meal service.

2. Food temperature reports should be monitored regularly by the kitchen staff to ensure compliance with temperature standards.

3. If food received does not meet standards, immediate action must be taken to bring temperatures to standard prior to packaging or serving.

4. Items that do not require a temperature test:
   - Cookies, cakes or other dry desserts
   - Breads
   - Ice cream (note that product is frozen)
   - Fresh fruit and gelatin
   - Condiments (if commercially single service packaged)
   - Canned fruit
CONGREGATE MEAL PROGRAM GUIDELINES

Title IIIc of the Older Americans Act of 1965, Revised, provides for congregate meal programs to elderly individuals over the age of 60. This act states that preference will be given in providing services to the elderly with the greatest economic or social needs, with particular attention to low income or low income minority individuals, and rural residents.

1. The purpose of congregate meals is to increase or maintain the self-sufficiency of the elderly and other eligible individuals by providing a nutritious meal containing one-third (1/3) of the Recommended Dietary Allowance.

2. Congregate meals are intended to be served as a hot lunch meal. Cold meals may be provided occasionally for menu variety. All meals must meet all Area Agency requirements to be reported as contractual units.

3. For catered meal sites, the food must arrive at the center hot between 165°F and 180°F, and cold at or below 40°F. If the catered site also provides home delivered meals, the temperature of the food must meet the standard for HDM packaging.

   Hot food must be served at or above 140°F and cold food must be served at or below 40°F. These temperatures must be maintained throughout the meal serving time.

4. Food must be served within two hours of the time the item is fully cooked to the time it is served to the participants. Catered sites may not store or re-use leftover cooked food.

5. Congregate meals must be served and eaten in the senior center; no food may be taken out of the senior center. Exceptions include only intact fresh fruit, cookies, and cakes from the participant's own plate. The senior center must not over produce menu items for the purpose of providing food for participants to take home.

6. Participants may not bring cooked or prepared food into the center to be eaten as a substitution to the congregate meal. Those participants that may have strict or limited dietary requirements such that the congregate meal is not an option may bring an individual meal. This one meal may not be stored in the Provider’s refrigerator, nor should the meal be shared with other participants. Participants who bring their own meal do not need to sign the signature sheet and the meal cannot be reported in Pharos. Site directors should monitor these circumstances.

7. Eligible participants must not be charged for a meal, but should be informed of the suggested contribution amount and encouraged to contribute for each meal received. Guests and staff under the age of 60 are required to pay the established guest meal price for a congregate meal.
8. Senior centers (especially catered sites) should have a meal reservation system to provide the cooks with a specific number of meals to prepare. Reservations should be taken at least 24 hours in advance. The reservation system must not, however, be a barrier to program participation.

9. Staff must plan and implement at least two nutrition education programs each quarter. Nutrition information must be backed by a credible source. These sessions should be advertised to participants at least four weeks in advance, and documentation of the activity kept on file at the site for at least a year.

**CONGREGATE MEAL ELIGIBILITY**

The following persons are eligible to receive congregate meals based on Federal guidelines established in the Older Americans Act.

1. **Participant** – individual over the age of 60 (+60)

2. **Disabled** – individual under the age of 60 (-60) with a disability

   Senior centers should target (+60) citizens for services and meals; however, citizens who are (-60) and disabled may access services and meals. Senior centers should have a method of verifying the (-60) person's disability status and maintain documentation in the participant’s file.

3. **Disabled Congregate Housing** – individual with a disability under the age of 60 living in a designated housing facility

   Disabled persons (-60) are eligible for congregate meals if they are residents of HUD Section 202 housing facilities within an Area Agency congregate meal center. For Maricopa County, the only centers qualified to classify (-60) disabled persons within this category are Chicanos Por La Causa (Casa Prima Vera) and the Salvation Army Laura Danieli Center (Silver Crest).
4. **Disabled Family Member** – an individual with a disability under the age of 60 who is a family member of a (+60) Participant

A (-60) disabled person is categorized as Disabled Family Member if they are related to a Participant (+60) who regularly attends the center. Record the name of the (+60) Participant in the database as the “Linked Client”.

If the (+60) family member(s) discontinues attendance, the (-60) disabled person must be re-classified as (-60) Disabled.

5. **Spouse** - individual under the age of 60 attending the senior center with a spouse who is over the age of 60.

An individual (-60) may register as a participant if they have a spouse (+60) regularly attending the center. If the (+60) spouse discontinues attendance, the (-60) spouse must be re-classified under these eligibility guidelines. Record in the Pharos database the name of the (+60) husband/wife as the “Linked Client”.

6. **Volunteer** - individual under the age of 60 who is assisting with congregate meal service

Persons (-60) who are active meal program volunteers at the senior center are eligible for a congregate meal on a contribution basis. Any person categorized in Pharos as a Volunteer under the age of 60 should assist with the meal program regularly, otherwise he/she must be asked to pay the guest/staff meal price.
7. **Associate** – an individual under the age of 60 who qualifies for services at the Provider level but does not meet the eligibility requirements of the Area Agency.

All other people should fall within the categories of Staff or Guest under 60 years old. Senior centers may serve staff and (-60) guests a congregate meal only **after** eligible participants are served. Staff and guests (-60) are required to pay for their meals. The price is to be established by senior center staff to reflect the full cost of the meal.
**CONGREGATE MEAL SERVICE**

1. Meals must be served at the scheduled time every day.
2. Dining room tables should be properly sanitized prior to meal service.
3. Hair restraints must be worn by anyone in the kitchen.
4. Gloves must be worn by kitchen and serving staff when handling ready-to-eat foods.
5. Hot foods must be served at 140° F or above and cold foods 40° F or below. Temperatures must be taken and recorded at the time of meal service.
6. Utensils must not be left in the food as handles may contaminate the food.
7. When serving from a pan, serve the product fully then exchange the pan. Fresh food should not be added to the previous pan for serving.

