



# Nutrition Services

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## NUTRITION PROGRAM FOR OLDER PERSONS

The Nutrition Program for Older Persons Policy is applicable to Title III C-1 and C-2 of the Older Americans Act of 1965 and as amended in subsequent years, KAR 910 1:190 (NPOP), 902 KAR 45:005 Retail Food Code, Kentucky's Home Care Program, Adult Day /Alzheimer's Program and any other Nutrition Program for Older Persons which is implemented by the KIPDA AAAIL.

### INTRODUCTION

The goal of the Nutrition Program for the Older Persons is to provide nutritionally balanced meals to seniors, critical to their health, functioning, and quality of life, and to offer them opportunities to form new friendships and to create informal support networks. Meals served in the program provide at least one-third of the current Dietary Reference Intakes (DRI) and conform to the dietary Guidelines for Americans.

The function of the Nutrition Program for Older Persons Policy is to set forth the standards of operation for the Nutrition Program for Older Persons (NPOP) as implemented by the KIPDA Area Agency on Aging and Independent Living and applies to staff, contractors, subcontractors, and volunteers of the Title III C Nutrition Program for Older Persons working in the KIPDA region program.

These policies and procedures are largely intended for providers who contract with KIPDA to provide services within this program though they can also apply to KIPDA staff, the general public, and potential recipients as well. Other policies and procedures, regulations, guidance, contracts, etc., are also applicable to this program.

### COMMON PROGRAM DEFINITIONS AND TERMS

- 1) **Congregate Meal** – This is a meal that is served to an eligible client or other eligible participant, at an approved congregate site and consisting of a meal which: (1) complies with the Dietary Guidelines for Americans (HHS and USDA) and (2) provides a minimum of  $\frac{1}{3}$  of the Dietary Reference Intakes (DRI), and has been approved by a licensed dietitian or certified nutritionist. Congregate meals shall be provided by a nutrition service provider who, five (5) or more days a week, in each rural or urban community within the nutrition service provider's service and planning area, provides at least one (1) hot or non-traditional meal per day and any additional meals which the nutrition service provider may elect to provide in a congregate setting.
- 2) **Congregate Meal Site** – This is a location where individuals are served meals together. The selection of a site shall be based on information about older people in its service area and on the advice of public and agencies serving the elderly. Consideration should be given to demographics, accessibility to the maximum

number of people who are socially or economically deprived, proximity to other services or facilities, convenience to public transportation or within comfortable walking distance, free of structural barriers or difficult terrain, and safety and security of participants and staff. Congregate meal sites exist at Focal Points, Senior Centers, or Nutrition Sites. Specifications for each are defined in 910 KAR 1:220. Each nutrition site shall have an individual (volunteer or paid) responsible for administration of the site and present during hours of operation. Services available through the nutrition site include nutrition education, outreach, and information and referral. The total number of participants to be served shall be adequate to justify the cost of operating the site.

- 3) **Home Delivered Meal** – These are meals served to an eligible client or other eligible participant, at the client’s place of residence and consisting of a meal which (1) complies with the Dietary Guidelines for Americans (HHS and USDA) and (2) provides a minimum of  $\frac{1}{3}$  of the Dietary Reference Intakes (DRI), and has been approved by a licensed dietitian or certified nutritionist. Eligible individuals are unable to attend a congregate site because of illness or incapacitating disability, and do not have an individual in the home able to prepare a nutritious meal on a regular basis. Home Delivered Meals shall be provided by a nutrition service provider who, five (5) or more days a week, in each rural or urban community within the nutrition service provider’s service and planning area, provides at least one (1) hot or non-traditional meal per day and any additional meals which the nutrition service provider may elect to provide.
- 4) **In-Home Assessment** - This activity is intended to confirm, correct, and document information already collected about the potential Title III C program client. Additional information, including but not limited to cooking and storing facilities are also collected and documented. The activity is conducted in the clients’ residence annually for clients receiving mostly hot meals; semiannually for home meal clients who receive frozen meals only.
- 5) **Intake** – This is the process of collecting additional demographic information about a potential client to confirm Title III C program eligibility. Information collected is (1) required for NAPIS reporting, (2) ADL, IADL, and NRA. This activity may be conducted over the telephone along with screening.
- 6) **Meal Costs Ready-To-Serve (RTS), (Meal Preparer/Caterer Costs)** – These are costs incurred by the meal caterer. Specify one unit cost for all types of meals, congregate, home-delivered, and emergency meals for the contract period.
- 7) **Meal Service Costs** - All other costs incurred for serving foods at congregate sites. Does not include caterer costs.
- 8) **Meal Service and Meal Delivery Costs** – These are all other costs incurred for the delivery of meals to home bound clients. It does not include caterer costs.

