

FY2022 Title III-C2 Home Delivered Meal Service Narrative

Overview

AgeGuide Northeastern Illinois is seeking applications from organizations interested in providing Older Americans Act Title III-C2 Home Delivered Meal services. Nutrition services are provided to assist older adults to live independently by promoting better health through improved nutrition and reduced isolation through a program coordinated with other supportive services.

The Home Delivered Meal program provides a nutritious daily hot meal to those individuals deemed eligible for the program who are aged 60 or over, frail and/or homebound, or otherwise isolated. In addition to the nutritious meal, the delivery person is able to check-in with clients and note any changes or conditions that may require notification of a social worker, emergency contact, or even emergency medical assistance. The Home Delivered Meal program has been found to be extremely helpful in combating isolation.

Meals are to be provided throughout the county service area to provide maximum coverage to older individuals in greatest economic and social need, with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals at risk of institutionalization, and older individuals residing in rural areas. Nutrition providers are expected to have an active role in the network of organizations providing services to older adults and work collaboratively with other service providers.

Statement on Serving Populations in Greatest Economic and Social Need

As outlined in the *AgeGuide General Service Requirements*, providers must assign priority, in the provision of services, to older adults in greatest economic and social need (“target populations”), at a rate at least in proportion to the incidence level of each group within the county. To achieve this outcome, providers must develop strategic plans to reach and provide services to these target populations which are defined in the federal Older American’s Act and the Illinois Act on the Aging as the following:

- Older adults with income at or below federal poverty guidelines,
- Minority older adults,
- Older adults age 75+,
- Older adults living alone,
- Older adults with Limited English Proficiency,
- Older adults who are frail,
- Older adults with severe disabilities,
- Older adults with dementia and related disorders (and their caretakers), and
- Older adults at risk for institutional placement.

FY2022 Title III-C2 Home Delivered Meal Service Narrative

- The Illinois Act on the Aging [20 ILCS 105/3.11] expanded the definition of “greatest social need” to the need caused by noneconomic factors that restrict an individual's ability to perform normal daily tasks or that threaten one’s capacity to live independently.
 - These factors include:
 - Physical or mental disability,
 - Language barriers and,
 - Cultural or social isolation caused by, among other things, racial and ethnic status, sexual orientation, gender identity, gender expression, or HIV status.

Service Design

Home Delivered Meal programs should locate sites and organize volunteer and paid delivery routes in order to provide maximum coverage to the county service area. Home delivered meal programs depend extensively on delivery volunteers. Recruiting, training, and scheduling volunteers should be a priority in designing a program. Nutrition providers are encouraged to study current trends in volunteer recruitment and retention when designing the program.

All nutrition sites must pass a local health department inspection at least annually. A site manager with valid Certified Food Protection Manager certification must be present when the site is operating. All other staff and volunteers handling food must be trained in safe food handling practices and have completed a background check.

Meals provided must meet nutritional analysis requirements, or menu plan requirements, as detailed in the Nutrition Standards. Menus must be planned in advance of service and approved by a Registered Dietitian. Menus should be appetizing offering a variety of flavors, colors, and textures. A hot meal should be served; however, cold meals may be provided occasionally as appropriate. Frozen meals may be provided in circumstances where daily delivery is not feasible; however, the client’s ability to store and heat frozen meals must be assessed.

Providers should have a written plan for conducting well-being checks as part of service provision. Providers should be culturally competent and responsive to diverse populations, including providing barrier-free access to inquirers who speak languages other than English and inquirers with hearing or speech impairments.

III-C2 service providers will be required to perform the following activities:

1. Home Delivered Meal service providers should supply one hot meal a day delivered five days a week. However, the Agency on Aging may grant exceptions if the nutrition provider submits documentation of the need for an exception.
2. Allocated cost per unit (Title III-C1 funds divided by units) will not exceed \$7.50 per unit. Total cost per unit will be reasonable and justifiable based on the report “Older Americans Act Nutrition Program Evaluation: Meal Cost Analysis” Mathematica Policy Research, September

FY2022 Title III-C2 Home Delivered Meal Service Narrative

25, 2015. A reasonable cost increase may be used to extrapolate cost from the date of the study forward. Grant applicants should provide written explanation of how projected cost per unit agrees with this information.

3. Nutrition programs must have written plans to address adjustments to program design and delivery in the event of a natural disaster and/or pandemic emergencies and disasters. Home delivered meal clients should be provided with emergency shelf stable meals at least two times per year. See Nutrition Standards for more specifics on shelf stable meals.
4. Nutrition providers are responsible for coordinating with the Case Coordination Unit (CCU) and Managed Care Organizations (MCO) to facilitate the assessment and referral of home delivered meal clients. Nutrition Providers should ensure all personal client information is kept confidential. The nutrition provider is responsible for timely and complete data entry into AgingIS. The purpose of this information is to meet all state and federal reporting requirements.
5. Clients are to be given the opportunity to voluntarily contribute to the cost of the meal. A confidential system of collecting voluntary donations from clients is to be established and implemented. Clients may not be denied a meal because they cannot or will not contribute to the cost of the meal. Written notices to clients soliciting donations should be carefully and tactfully worded as a request for donation.
6. Nutrition education is to be provided at least two times per year and it is strongly recommended that nutrition education be provided quarterly and more frequently if possible. The purpose of nutrition education is to inform individuals about available facts and information that will promote improved food selection, eating habits, nutrition and health-related practices. Material presented should be from credible sources with valid credentials in nutrition science. AgeGuide staff are available to assist nutrition providers with suggestions of topics and sources of information.
7. The nutrition provider is to collect input and feedback from program participants. AgeGuide may mandate a specific survey instrument or specific survey questions be used and results reported to the Area Agency.
8. Nutrition providers are responsible for collecting all necessary client registration information using the Illinois Department on Aging Registration for Home Delivered Meals form, ensuring this information is kept confidential, and timely and complete data entry into AgingIS. The purpose of this information is to meet all state and federal reporting requirements.
9. Adhere to the AgeGuide General Service Requirements and the program specific requirements as well as reporting requirements for these services, including completion of an annual demographic data report for Be responsible for reporting requirements for these services. Visit the Agency on Aging website (www.ageguide.org) for additional information on reporting requirements.