**CONGREGATE MEAL SIGNATURE POLICIES**

1. All congregate meal participants must sign for their own meal on each day they receive a meal.
2. Participant signatures substantiate the number of meals reported to the Area Agency. Area Agency staff and Area Agency employed auditors will periodically conduct assessments/audits of signature sheets.
3. If a participant is unable to sign his/her name, then a witness (staff/volunteer) shall write the participant's name on the signature sheet, then initial beside the written participant's name.
4. Signature sheets must be maintained on file for a minimum of five years, and then shredded.
**PARTICIPANT RECORDS**

All participant records, paper and electronic, must be kept confidential and secured in locked and/or password-protected files.

**Participant Registration Forms**

1. Each eligible participant must be registered in Pharos in order to report the meal correctly and to collect demographic information for the Congregate Meals Program Report. (See the next page for an example of a Congregate Program Report)

2. All participant records must be updated annually including emergency information and a new Nutrition Survey.
**Example 1: Pharos Congregate Meals Program Report**

**Area Agency on Aging - Region One**

**Congregate Meals Program Report**

- **Period:** Oct 01, 2014 - Oct 31, 2014
- **Site:** All Sites
- **Provider:** Area Agency
- **Prepared By:** Amanda Weiler
- **Date Prepared:** Nov 10, 2014

<table>
<thead>
<tr>
<th>Unique Persons</th>
<th>Current Period</th>
<th>Total YTD</th>
<th>Meals Current Period</th>
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<td>+60 and -60 Spouse</td>
<td>109</td>
<td>173</td>
<td>214</td>
<td>610</td>
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<td>-60 Disabled Family Member</td>
<td>2</td>
<td>2</td>
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<td>9</td>
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<td>Total USDA Eligible</td>
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<td>Other -60 Disabled</td>
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<td>Total Eligible Served</td>
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<td>195</td>
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<td>-60 Associates</td>
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<tr>
<td>Total People Served</td>
<td>123</td>
<td>195</td>
<td>247</td>
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- **Regular Diets:** 123, 195
- **Modified Diets:** 0, 0

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<th>Unique Persons</th>
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<td>107</td>
<td>123</td>
<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

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1 of 1
Emergency Information

1. Emergency information must be obtained on all eligible senior center participants and updated at least annually by the participant. Information collected should include current health issues and contact information for one to two friends or family members. If an incident occurs at the senior center, this allows for medical/health information to be immediately available for paramedics, and the emergency contact person can be notified promptly.

2. Hard copies of all participant emergency information are to be printed and maintained on-site for quick access by staff in case of emergency. The Area Agency on Aging recommends that each participant’s Client Information record be printed and placed in a three-ring binder.
**DISSEMINATION OF INFORMATION**

1. All advertisements, publications, and printed materials distributed by the provider must identify that the services provided are funded in part by the Area Agency on Aging, Region One, Inc.

2. All facilities contracted to operate senior center services must have a sign identifying the senior center and the days and hours of operation. The sign should be prominently located on/outside the facility.

3. The following must be posted in or near the dining area:
   a. Suggested Meal Contribution Amount for Eligible Participants.
   b. Meal Price for (-60) Guests and Staff
   c. Monthly Menu
   d. Monthly Activity Calendar

4. The following signs and notices should be posted for public view:
   a. Annual Fire Inspection Report (unless a facility can provide documentation from the fire inspector verifying a different inspection schedule)
   b. Emergency Evacuation Plan
   c. Building Capacity Sign
   d. Client Grievance Policy
   e. "Equal Opportunity Employer" sign

5. The following signs and notices must be posted in or near the kitchen area:
   a. Department of Health "Permit to Operate"
   b. Maricopa County Environmental Services Department Food Inspection Report
   c. Approved Menu from the Area Agency contracted Nutritionist
   d. Food Storage Guide

6. Literature providing information on services offered by the senior center, by other agencies, and on nutrition and health issues must be made available. The senior center must display resources for participants about services offered at the senior center and other community agencies.
HOME DELIVERED MEAL (HDM) PROGRAM GUIDELINES

1. The purpose of home delivered meals is to increase or maintain the well-being and self-sufficiency of the elderly and other eligible individuals by providing a nutritious meal containing key nutrients, delivered to the individual's residence.

2. The home delivered meal shall primarily be served as a hot lunch meal delivered between 10:00 a.m. - 1:00 p.m. Cold meals may be provided for menu variety. Breakfast or dinner meals may occasionally be provided at the expense of the provider. Every meal must meet all Area Agency requirements in order to be reported as contractual meals. Up to five (5) meals per week must be available to home delivered meal clients.

3. Home delivered meal temperature standards are:

Recommended packaging temperatures:
- 165º F for hot foods
- 35º F for cold foods

Required delivery temperatures:
- 140º F or higher for hot foods
- 40º F or lower for cold foods

4. All clients must be given written information on proper meal storage and re-heating methods.

5. Providers may utilize frozen home delivered meals for weekends and holidays, to accommodate a client's medical care such as dialysis, or where it is cost-effective to provide service beyond the limitations of a hot meal delivery route.

6. Temperatures of home delivered meals must be taken twice monthly for each delivery route and kept on file at the center. The Home Delivered Meal Temperature Test form may be used. The home delivered meal program supervisor must review each report and take necessary action to ensure full compliance with home delivered meals temperature standards.

7. A written emergency/contingency plan for meal delivery in case of fire, flood, natural catastrophe, or facility problem must be developed and kept on file at the center. This should include a three-day emergency menu with supplies on hand for implementation. In addition, providers must continually update the plan to ensure that the plan may be implemented when needed.