- 9) **Nutrition Counseling** – A one-on-one advice and guidance to individuals, who are at nutritional risk because of the nutritional history, current dietary intake, medication use or chronic illnesses, about options and methods for improving their nutritional status, provided by a registered or licensed dietitian or other health professional functioning within their legal scope of practice.
- 10) **Nutrition Education** –A service or a program to promote better health by providing accurate and culturally sensitive nutrition, physical fitness, or health (as it relates to nutrition) information and instruction to participants and caregivers in a group or individual setting overseen by a dietitian or individual of comparable expertise. Nutrition education occurs at least once per month; units accumulate throughout the year.
- 11) **Nutrition Services and Incentive Program (NSIP)** - administered by the U.S. Department of Health and Human Services and receives financial support from the USDA Food and Nutrition Service (FNS).
- 12) **Registered Dietitian/Licensed Dietitian (RD/LD)** - one who has successfully completed a standard competency test administered by the American Dietetic Association and has completed license requirements of a state licensing agency.
- 13) **Screening** - Collection of preliminary information about a potential client to establish basic Title III C program eligibility. Information collected is (1) client name, (2) client date of birth, (3) client address, and (4) client telephone number. This activity is usually conducted over the telephone.
- 14) **Wait List** - Compilation of potential clients waiting to be served, persons who are waiting for additional services and persons waiting to be assessed and placed on the waitlist.

## **BUDGET DEFINITIONS AND TERMS**

- 1) **Cost Reimbursement** - Reimbursement method under which allowable and reasonable costs incurred by a Sub Recipient in the performance of a subcontract are reimbursed in accordance with the terms of the agreement.
- 2) **Federal Funds** - Funds appropriated to the State Unit on Aging through the Administration on Aging. Federal funds are allocated to each local Area Agency on Aging and Independent Living using a funding formula established at the Federal and State levels.
- 3) **Fixed Unit Price** - The unit price payment method allows for payment to contractor at an established unit price based on the number of units of service delivered for eligible meals consistent with service unit definitions.

- 4) **Match** - a contribution toward the overall cost of a project and may be a third-party in-kind contribution or cash. Program income may not be used as match. In-kind match is the value of a third-party contribution and may include: volunteer time, supplies or items donated that are used for approved program activities, use of facilities provided by outside entities, or supplies donated for use in a program. Cash match is the amount of the contribution provided directly through the second party, such as: staff time, cash, and use of facilities owned by the second party, supplies, materials, and other assistance toward the cost. All match must be through non-federal sources; not included as match toward other programs; necessary and reasonable to accomplish program objectives; allowable program cost; and verifiable. The provider will earn and report at least a 10% match for the combined total of federal and state dollars received.
- 5) **Program Income** - Income received from donations, contributions or fund raisers as a result of public awareness or services provided through the funded program. Income generated in excess of federal and state funds are considered program income. Program income shall be utilized toward program expansion. Providers will be responsible for the tracking and reporting all program income for the purpose of expanding allowable program services. Program income shall be expended in the period it was earned.
- 6) **State Funds** - Funds appropriated through the Kentucky General Assembly.
- 7) **Unit** - A unit is defined as one eligible meal served to an eligible client.
- 8) **Unduplicated Client Count** - The total number of eligible persons receiving services during any fiscal year per service. A client is not counted more than one time per year per service received.

## **RESPONSIBILITIES OF NUTRITION AND MEAL SERVICE PROVIDERS**

- 1) Monitor quality of meals and services delivered to clients, including monitoring of subcontractor services on a regular basis, utilize the standardized client satisfaction surveys provided by KIPDA and submit the completed surveys to KIPDA annually as specified in the final contract.
- 2) Solicit, collect, track and report all program income. Program income is spent to provide allowable nutrition services (primarily to deliver NSIP funded meals) in the period it was earned.
- 3) See the General Administration Policies and Procedures for additional duties/responsibilities of nutrition and meal service providers.

