

MEMORANDUM

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Notice #: 120309 – Notice of Clarification: Requirements for a Congregate Meal - sv

TO: All PSA 6 Nutrition Providers
FROM: Sarah Van Dyke, Program Manager
DATE: December 3, 2009
SUBJECT: Notice of Clarification: Requirements for a Congregate Meal

The purpose of this memorandum is to provide further clarification of **Notice of Instruction: #100809 – Congregate Memo - sv** dated October 8, 2009.

Please note the following:

- Effective immediately, prior to providing meals intended for consumption at home to any additional congregate meal clients, the provider must assess the clients, using Form 701B, Type O, and Form 217, if applicable.
- Routine provision of additional meals to congregate meal clients intended for consumption in the home requires an assessment of the client for home-delivered meals using Form 701B, Type O, and Form 217 Client Evaluation Form for Frozen or Cold Home Delivered Meals. **NOTE:** Routine provision of additional meals does not include the provision of holiday or emergency/disaster meals.
- Since implementation of this notice requires consideration of the needs of current congregate meal clients receiving meals intended for consumption at home, providers if necessary may continue current practices until these current congregate meal clients are terminated or attrite from the program. For monitoring purposes, the provider must maintain documentation, including the client assessments to confirm services to individuals in this situation.

The goal is to comply fully with the requirements of the Older Americans Act in ensuring the provision of congregate meals in congregate meal settings and to ensure adherence to the 2009 Summary of Program and Services Handbook in the provision of home-delivered meals to individuals who need in-home services.

Should you have any questions about the information provided in this Notice of Clarification, please do not hesitate to contact your Program Manager.

Thank you very much for your assistance and cooperation.

DEPARTMENT OF ELDER AFFAIRS PROGRAMS AND SERVICES HANDBOOK
Chapter 4: Older Americans Act

Service Requirements: Section 5—Nutrition Program Policies
Attachment 1: Client Evaluation Form for Frozen, Home Delivered Meals—DOEA Form 217

CLIENT EVALUATION FORM FOR FROZEN, HOME DELIVERED MEALS

NAME: _____

ADDRESS: _____

PHONE: _____

IN EMERGENCY CONTACT: _____

PHONE: _____

Rating: Place an "X" in the appropriate space.

PHYSICAL EVALUATION:

_____ GOOD _____ FAIR _____ POOR

If poor, please explain: _____

EYESIGHT:

_____ GOOD _____ FAIR _____ POOR

If poor, please explain: _____

ABILITY TO MOVE AROUND IN KITCHEN: (GENERAL MOBILITY; WALKER, CANE, ETC:)

_____ GOOD _____ FAIR _____ POOR

If poor, please explain: _____

ABILITY TO PERFORM SMALL MOTOR TASKS (ARTHRITIS?):

_____ GOOD _____ FAIR _____ POOR

If poor, please explain: _____

DOEA Form 217, July 2008

Notice of Instruction

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West Central Florida
Area Agency on Aging, Inc.



Assistance. Advocacy. Answers on Aging.

Notice of Instruction Number: #100809 – Congregate Memo - sv

TO: All PSA 6 Lead Agencies
FROM: Sarah Van Dyke, Program Manager
DATE: October 8, 2009
SUBJECT: Requirements for a Congregate Meal

The purpose of this notice of instruction is to clarify the requirements that apply when a congregate-meal client is provided with an additional meal that is intended for consumption outside of the congregate setting.

Any Older Americans Act funded congregate meal must be served in a congregate setting. Provision of any type of meal — whether breakfast, supper, weekend, holiday or any other meal — that will be consumed away from a congregate meal site during operating hours is not to be considered “serving a congregate meal.” If an additional meal is provided to a congregate-meal client (for consumption away from the congregate setting), that meal is to be considered a “home-delivered meal.”

Clients who receive a meal to be consumed outside of the congregate setting must be assessed to determine the need for such additional meal(s). The client’s need for meals outside of the congregate setting must be well documented using the *701B Form*, and that client’s ability to safely heat and consume home-delivered meals must be documented using the *Client Evaluation Form for Frozen, Home Delivered Meals—DOEA Form 217*.

If it is determined that a congregate-meal participant is not eligible for a home-delivered meal (but still needs breakfast, supper, weekend or holiday meals due to food insecurity), the provider must consider other resources, such as the provision of material aid, assistance with a food stamp application or assistance in food procurement from local food banks or pantries.

If you have any questions or specific concerns about this Notice of Instruction, please contact your Program Manager.

Thank you for your cooperation.

Attachment:
DOEA Form 217