8. If the home delivered meal program is associated with a senior center, staff must provide clients with information on services and programs that the client can access from the center.

9. Printed nutrition education materials, provided by the site, shall be sent at least two times per quarter to all home delivered meal clients. Whenever possible the literature should be written in the client’s dominant language.
10. Home delivered meal clients must be given a copy of the provider’s grievance procedure at the time of enrollment and as requested by the client. The provider’s grievance procedure must also be posted in the senior center and a copy must be made available to participants when requested.

11. Providers must investigate and respond in writing to complaints received from clients and case managers. Copies of the complaints and written responses must be sent to the Area Agency within 14 calendar days of receipt of the complaint.

12. Providers must report all unusual incidents in writing within 2 days to the Area Agency. If the incident involves calling 911 emergency assistance, the incident must be reported by telephone or fax within 24 hours to an Area Agency staff person. An unusual incident is defined as any potentially liable circumstance that occurs within the provider’s facility or occurs while conducting services. An unusual incident would include but not be limited to medical situations or accidents, fights or other major conflicts, any reasonable suspicion of any form of abuse or neglect, and criminal actions. Any concerns regarding the client's environment, health, or well-being should also be forwarded to the case manager immediately.
HOME DELIVERED MEAL STAFF TRAINING

1. Particular care and attention should be made in the selection and training of all home delivered meal staff and volunteers to ensure the safety and well-being of clients. Delivery staff/volunteers shall be at least eighteen (18) years of age or, if under 18, may assist with the delivery process if accompanied and assisted by a designated person over the age of 18. Persons volunteering for the purpose of completing community service hours that are court-ordered or the result of any type of disciplinary action shall never ride on any home delivered meal route, nor have any type of access to home delivered meal records or client information.

2. Prior to being hired, three references, two of which are from persons other than family members, must be contacted for home delivered meal employees and volunteers. Documentation of contacts must be kept on file. Prior to providing direct service to clients, the following information must be obtained and kept on file for all home delivered meal staff:
   - Current Level One Fingerprint Clearance card
   - Cleared Central Registry background check
   - Signed and notarized Criminal History Self Disclosure Affidavit
   - Signed Direct Service Position form

3. Providers are responsible for training all home delivered meal supervisors, staff, any delivery provider, and volunteers who conduct the meal delivery.

4. Comprehensive training must occur during staff/volunteer orientation followed by ongoing annual training. Supervisors may utilize a variety of methods to obtain appropriate training, including but not limited to:
   - Outsourced trainings provided by other organizations
   - Trainings conducted during regular staff meetings
   - Individual study modules
   - Videos or other educational media

5. Home delivered meal staff/volunteer training must include at least the following:
   a. How to respond to client medical emergencies
   b. Appropriate methods of interacting with homebound clients and their caregivers
   c. Observation skills necessary to detect changes in client functioning or status
   d. Social needs of the homebound client
   e. Methods for reporting changes in client's physical/mental status
   f. Methods for reporting barriers to service delivery.
   g. Food safety and sanitation, storage, food preparation and service, proper hot and cold food temperatures, food delivery procedures, menu planning, and equipment operation and safety.
h. Ensure that all food handlers complete a course of food safety and sanitation within one month of employment. The site manager or the appropriate management staff shall have additional training such as ServSafe or other course approved by their County Health Department.

6. One staff member at each site must successfully complete a Certified Food Manager course and participate in on-going training.
**Home Delivered Meal Eligibility**

Title IIIc of the Older Americans Act of 1965, Revised, provides for home delivered meal programs to individuals over the age of 60. Home delivered meals are provided to persons, who are unable to leave home because of a disabling physical, emotional, or environmental condition and are unable to prepare adequate, nutritious meals for him/herself.

All home delivered meal clients must be assessed and authorized through case managers from Area Agency approved fund sources. Staff shall provide the home delivered meals in accordance with the authorization orders from case managers. Clients should be informed of their right to contribute towards the cost of their meal service as well as their right to obtain the services if unable to contribute (exception: ALTCS clients).

The following categorize eligible home delivered meal clients:

1. **Eligible Client, (+60) and Spouse, (-60)**

   Any person 60 years old or older (+60) is eligible for home delivered meals. If the (+60) person, receiving meals, has a spouse who is under 60 years of age (-60), then the spouse may also be eligible for home delivered meals.

2. **Disabled Person, (-60)**

   Individuals, ages 18 - 59, who have a physical or mental impairment that substantially limits one or more major life activities, are eligible for home delivered meals.

3. **Disabled Family Member, (-60)**

   A person receiving meals, who is disabled and under 60, living in the same household as a person (+60) who is authorized for meals, should be classified as (-60) Disabled Family Member. If the (-60) disabled person is not related to a (+60) person receiving meals, he/she should be classified as (-60) Disabled.
HOME DELIVERED MEAL SERVICE PROCEDURES

The home delivered meal program is a case managed service. Case managers assess eligibility and authorize services based on client needs. Through the assessment process, the case manager will identify the number of meals per week and in some cases include special delivery instructions. Authorizations typically cover six (6) months at a time but may vary in length depending on the funding source or the client’s need.

Opening HDM Clients

1. The case manager will provide an authorization, referred to as a Service Enrollment Form (SEF), which details the client’s information and specific delivery needs. Authorizations from the SAIL program will be sent with basic client contact information, including emergency contacts, health information and client demographics. ALTCS funding sources do not send additional client information with the authorization. It is staff’s responsibility to obtain this information from the client or case manager.

3. When the (SEF) is received, staff should promptly verify the information with the client to ensure accuracy. Any discrepancies should be immediately directed to the case manager.