## **RESPONSIBILITIES OF KIPDA AAAIL**

- 1) Monitor the food service operation a minimum of twelve (12) times per year to evaluate compliance with nutrition program policies.
- 2) Provide congregate and home delivered meal program participants with an opportunity to evaluate meals and services, by survey, at least annually.
- 3) Complete the appropriate assessments in the required data base, including any malnutrition and related screenings.
  - Individuals who require assessing are typically identified through KIPDA's Aging and Disability Resource Center (ADRC), through a referral from a concerned individual, or through a web-based referral.
- 4) Offer a web-based referral system to the community according to the following process:

A referral form is available on KIPDA's website, and it is available for providers and community partners to utilize as well.

This form is meant to alleviate screening phones call for the convenience of the potential clients. It does not guarantee approval or availability of home-delivered meals.

**Process:**

Potential clients or someone on their behalf will complete the web-based inquiry form.

The results will be transmitted to KIPDA staff including: Quality Management Planner, Program Coordinator, all program support staff, and other staff as needed. The normal response process will be as follows:

- Support Services will review the inquiries daily
- Support Services will add the inquiries to the Nutrition Assessor's dashboards in the state- approved database daily
- Nutrition Assessors will follow the dashboard protocol once they are added
- After Support Services adds the inquiries to the nutrition assessor's dashboards, they will save the inquiry results in Excel form to the appropriate folder on the Aging drive.
- After the inquiries have been added to the dashboard and saved in an Excel form, support services will delete the responses in the web-inquiry cache.
- If a potential client is requesting information about programs other than Senior Nutrition, Support Services will send an email to the ADRC staff to follow up in the same fashion as a phone call.

- Quality Management Planner will use this database for satisfaction surveys, trouble shooting, and general process improvement.

- 5) Complete a referral to the appropriate program if a potential client is at risk for malnutrition.
- 6) Complete required journal entries or notes as applicable in the data system. Per guidance in September 2022, this should be completed and annotated every three months unless otherwise required.
- 4) See the General Administration Policies and Procedures for additional KIPDA duties/responsibilities.

## **CLIENT ELIGIBILITY**

- A. Policy:** Meals are served, without charge, to persons at least 60 years old, and other eligible individuals, throughout the seven county KIPDA region.

### **Procedures: Eligibility for congregate meals:**

1. A person aged sixty (60) or older and the spouse of that person;
2. Handicapped persons residing in elderly housing complexes where a congregate site is located;
3. Disabled individuals who reside in noninstitutional households with and accompany persons eligible for congregate meals;
4. Clients in Adult Day Care, Adult Day Health Care, and Alzheimer's Respite programs;
5. And after all participants have been served, volunteers may be served.

### **Procedures: Eligibility for home-delivered meals:**

1. A person aged sixty (60) or over and the spouse of that person, if:
  - a) Either is, by reason of illness or incapacitating disability, unable to attend a congregate site; and
  - b) There is no one in the home able to prepare a nutritious meal on a regular basis; or
2. A non-elderly disabled person who is a member of a non-institutional household with an elderly person who qualifies for home delivered meals.
3. Home Care Meals Program eligibility shall be in accord with 910 KAR 1:180.

### **Procedures: Staff and Guests**

1. Agency staffs under age sixty (60) are not entitled to meals and pay full costs.
2. Any individual who is not eligible under this section is considered a guest. Guests under age sixty (60) are not entitled to meals and must pay full costs.

### **Procedures: Intake, Registration, and Assessment**



1. Clients complete standard prescreening and intake forms, including nutrition and malnutrition risk, before meal service begins.
2. Congregate meal client's complete registration forms at least annually.
3. Home delivered meal clients complete an assessment of activities of daily living (ADL) and instrumental activities of daily living (IADL), before meal service begins.
  - a) Completed assessments are reviewed/approved by qualified/trained staff.
  - b) Clients are notified of eligibility approval or denial. Clients determined ineligible are advised of their right to appeal.
  - c) Clients receiving primarily hot meals are re-assessed annually.
4. Frozen meals may be used for home delivered meal clients who:
  - a) Express preference for frozen;
  - b) Live off an established meal route;
  - c) Live in an area without volunteers to deliver hot meals;
  - d) Live in a home with proper storage and heating facilities;
  - e) Can prepare and consume the meal alone.
  - f) Clients receiving mostly frozen meals are re-assessed semi-annually.