4. The expectation is that the senior center will start meal delivery the following day after receiving the authorization, but no longer than three working days.

Client Contact

After receiving authorization from the case manager, staff must contact the client by telephone or in person to explain the home delivered meal program. If the home delivered meal program is associated with a senior center, staff should also take this opportunity to acquaint the client with the senior center and its services. Information must be provided in a language the client can understand.

The following information should be provided through written literature with the first delivered meal:

1. The home delivered meal program name, address, telephone number, and name of a contact person.

2. A schedule of the days and time the meal will be delivered.

3. Advise the client that they must be home for the delivery, and that meals may not be left with caregivers, neighbors, or on the door step.

4. An explanation of the signature policy.
5. A home delivered meal menu (subsequent menus must be distributed at least one week in advance).

6. Information on contribution procedures and policies (SAIL clients only).

7. Instructions for storing and reheating the meal.

8. An explanation of the procedure for canceling meals when the client will not be home to accept the meal.

Reauthorizations, Changes, & Closures

1. Case managers must review each client's case at least every six months. At this time, the case manager may determine that meals should be continued, changed, or closed. The case manager will notify staff of any changes in service. Staff should respond promptly to any changes.

2. On some occasions, the staff may be contacted by the client or caregiver to discontinue service. Staff must follow up with case managers regarding the client's request and wait for case management action. The meals can be put on hold until the case manager identifies a closure or other action.
HOME DELIVERED MEAL SIGNATURE POLICIES

1. All home delivered meal clients must, if at all possible, sign for their own meal on each day they receive a meal.

2. The meal signatures are the basis for the number of meals served and reported to the Area Agency. Audits and assessments of the signature sheets will be conducted by Area Agency staff to ensure that the meals reported are substantiated by individual signatures.

3. If a client is unable to sign his/her name then another person in the client's home shall sign the client's name on the signature sheet, then initial the signature. As a last resort, the delivery staff may make a signature for the client who is unable to sign for him/herself. Make an indication in the Notes section on the delivery sheet regarding the client's inability to sign. (See below for a signature example)

HDM SIGNATURE EXAMPLE

<table>
<thead>
<tr>
<th>Signature</th>
<th>Units Serve</th>
<th>Name</th>
<th>Address</th>
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<tbody>
<tr>
<td>Client HDM</td>
<td>1 0</td>
<td>HDM, Client</td>
<td>1366 E THOMAS RD, #100</td>
</tr>
</tbody>
</table>

4. In cases where a client is unable to sign, the home delivered meal supervisor must get case manager authorization for others to sign for the client. This authorization must be documented in the client's file. In the Pharos system, check the box “Signature NOT Required” in the “HDM Auth” section. Delivery staff must initial next to the client’s name on the signature sheet to verify the meal was delivered.
5. Each signature represents one delivery. The weekly authorization in Pharos shows which meals are weekend/frozen meals; this information is automatically transferred to the signature sheets and the posting screen each day. In this case, the signature of the client next to the number of meals received serves as verification for audit purposes.

6. Signature sheets must be maintained on file for a minimum of five years.
HOME DELIVERED MEAL CLIENT FILE

A client file must be established and maintained on site and in Pharos for each home delivered meal client. Each file must be kept confidential and contain:

Pharos Progress Notes & Client Information

1. Notes including dates, names and details on every action;

2. Documentation of all service authorizations including the date authorized and the name of the case manager authorizing service;

3. Pertinent information on the client, including:
   - emergency contact person(s),
   - health information (i.e. hard of hearing, blind, physical limitations, etc.),
   - delivery information (i.e. gate codes, animals, etc.),
   - demographic information;

   Emergency information must be updated annually or as changes to this information occurs.

4. Documentation of the date client was not home to receive a scheduled meal and all follow up action;

5. Documentation of any reported change in the client's mental/physical condition and any subsequent action.

Paper File Documentation

1. Client information must be gathered at the time of intake and updated annually or as changes to this information occur. The information must include:
   - address
   - phone number
   - emergency contacts
   - health information
   - demographic information

2. Copies of each (SEF) and assessment received from case managers;

3. Documentation of case manager authorization regarding the client's inability to sign for the receipt of a meal, if applicable, including the name(s) of the designated signatory(s) and his/her relationship to the client.
HOME DELIVERED MEAL PACKAGING PROCEDURES

Home Delivered Meal Packaging

1. Hot foods must be placed in the home delivered meal individual containers: recommended hot at or above 165° F and cold at or below 35° F.

2. Packaged meals must be loaded into the home delivered meal carriers immediately after being individually packaged.

3. All hot meal carriers must be equipped with an adequate heat source.

4. Cold foods must be packed in separate containers from hot foods.

5. Cold foods must be packed on ice or with re-freezable ice packs.

6. Bread items should be packaged separately from hot foods.

7. Modified diet meals must be clearly labeled. This will help delivery drivers quickly identify the meals going to clients with special diets.

8. Home delivered meals carriers, both hot and cold, must be sealed tightly immediately after packaging.

9. Delivery must begin immediately after all meals have been packaged.

10. Home delivered meal programs must maintain a sufficient number of home delivered meal carriers to hold all meals delivered.

11. Home delivered meal carriers must be in good condition and thoroughly cleaned and sanitized daily.
**DELIVERY OF HOME DELIVERED MEALS**

1. Hot foods must be delivered at or above 140º F; and cold foods at or below 40º F.

   Twice a month the temperature of an extra test meal should be recorded on a Home Delivered Meal Temperature Test form. Temperatures must be taken of all hot and cold products except fresh fruit, breads, baked goods (i.e. cookies, cakes), and shelf-stable items. Staff must review each report monthly, and take necessary action to ensure meal temperature standards are met. Area Agency contract staff will review these forms.