## **STAFFING AND ADMINISTRATION**

**A. Policy:** Correct numbers of trained and certified staff and/or volunteers are performing the duties designated in the Nutrition Program for Older Persons. Each has a written job description and they are reviewed and updated as needed. A staff member is designated as the lead person to oversee or supervise programs and staff. Documentation of staff attendance at training sessions is filed in personnel records. A criminal records check is conducted (and cleared) prior to hiring of any personnel working directly with the elderly.

### **Procedures: Professional staff**

1. A registered dietitian or certified nutritionist licensed by the Commonwealth of Kentucky is required to certify menus as meeting the nutritional requirements.
2. Only individuals who have been trained and meet the qualifications of an assessor can determine eligibility for the home delivered meal service.

### **Procedures: Food preparation and serving staff**

1. Standards for food handling and personal hygiene shall be in accordance with the State Food Service Code governed by 902 KAR 45:005.

### **Procedures: Volunteers**

1. Volunteers working in the NPOP are to complete training appropriate to the duties they perform.

## **MENU PLANNING AND MEAL COMPONENTS**

**A. Policy:** Nutrient dense meals are planned using preparation and delivery methods that preserve the nutritional value of foods. Meals served in the program comply with the Dietary Guidelines for Americans (HHS and USDA) and provide at least one-third of the Dietary Reference Intakes (DRI) established by the Food and Nutrition Board of the National Research Council of the National Academy of Sciences.

**Procedures:** Menus served in the KIPDA region are:

1. Planned with suggestions from participants.
2. Planned in advance on a monthly or quarterly basis; bearing the name of the person, preparing the menu.
3. Nutrient dense; their nutritional value is confirmed by nutrient analysis.
4. Certified by the local LD/CN as meeting the current Dietary Reference Intakes (DRI) based on nutrient analysis.
5. Served as written with minimal substitution to the approved menu. Substitutions are reported to KIPDA each month including date of substitution; original menu item; and the substitution.

**Procedures:** Copies of the menu are distributed:

1. One (1) copy is sent to the KIPDA Area Agency on Aging and Independent Living with proper documentation prior to use.
2. One (1) copy is retained by the meal preparer; kept on file for at least three years.
3. One (1) copy is sent to each meal service provider operating in the KIPDA region.
  - a) Congregate meal service providers post the current menu in a conspicuous location, and
  - b) Home delivered meal service providers supply a copy of the menu to homebound clients.

**Procedures: Special menus**

1. Kosher menus are available throughout the KIPDA region.
2. Food preferences of a participant majority are reflected in the menus served.
3. Therapeutic diets are not offered in the KIPDA region.
4. Vitamin and/or mineral supplements, medical foods and food for special dietary uses are not provided with NPOP funds.
5. When a potluck meal is served at a particular site, no congregate meal shall be served at that site. Home delivered meals shall be provided on the same basis as if the potluck meal had not been scheduled.

## **FOOD PROCUREMENT, PREPARATION, AND SAFE HANDLING**

**A. Policy: Food Procurement:** Foods purchased for use in the nutrition program must be of good quality and obtained from sources, conforming to federal, state and local regulatory standards for quality, sanitation, and safety.

**Procedures:**

1. Standard methods of purchasing should be used so the result is the best price for the quality desired; the use of term contracts for repetitively purchased items is encouraged.

**B. Policy: Food Preparation:** Standardized recipes must be used in food preparation; recipes must specify the yield and portion sizes required for the Nutrition Program for Older Persons.

**Procedures:**

1. Hot foods are produced within eight (8) hours preceding service unless otherwise directed in the recipe;
2. Protein foods are cooked completely once the cooking cycle has begun;
3. Foods served cold and neutral temperature foods may be prepared earlier than the preceding eight (8) hours if so directed in the recipe;
4. Solid and semisolid cooked foods stored under refrigeration are placed in containers that are no more than four (4) inches in depth.
5. Holding times are kept to an absolute minimum; the holding time for hot foods cannot exceed four (4) hours after preparation.