2. A route sheet listing all clients’ names, addresses, and any special delivery instructions must be used by the driver. The Pharos program features a route delivery sheet.

3. It is recommended that meals be delivered to clients within two hours of being packaged in order to maintain food safety standards. The sequence of deliveries must minimize the time necessary for all meals to be delivered, while at the same time allowing for some interaction between the client and the home delivered meal staff/volunteers as part of the daily welfare check.

4. Home delivered meal carriers must be opened only as necessary to remove individual meals.

5. Delivery of the meal must be made directly to the client. Meals may not be left at the door, on the porch, in a cooler, or with a neighbor. If the client is not home to receive the meal, the meal must be returned to the site for disposal.

6. A primary component of the delivery process is the welfare check. Upon entering the client’s home, the delivery person is responsible for assessing the mental and physical status of the individual, noticing any relevant changes, and taking appropriate action when necessary to ensure client welfare. Appropriate action may include: immediate assistance, notifying the HDM supervisor, or calling 911.

   There may be times that the client is asleep, sick in bed, or in the bathroom when the meal arrives. When the delivery person does not see the client for several days in a row (for one of these reasons), ensure that on at least one calendar day each week there is visual confirmation that the client is at home. This ensures the client’s welfare and protects the provider agency from fraud. If someone in the client’s house is preventing contact with the client on a regular basis, report the circumstances to the case manager.

7. The delivery driver should assist the client in opening meal containers as needed or requested.
8. Home delivered meal supervisors are required to accompany the driver(s) on each route at least quarterly. This observation ride would include assisting with the meal delivery process to ensure that the delivery is conducted according to standards and meeting the clients in their homes. Staff should document dates for each route observation and respond to any issues with training and monitoring.

9. Per the Older Americans Act, all SAIL home delivered meal clients must be given the opportunity to make a confidential contribution towards the cost of the meal. Each agency should develop a procedure to ensure clients will not feel pressured by staff or volunteers to contribute. A written copy of the contribution procedure must be given to each SAIL client.

a. The home delivered meal program shall periodically remind participants of the value of contributions to the program and take a variety of approaches to continually encourage contributions from SAIL clients.

b. Upon client request, the home delivered meal program shall provide a receipt for contributions.

c. Two persons, simultaneously, must count the daily contributions. Both persons should sign reports and records.

d. Records must be kept separate from contributions for other services (i.e. congregate meals, transportation).

e. Bank deposits should be made frequently to avoid having large sums of cash on hand.

10. The delivery vehicle must be kept neat and clean at all times.
**NON-PROVISION OF SERVICE**

Non-provision of service occurs when a client is not home to receive a scheduled home delivered meal. These are identified as:

- **Cancellation** – client notifies the home delivered meal program in advance so a meal is not delivered.
- **No Show** – delivery driver goes to the client’s home as scheduled and the client is not home to receive the meal.
- **On Hold** – client is unable to receive meals for an extended amount of time (i.e. hospitalization, vacation, family visits). Holds must be communicated with and approved by the client’s case manager.

1. All instances of non-provision of service must be documented in client progress notes found in Pharos. Case managers must be notified of frequent non-provision of service.

2. In the case of a Non-Provision, the steps to be taken will depend upon the home delivered meals staff’s knowledge of the client's situation.

**Cancellations:**

1. Clients may cancel meals periodically for doctor appointments or other circumstances. These one-day cancellations are not considered a hold; therefore, case managers do not need to be contacted.

2. Clients have the responsibility to cancel their meal when they will not be home. The staff should periodically remind the clients of this responsibility.

**No Shows:**

1. If a scheduled meal cannot be delivered to a client, the meal must be returned to the site and disposed of.

   The following steps should be taken in the event of a No Show:

   **First Day of No Show:**

   a. HDM staff **must** attempt to contact the client by telephone to make sure the client is okay and to determine why the client missed the meal. If the client cannot be reached by telephone, home delivered meal staff shall contact the clients’ emergency contact person, in an attempt to locate the client.
b. If no contact is made with either the client or the emergency contact person, the staff should still plan on delivering a meal to the client the next regularly scheduled day. If appropriate, the police department may be asked to make a welfare check at the client's home.

c. Document all actions taken Notes section of Pharos.

Second Consecutive Day of No Show:

a. Attempt to contact the client and/or client's emergency contact person for a welfare check. The police department may be asked to make a welfare check at the client’s home.

b. If no contact is made or if the client's situation is an emergency or status change (i.e. hospitalization), contact the case manager to provide information. Be sure to notify the case manager that this is the second consecutive day with a break in service.

c. Place the client's meals on hold until the client is located. The case manager must be included in discussions to re-start home delivered meals.

d. Document all actions taken Notes section of Pharos.

Client Hold:

1. Clients may be placed on hold for brief periods of time for such situations as hospitalization, emergencies, family visits, or vacations. Once a client is placed on hold, staff must contact the case manager at least once every 30 days for further instruction. Staff must document this communication with the case manager in the Notes section of Pharos.

2. If a client requests that meals be placed on hold, the case manager should be promptly notified by staff. The case manager will confirm the hold status. If a client contacts staff requesting meals be started again, staff must receive authorization from the case manager to resume service delivery.

3. If a client is not home to receive the regularly scheduled without cancelling in advance this is referred to as a “no show”. If the driver encounters “no shows” for two consecutive delivery days, the client may be placed on hold until staff can contact the client and ensure they will be home for the next delivery.