**Procedures: Temperature Standards**

1. Hot foods are packed at temperatures of at least 160 degrees Fahrenheit, and the internal temperature of hot foods are at least 135 degrees Fahrenheit during transportation and at least 135 degrees Fahrenheit during service; cold foods cannot exceed 40 degrees Fahrenheit during transportation and service.
2. Thermometers used to check food temperatures must be: Metal stem-type construction; numerically scaled; Accurate to plus or minus three (3) degrees Fahrenheit; and Checked periodically to ensure that each thermometer is registering accurately.
3. Food temperatures for both hot and cold items are checked and recorded daily at the kitchen and at the site of service. At meal sites, bulk containers of food should be placed in hot food warmers or under refrigeration until time of service.
4. Caterer personnel take the food temperatures when the food arrives at the site. They follow procedures below for checking food temperatures:
  - a) Clean the probe before use and between uses to prevent cross-contamination.
  - b) Insert the thermometer stem into the geometric center of the product and hold it there until the temperature is constant; record the temperature.
  - c) Sanitize the thermometer and store in its original protective sheath.
5. Nutrition Service personnel take food temperatures before serving. They follow procedures above for checking food temperatures.
6. Meals are not served when temperatures are unsafe.

**Procedure: Preparation Facilities**

1. Food preparation facilities comply with applicable state and local fire, health, sanitation and safety regulations.
2. Food preparation and service facilities are inspected regularly; inspection reports are kept on file for the year.
3. All frozen meals served in the KIPDA region are produced in facilities with a HACCP program in place.

**C. Policy: Food and Supply Delivery:** Foods are transported from the preparation kitchen to congregate and/or home delivery service sites in bulk, using a system that assures microbial safety, nutrient retention, and sensory qualities of the food products.

**Procedure:**

1. Meals and meal components are transported:
  - a) Using insulated containers designed for bulk food delivery;
  - b) Using stainless steel pans or aluminum disposable pans for hot foods; plastic for cold foods only;
  - c) Using a system that separates hot items from cold products; containers should be preheated or prechilled before being loaded.
  - d) Using the shortest delivery routes possible to minimize nutrient loss and to facilitate temperature retention.
  - e) Frozen meals are kept rock hard frozen during delivery.
2. Supplies are transported on a schedule that assures adequate and timely supply without excessive inventory.

## **CONGREGATE MEAL SERVICE**

**A. Policy:** Congregate meals are provided by nutrition service providers who, two (2) or more days per week provide at least one (1) hot or other appropriate meal in a congregate setting.

**Procedures:**

1. Congregate meals are ordered one week in advance; meal orders can be adjusted with one day notice.
2. Congregate meals are served after home delivered meals have been packaged. Foods are kept at appropriate temperatures during all phases of food service.
3. Milk and other cold food items are not preset on tables prior to meal service; tables may be preset with individually wrapped eating or drinking utensils.
4. Food items left over from meals may be offered as seconds to participants after all have been served; or discarded.
5. Clients are not prohibited from carrying out food items left from his/her meal. Carrying out potentially hazardous foods is discouraged; clients must be advised of the risks involved when foods are held at unsafe temperatures. Staff

- time or supplies used in the task of packaging individual menu items as carryout for participants is prohibited.
6. Only complete meals can be claimed for payment. The omission of any of the required meal components causes that meal to be incomplete and ineligible for payment and for NSIP reimbursement. Refusal by a participant of specific meal components will not make a meal incomplete. This “offered vs. served” provision applies to meal service at congregate sites but does not apply to the portioning of home delivered meals.
  7. An ongoing nutrition education program will be planned and offered; a minimum of one (1) session each month at each nutrition site. The program should use a wide range of teaching techniques for a variety of topics including nutrition and its relevance to health promotion/disease prevention, food fads, diets, food safety and physical activity.
  8. Participants scoring 6 or more points on the Nutritional Risk Assessment are referred to a registered or licensed dietitian or other health professional functioning within their legal scope of practice for nutrition counseling.
  9. An older person cannot be denied service because he/she does not or cannot contribute to the cost of the service;

## **HOME DELIVERED MEAL SERVICE**

- A. Policy:** Home delivered meals are provided by nutrition service providers who, five (5) days a week, provide at least one (1) home delivered hot, cold, frozen, or shelf-stable meal per day.

### **Procedures:**

1. Meals for homebound clients are ordered one week in advance; meal orders can be adjusted with one day notice.
2. Meals are delivered only to eligible persons in their homes. (Section 5.5)
3. Participants can be referred to the Nutrition Program for Older Persons by, but not limited to, the following:
  - a) Participant (self-referral)
  - b) Family, friend, neighbor, church
  - c) Local Government Agency, Social Service Agency, Aging Network, Social Service Professionals, KIPDA Case Managers
  - d) Health Professionals, Allied Health Professionals
4. Providers of home delivered meals must use methods of delivery that prevent outside contamination and hold food at appropriate temperatures.
  - a) Delivery routes shall be kept as short as possible to minimize nutrient loss and to facilitate temperature retention. Nutrition service providers notify the participant if the meal delivery day(s) change or if the meal(s) will not be delivered.
  - b) Meals shall be delivered within four (4) hours from the end of preparation to the final destination. If volunteers are used, then the nutrition service

providers develop a back-up system using paid staff to guarantee delivery of meals.

- c) Nutrition site personnel check and record temperatures of meals at least weekly toward the end of the longest delivery route. Infrared thermometers may be used during the home delivery route to check weekly temperatures of hot and frozen meals. When using infrared thermometer, two (2) temperatures must be taken to ensure accuracy, one from above the product and one from below. When temperature retention problems are found, daily checks of temperatures are made until the problem is corrected.
  - d) Heated delivery equipment is recommended; when heated delivery equipment is not available, other means to hold temperature are used;
  - e) Neutral temperature foods are packaged and delivered in a way that prevents outside contamination; and
  - f) Frozen meals are kept rock hard frozen during delivery, thirty-two (32) degrees or below. When the meal has thawed it cannot be refrozen for later use; a meal, which has begun to thaw, may be held for a brief period at forty (40) degrees Fahrenheit or below, or heated and consumed immediately.
  - g) Meals may be left with a designee of the older person provided the designee has been informed of the requirements of the nutrition program and has indicated a willingness to comply with those requirements.
  - h) Only complete meals can be claimed for payment. The omission of any of the required meal components causes that meal to be incomplete and ineligible for payment and for NSIP reimbursement.
5. Twelve nutrition education units will be planned and offered to participants in the home delivered meal program each year.
  6. Participants and their families cannot be denied meals if they are not able to pick-up and deliver meals to their eligible relative and there can be no coercion in using participants' relatives to deliver meals to the homebound.
  7. An older person cannot be denied service because he/she does not or cannot contribute to the cost of the service.

## **EMERGENCY MEALS**

- A. Policy:** Emergency meals are available during inclement weather conditions, power failure, or any disaster that may cause isolation or create a special need.

### **Procedure:**

1. Menus are planned for a minimum of five (5) days;
2. Menus are certified in writing by the local LD/CN as meeting the current Dietary Reference Intakes (DRI) based on nutrient analysis.
3. The menu includes foods, which require no cooking prior to consumption;
4. Emergency meal packages are distributed to homebound clients and may be used for congregate participants when centers are closed;
5. For reporting purposes, meals are counted during the month in which they were distributed.

## **NUTRITION SERVICES AND INCENTIVE PROGRAM (NSIP)**

- A. Policy:** The NSIP is based on a performance incentive model. KIPDA receives funding based on the number of meals actually served in the KIPDA region in relationship to the total number of meals actually served in the state in the previous year.