4. Clients may cancel meals periodically for doctor appointments or other circumstances. These one-day cancellations are not considered a hold; therefore, case managers do not need to be contacted.
MCO PROGRAM GUIDELINES

The purpose of Multipurpose Senior Center Operations (MCO) is to foster the social, emotional, mental, and physical well-being of eligible individuals by providing for senior centers, programs, and activities.

1. The following standards ensure that seniors are provided with life enhancing programs.

**Health Promotion - a minimum of 2 activities per month**
Activities may include lectures, screenings, disease prevention, home safety, and programs that specifically promote better health and nutrition for seniors. The two quarterly nutrition education sessions (as required in the Congregate Meal guidelines) are in addition to these health promotion activity requirements. Therefore, each quarter there should be two (2) health promotion activities per month (for a total of 6) plus two (2) nutrition education programs.

**Exercise - a minimum of 2 activities per week**
Activities that promote the physical well-being of seniors. Exercise classes should be geared to a range of skill levels to encourage greater participation.

**Social/Recreation -**
Organized/structured activities and programs that promote the mental and social well-being of seniors that are provided daily. These activities may include games, crafts, trips, classes, parties/celebrations, etc.

Individual activities (i.e. cards, coffee, reading) do not qualify as an organized/structured activity per day. Trips to or sponsored by casinos do not qualify to meet this social/recreation requirement.

Sites conducting any gambling related activity, (including Bingo, Loteria, and cards) that includes the exchange of currency and/or coin, must be licensed by the Arizona Department of Revenue for such activities.

**Program Variety - a minimum of 8 different types of activities per month**
The health promotion, exercise, and social activities should include at least eight different types of activities each month.
2. **How to record MCO hours in the Pharos database:**

The purpose of tracking MCO hours is to quantify the hours spent in the specific categories identified for paid staff that are allocated in the MCO budget. The Pharos database allows staff to record time spent on the Congregate and Home Delivered Meal programs but these hours should **NOT** be included when reporting MCO units.

The categories of staff time are as follows:

a. **Program Planning:** time spent organizing/planning for activities including phone calls, correspondence, facility preparation, meetings, etc.

b. **Conducting Activities:** time spent conducting or leading activities,

c. **Social Services:** time spent helping clients access services such as assistance in filling out applications, language translation, referrals/contacting other agencies, personal counseling, senior center orientation, etc.

d. **Outreach:** time spent advertising and attracting participants to the center including home visits, community presentations, flyer distribution, etc.

e. **Volunteer Coordination:** time spent recruiting, organizing, and training volunteers, including time spent for recognition activities, etc.

f. **Staff Training:** includes all types of training programs specific to MCO programs and services

g. **Continuing Education:** includes seminars, classes, etc. offered by outside agencies that take place at another location.

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**Staff Hours Report**

*Native American Sr Ctr*

*Area Agency*

*Month: March 2015*

*Staff Member: Walker, Amanda*

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MCO SERVICES

Providers must offer the following services at the senior center in addition to the required standards. These services may be provided in conjunction with community agencies and participant volunteers.

1. Information on available Supportive Services

A current resource file on services available to seniors must be maintained at each site. Staff should be familiar with various types of applications and processing requests for service. Each resource file must at least contain information on:

- housing
- transportation
- legal services
- government programs
- food assistance
- physical and mental health
- financial assistance
- support groups
- residential repair
- energy assistance

Other relevant information on supportive services available to older individuals should also be maintained on file.

2. Referral to Supportive Services

Each site must provide referral to supportive services and assist participants in accessing the services by:

a. Assessing/determining the services needed by individuals/groups;
b. Contacting the agency providing the identified service;
c. Providing/arranging for transportation to the service, when needed;
d. Providing/arranging for assistance if the individual is disabled or has limited English abilities; and
e. Conducting follow-up with the individual and the agency providing the service.
3. Outreach

Each site must conduct outreach activities to market the senior center programs and services to the community. In addition to a broad marketing plan for the community, the plan should include targeting elderly persons with greatest economic or social need, with particular attention to low income and low-income minority individuals by:

a. Providing written and verbal information to community groups on services available at the senior center and offered by other agencies.
b. Providing activities to inform the community of the senior center, programs, and services.
c. Making home visits to elderly residents within the community.

Providers are required to submit quarterly reports based on the Outreach Plan in the contract.

4. Recreational Activities

Senior center participants must be actively involved in the development of activities and programs. Staff shall develop committees or other planning groups for participants to provide input and assistance with program planning and development.

Develop a monthly calendar of the programs, services, and menu. Distribute the calendar to participants and community resource centers for effective marketing and outreach.

5. Intergenerational Programs

Each site should provide intergenerational programs of mutual benefit with members of the community by planning and developing activities with input from all involved age groups. This may include tutoring services, parties and celebrations, and community service activities.

6. Food Assistance Programs

Senior centers may be a distribution site for food programs such as Brown Bag, Commodities, and Gleaners.

7. Volunteer Opportunities

Designate a volunteer coordinator to provide meaningful and accessible volunteer opportunities for participants at all sites. This coordinator should also set up processes to recruit volunteers, utilizing job descriptions, and providing initial and ongoing training for volunteers.
TRANSPORTATION PROGRAM GUIDELINES

1. The goal is to improve access to senior centers by providing transportation for eligible participants.

2. Transportation services should target trips to and from the senior center. Services may include public transit tickets and rides on agency vehicle(s).

3. Participants must be informed of the suggested contribution amount and encouraged to contribute towards the cost of the service. The Provider is responsible for providing a confidential method for participants to contribute.

4. Each transportation participant must be registered with the senior center in order to collect and report the demographic information. Follow the congregate meal registration procedures.

5. Records must be regularly reviewed by staff to ensure that only senior center participants (as defined above) receive the tickets, that participants receive the appropriate amount of tickets for their senior center trip needs, and that ticket distribution is accounted for.

6. Provider/site councils must annually review and set the suggested contribution amounts for tickets. Generally, the contribution should be at least half of the cost of the transit discount ticket.

7. Transportation services are specific to/from the senior center. Persons with additional transportation needs should be referred to community resources.

8. Guests and staff (~60) may not be given and may not purchase public transit tickets from the senior center.
**Senior Citizen Transportation Standards**

These standards apply to providers operating vehicles providing direct transportation services. The provider shall comply with the following standards and/or licensure requirements:

1. The vehicle(s) in which transportation is provided must have valid license plates and at a minimum, uninsured and underinsured motorists’ coverage with a combined single limit liability policy of one million dollars ($1,000,000).

2. The vehicle shall be basically constructed for the transportation of persons and wheelchair bound riders. All seats shall be securely fastened to the body of the vehicle and individuals shall be properly seated when the vehicle is in operation. The vehicle must have seat belts installed. Seat belts must be used by driver and passengers.

3. Individuals providing transportation must be a minimum of eighteen (18) years of age and:
   a. possess a valid operator's license,
   b. Ensure that drivers are physically capable to assist the individual with entering and exiting the vehicles as needed, and securing them safely within the vehicle.
   c. carry agency identification.

4. Staff/volunteers shall be trained in the following areas:
   a. CPR (Cardiopulmonary Resuscitation), first aid, and additional training on response during emergency situations;
   b. full vehicle equipment and operation training including optional manual over-rides on any equipment;
   c. appropriate methods of interacting with clients and observation techniques to detect changes in health and welfare;
   d. contribution procedures to allow all clients to contribute and ensure confidentiality during the process;
   e. response protocol for emergency or urgent situations

5. Transportation service should be available to eligible riders Monday through Friday, between 8:00 a.m. and 5:00 p.m. excluding holidays.

6. The drivers/aides are required to use the highest degree of care with the operation of equipment and assistance of riders. Each driver must provide assistance to passengers who need help getting on and off the vehicle and transferring between their home and the senior center.

Providers may limit the number of bags or packages that passengers may have on board. Drivers will assist with the packages from portal to portal, if necessary.
7. The maximum in-vehicle ride time for riders is forty (40) minutes. This assumes that the driver is transporting more than one rider.

8. Assure that all federal, state, and local laws, regulations, ordinances, licenses, and inspections governing vehicles in this service are followed before service is begun and at all times covered by the period of this contract.

9. Maintain all vehicles in good working condition. The Area Agency reserves the right to inspect vehicles prior to and during a contract to ensure their safety, and to immediately remove from the program any vehicle it deems unsafe until necessary corrections are made. All equipment used in the program must be kept clean and be cleaned regularly.

10. Vans and buses should be equipped with comfortable sized steps, grab bars, and seat belt extenders for added safety for senior citizen passengers.

11. Each vehicle must have a working fire extinguisher and stocked first aid kit.

12. Provide communication equipment for every vehicle used in the provision of this service. Any exceptions require prior written approval from the Area Agency.

13. All drivers/aides in the program must practice good hygiene and are required to be neat, clean, and well groomed. Smoking, expectorating, eating, and drinking alcoholic beverages by drivers or passengers while on board any vehicle is prohibited.

14. Transportation providers must coordinate services together to make referrals and receive referrals from each other, to assist clients to access the services most suited to their need.
PROVIDER/SITE COUNCILS

Each provider must establish and maintain one or more site councils. Those providers having more than one senior center must establish a site council at each center and a provider council with at least one representative from each site council.

Purpose

The purpose of the provider/site council is to advise the provider and senior center staff on matters relating to the delivery of services. These provider/site councils should not be separate entities from the provider, but serve in an advisory capacity without legal/corporate status.

Council Functions

Functions of provider/site councils may include, but are not limited to:

1. Advising
   a. Identifying needs.
   b. Suggesting solutions to problems.
   c. Suggesting programs and activities.
   d. Advising the provider and governing body on policy.

2. Coordinating
   a. Integrating services at the senior centers with community programs.
   b. Sharing successful ideas and activities with other senior centers.
   c. Improving community relations.
   d. Increasing the visibility of the provider in the community.
   e. Upgrading internal and external communications.
   f. Securing representation on community boards and councils.

3. Planning
   a. Developing strategies to increase contributions.
   b. Developing outreach activities.
   c. Developing new programs to meet identified needs.
   d. Planning recreational, educational, and intergenerational activities.
4. Evaluating
   a. The site council must evaluate the current suggested contribution amounts for congregate meals, home delivered meals, and transportation at least once every twelve (12) months. At this time the site council must determine the suggested contribution amounts for the following year.
   b. Evaluating the effectiveness of programs, services and activities in meeting the needs of participants.
   c. Reviewing menus and making suggestions.

5. Implementing
   a. Raising funds.
   b. Assisting staff to implement programs and activities.

6. Advocating
   a. Promoting senior services within the community.
   b. Speaking on behalf of elderly issues to community groups.
   c. Support legislative advocacy.
PROVIDER/SITE COUNCIL OPERATIONS

The following standards should be followed when organizing and operating provider/site councils.

1. General
   a. Provider/site councils should not be separate entities from the provider, but serve in an advising capacity without legal/corporate status. Provider agencies hold the ultimate authority and fiscal responsibility for any funds allocated to site councils.
   b. The provider/site council must have a clear statement of purpose and specific objectives.
   c. The organizational relationship among the provider/site council, the staff, and provider must be explained to the members of the council and the participants.