### **Procedure:**

1. KIPDA may disburse NSIP monies to meal service providers based upon each provider's proportion of the total number of eligible meals served in the region for the previous fiscal year.
  - a) Disbursements of cash are made quarterly, upon receipt of funds from DAIL.
  - b) The provider shall expend NSIP monies within one (1) year.
  - c) NSIP funds shall be used to expand the total number of meals provided and shall not be used to reduce funds from any other grant or contract.
2. The meal provider maintains records to show the amount of cash received and to demonstrate how NSIP funds are used to expand KIPDA funded nutrition services program;
3. The meal provider uses cash to purchase foods for the nutrition program;
  - a) Purchase meals provided the cost of the meal is quoted as a unit cost, which includes both food and labor.
  - b) Only meals and actually consumed by eligible participants may be claimed;
  - c) Meals claimed for reimbursement cannot be claimed under other USDA reimbursement programs;
4. Financial records maintained by the provider will show:
  - a) NSIP funds are used as a revenue source for expansion of meals served in the region;
  - b) The unit cost of a meal is not reduced in anticipation of future NSIP reimbursement but is stated as a true cost in both bidding and reporting procedures; and
  - c) Monthly financial reports reflect NSIP expenditures.

## **NUTRITION PROGRAM MONITORING**

- A. Policy:** Nutrition Program for Older Persons contractors are responsible for monitoring sites and program records monthly. There will be an on-site inspection of individual sites at least twice each contract year, including sites/services operated by subcontractors.

### **Procedure:**

1. The monitoring visits will assure quality service and include at least the following:
  - a) Monitor sites regularly for at least the following:

- b) Food handling and food storage practices
  - c) Meal assembly and meal service
  - d) Meal serving times
  - e) Food temperatures
  - f) Facility cleanliness and supply storage
  - g) Client records
  - h) Customer service
2. Monitor meal delivery routes for at least the following:
    - a) Meal delivery times
    - b) Meal temperatures
    - c) Customer service
  3. Monitoring activities will be reported to KIPDA quarterly
    - a) Reports (findings) and corrective actions will be available to KIPDA as requested.

## **NUTRITION PROGRAM COSTS**

### **A. Policy:** Ready-to-serve meal costs include the following:

1. The cost of raw food, including food purchased with NSIP cash resources;
2. The costs of serving supplies, disposables, cleaning materials, and non-capital items used in the preparation of food;
3. The costs of labor for food preparation, cooking, portioning of foods, and delivery of food to the site of service. Labor costs shall include
  - a) Wages for persons who prepare food and maintain a sanitary facility;
  - b) Fringe benefits;
  - c) Wages paid for time spent in food and supplies inventorying, storing and receiving and in direct supervision of employees;
  - d) The costs of space, related utility costs, and equipment operation, maintenance and repair costs; and
  - e) The non-labor costs of transporting food, food storage, insurance and general liability.

### **B. Policy:** Food service and delivery costs shall include:

1. The total labor costs for serving foods and for home delivery of meals to participants;
2. Mileage and maintenance of vehicles costs for home delivery of meals;
3. Costs incurred for nutrition education and nutrition outreach services;
4. Project management costs, including personnel, equipment and supply costs; and
5. Other general expenses related to overall program management.

### **C. Policy:** The meal provider is responsible, at the caterer's expense, for replacing any meal shortages, or meals received at the site at unsafe temperatures which cannot be served.



## NUTRITION PROGRAM REPORTING AND RECORDING

- A. Policy:** An individual record for each NPOP participant is maintained in the KIPDA client data tracking system and will include at least:
1. Complete client demographic information including Social Security number and date of birth, household composition, income, county of residence, race and ethnicity, emergency contacts, NRA;
  2. All required NAPIS information (listed above) and ADL's and IADL's for each potential home delivered meal client, are entered into the required database wait list or opened for meal service, ten (10) days after they are approved;
  3. Note the referral of each client with a high self-reported NRA score (6 or more points) to registered or licensed dietitian or other health professional functioning within their legal scope of practice.
  4. Update client profile information least annually.
- B. Policy:** Meal units are recorded for each NPOP participant in the KIPDA client data tracking system as follows:
1. Enter meal units at least weekly;
  2. Enter emergency meals (shelf-stable) in the month they are delivered;
  3. Meal units may not be entered into the client data tracking system before they have been served to the client.
- C. Policy:** Client eligibility determination is billed to KIPDA as follows;
1. Submit invoices monthly;
  2. Report the number addressed, determined eligible, and opened for meal or waitlist service;
  3. Report Title III C-1 and C-2 expenses separately.