2. Rules of Order
   a. Provider/site council must have established Rules of Order.
   b. The Rules of Order must be approved by the provider agency’s governing body.
   c. The Rules of Order must be followed when conducting all provider/site council business.
   d. Rules of Order must include at a minimum:
      1) the size, composition, and guidelines for membership, (with respect to the requirements in Section 3. Membership)
      2) the frequency and procedures for meetings,
      3) the duties and responsibilities of officers, and
      4) the functions of standing committees

3. Membership
   a. Participants must represent at least fifty-one percent (51%) of the membership on the project/site council.
   b. Participant members on the provider/site council must be elected by the senior center participants at an annual meeting of the project/site council.
   c. The provider/site council should reflect the demographic composition of the participants of provider/site.
   d. It is recommended that term limits be considered for membership in provider/site council.
   e. Members of the provider/site council must declare conflicts of interest.
   f. All members of the provider/site council must receive orientation training on
roles and responsibilities of council membership and senior center programs.

g. Only one member of a family may serve on the provider/site council at any time.

h. Members of the community with an interest in the elderly may be elected to the provider/site council. These individuals may be under 60 years of age.

4. Officers

a. Provider/site councils must have elected officers. (i.e. President, Vice President, etc.) The officers shall be elected by members of the provider/site council.

b. Officers must have written duties and responsibilities.

c. It is recommended that term limits be set for officers.

5. Provider Staff Responsibilities

Staff may not be members, but must participate in provider/site councils to provide information and support.

6. Meetings

a. Site councils should meet at least nine times per year.

b. Provider councils should meet at least four times per year.

c. Minutes of all council meetings must be taken.

d. Minutes must be distributed to all council members and posted for all participants to review prior to the next scheduled meeting.

e. Meetings must be open to all participants.

f. Agendas must be posted at least twenty-four (24) hours in advance of project/site council meetings.

g. Meetings must be announced to all participants at least twenty-four (24) hours in advance of scheduled meetings.

h. Meetings must be open to the public and the meeting location must be easily accessible.

i. Agendas must be followed during council meetings.

j. Standard parliamentary procedures must be used when conducting council meetings.

k. A quorum of fifty-one percent (51%) of the council membership is required to take action or vote on provider/site council business.
The following forms are available for your convenience.

1. Emergency Evacuation (Fire Drill) Log
2. Catered Food Temperature Report
3. Menu Substitution Form
4. Home Delivered Meal Temperature Test (Bi-Monthly Temp. Test)
5. Unusual Incident Report
**AREA AGENCY ON AGING, REGION ONE**
**EMERGENCY EVACUATION (FIRE DRILL) LOG**

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**Note:** Please log all emergency evacuation drills on this form and have available for review by Area Agency staff.
Area Agency on Aging, Region One  
CATERED FOOD TEMPERATURE REPORT

Provider: ___________________  Site: ___________________

Month/Year: _____________  Reviewed by Staff: _______________  Date: _____________

<table>
<thead>
<tr>
<th>Date</th>
<th>Menu (list all foods)</th>
<th>TEMPERATURES</th>
<th>List Menu Changes (include comments on quality)</th>
</tr>
</thead>
<tbody>
<tr>
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<td>Caterer Beginning</td>
<td>Site Delivery</td>
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<td>Milk</td>
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</table>

CON Meal Serving Temp **Requirements**: HOT - 140°F or above, COLD - 40°F or below  
HDM Packaging Temperature **Recommendations**: HOT - 165°F, COLD - 35°F or below  
Keep on file at the center for review by the Area Agency on Aging.  
Monitor temperatures to meet standards and to make improvements.
Area Agency on Aging, Region One, Incorporated

Menu Substitution Form

Provider: __________________________ Site: __________________________ Month of: __________ 20_____

<table>
<thead>
<tr>
<th>Date</th>
<th>Original Menu Item</th>
<th>Substitution</th>
<th>Reason for Change</th>
<th>Staff Initials</th>
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</table>
## Home Delivered Meal Temperature Test

### Provider: __________________ Site: __________________

### Date: __________ Route: __________________

<table>
<thead>
<tr>
<th>Pkg. Begun</th>
<th>Delivery Begun</th>
<th>Last Delivery</th>
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<tbody>
<tr>
<td>Time: _______</td>
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</table>

<table>
<thead>
<tr>
<th>Food Items</th>
<th>Packaged Temp.</th>
<th>Last Delivery Temp.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Food Items</th>
<th>Packaged Temp.</th>
<th>Last Delivery Temp.</th>
</tr>
</thead>
</table>

### Total Number of Meals Delivered: __________________

### Person Recording Temperature: __________________ Site Manager: __________________

**Packaged Temperature Standards:**
- **HOT** greater than 165°, **COLD** 40° or lower

**Delivery Temperature Standards:**
- **HOT** greater than 140°, **COLD** 40° or lower

Delivery must be made within 2 hours of packaging.

Test temperatures (TWICE monthly each route) after last meal delivered.

Keep reports at center for the Area Agency on Aging review.
Area Agency on Aging, Region One, Incorporated
Unusual Incident Report

Provider _______________________         Site _______________________

Date of Incident: _____________________       Time of Incident: ______________

Location of Incident: ________________________

Name(s) of Person(s) involved:

________________________________________

Telephone report given to: (name of Area Agency staff) ________________________

Telephone report given by: ___________________ Date: ___________ Time: __________

Nature of Incident (include name(s) of client(s) and staff involved).

Use additional pages if necessary.

_________________________________________________________________________

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Signature of person completing the report ________________________________

Instructions
Any incident occurring at an Area Agency on Aging, Region One supported facility or within services must be reported. A telephone call to the Area Agency staff (602-264-2255) must occur promptly on serious (911) incidents. This report for all incidents must be mailed within 24 hours to the Area Agency at 1366 East Thomas Road, Suite 108, Phoenix, Arizona 85014.