## **Appendix**

- **Applicable DAIL Taxonomy**

## TITLE III C

### Senior Nutrition Program

#### DAIL TAXONOMY JUNE 2022

DAIL's taxonomy is to be used as the primary guide for providers to bill units while providing services.

#### Nutrition Counseling (1 Unit =1 session per participant)

Individualized guidance to individuals who are at nutritional risk because of their health or nutritional history, dietary intake, chronic illnesses, or medications use, or to caregivers. Counseling is provided one-on-one by a registered dietitian and addresses the options and methods for improving nutrition status.

Authority: 910 KAR 1:190 Administration on Community Living National Aging Program Information System (NAPIS) definition

Requirements: Units must be reported in the state-preferred electronic record system; however, they are not billable as they are already included as part of the meal service.

#### Nutrition Education (1 Unit =1 session per participant / month minimum)

A program to promote better health by providing accurate and culturally sensitive nutrition, physical fitness, or health (as it relates to nutrition) information and instruction to participants, caregivers, or participants and caregivers in a group or individual setting overseen by a dietitian or individual of comparable expertise. Nutrition Education units may be counted as individual or in consumer groups with the number of units equal to the number of participants provided education.

For example, if thirty (30) participants attend a nutrition session at a Senior Center that would be reported as thirty (30) unduplicated clients and thirty (30) units of nutrition education. Nutrition education must occur at least once per month and the units should accumulate throughout the year. The nutrition education program shall include a variety of teaching methods on the following topic: Nutrition and its relevance to health promotion and disease prevention, consumer approaches to food safety and food purchasing, food fad and diets, physical activity, and activities to modify behavior and improve health literacy including providing information and optimal nutrients.

Authority: 910 KAR 1:190 Administration on Community Living National Aging Program Information System (NAPIS) definition

Requirements: Units must be reported in the state-preferred electronic record system; however, they are not a billable as they are included as part of the meal service.

Title III-C1 Congregate Meals (1 Unit =1 Meal)

A meal provided to a qualified individual in a congregate or group setting. A qualified individual (over 60 years of age and their spouse, volunteers providing services during meal hours, individuals with disabilities who reside at home with older eligible individuals, individuals with disabilities who reside in housing facilities occupied primarily by older individuals at which congregate meals are served in his or her place of residence.) The meal shall provide one-third (1/3) of the Dietary Reference Intake (DRI), meet the requirements of the most recent Dietary Guidelines for Americans, and have been approved by a Kentucky licensed dietitian or certified nutritionist. Congregate meals shall be provided by a nutrition service provider, five (5) or more days a week, in each rural or urban community within the nutrition service provider's service and planning area, provides at least one (1) hot or non-traditional meal per day and any additional meals which the nutrition service provider may elect to provide in a congregate setting.

Authority: 910 KAR 1:190 Section 1(6); 910 KAR 1:190, Section 4. Administration on Community Living National Aging Program Information System (NAPIS) definition

Requirements: KY Basic NAPIS; DAIL approved Assessment A-C

Title III-C2 Home Delivered Meals – (1 Unit =1 Meal)

A meal provided to a qualified individual in his or her place of residence. A qualified individual shall be eligible for home-delivered nutrition services if the individual is a person aged sixty-(60) or over or the spouse of a person aged sixty-(60) or over. The individual must not be able to attend a congregate site because of illness or an incapacitating disability, and do not have an individual in the home who is able to prepare a nutritious meal on a regular basis. These items must be documented within their assessments. Others that qualify include those under age sixty-(60) who have a disability and resides with a homebound individual aged sixty-(60) or over. The meal shall provide one-third (1/3) of the dietary reference intakes (DRI), meet the requirements of the most recent Dietary Guidelines for Americans, and have been approved by a Kentucky licensed dietitian or certified nutritionist. Home Delivered Meals shall be provided by a nutrition

service provider who, five (5) or more days a week, in each rural or urban community within the nutrition service provider's service and planning area, provide at least one (1) hot or non-traditional meal per day, and any additional meals which the nutrition service provider may elect to provide.

Authority: 910 KAR 1:190, Section 1(14); 910 KAR 1:190, Section 5. Administration on Community Living National Aging Program Information System (NAPIS) definition.

Requirements: Kentucky Approved Assessment Tool A-D annually. Districts can choose to case manage if needed but must document in the state approved data system.