

SUFFOLK COUNTY
OFFICE FOR THE AGING

NUTRITION PROGRAM FOR THE ELDERLY

HOME DELIVERED MEAL PROGRAM
POLICY AND PROCEDURE MANUAL

May 2016

**SUFFOLK COUNTY OFFICE FOR THE AGING
HOME DELIVERED MEAL PROGRAM
POLICY AND PROCEDURE MANUAL**

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INTRODUCTION

This Policy and Procedure Manual has been developed as a guide to program providers in carrying out the service of home delivered meals. The manual was also developed to assure uniformity and consistency in the home delivered meal program throughout Suffolk County. Within the manual are policies, procedures, forms and other pertinent information.

You will find forms, sample letters and posters in Section III Appendix. Please feel free to copy these for use or reference. Whenever these are updated, you will be asked to replace them with the updated versions so that information will remain current.

Section I - Administration

HOME DELIVERED MEAL PROGRAM EVALUATION

POLICY

The program will be evaluated annually, at a minimum, by the Suffolk County Office for the Aging. This visit will include adherence to program guidelines with respect to meal packaging, temperature and equipment. Additionally, methods of contribution collection and procedures for securing anonymity of clients and security of contributions are covered. Vehicle mileage, decals and condition are also checked.

PROCEDURE

Suffolk County Office for the Aging staff will visit each program and will perform evaluations to ensure compliance with program outlines. Specific evaluation forms (See Section III Appendix) that encompasses the scope of the program will be utilized. Recommendations for improvement are discussed at this time. The following is a checklist of the items monitored:

- Meal Packaging including Labeling
- Temperature of Meals
- Equipment
- Routing
- Contributions and Client Anonymity
- Contribution Handling
- Vehicle Mileage

The results of each visit are reviewed by SCOFA staff and a follow up letter is sent to the Nutrition Program Director and Manager. If corrective action is necessary, a letter outlining the findings will be sent to the Nutrition Program Director and Site Manager. A written response to the findings should follow. The corrective action taken will be verified at the next monitoring or sooner, at the discretion of the Suffolk County Office for the Aging.

PROGRAMMATIC MONITORING

POLICY

The program will be monitored annually, at a minimum, by the Suffolk County Office for the Aging and the New York State Office for the Aging. This monitoring will include adherence to program guidelines with respect to contributions, meal delivery and other facets of the program. Specific monitoring forms will be utilized.(See Section III Appendix)

PROCEDURE

DURING A PROGRAMMATIC MONITORING, THE FOLLOWING WILL BE OBSERVED:

- Past Performance/Previous Recommendations
- Service Activity – Units of Service and Expenditures
- Verification of Reported Units – meals served; clients served; outreach; transportation and essential transportation (AAA, if applicable)
- Electronic Reporting
- Timeliness of Reports
- Targeting Compliance
- Telephonic Interpretation Services
- Coordination of other Services
- Staffing/Training, Documentation and Record Keeping (Certificates and Training Sign-in Sheets, client files and personnel files)
- Administrative/Management
- Safeguarding Funds/Asset Protection
- Contributions/Surveys/Client Feedback
- Required Postings/Signs

The results of each visit are reviewed by SCOFA staff and a follow up letter is sent to the Nutrition Program Director and Manager. If corrective action is necessary, a letter outlining the findings will be sent to the Nutrition Program Director and Site Manager. A written response to the findings should follow. The corrective action taken will be verified at the next monitoring or sooner, at the discretion of the Suffolk County Office for the Aging.

COUNTY VEHICLE MONITORING

POLICY

A Monthly mileage report is required for all Suffolk County Vehicles. All county owned vehicles will require an annual inspection report to be completed by a site staff member. It is expected that proper insurance and inspection are current and that routine maintenance and repairs are performed as needed.

PROCEDURE

Monthly mileage reports (See Form in Section III Appendix) and general condition of vehicle must be sent to Suffolk County Office for the Aging by the 10th of each month for the prior month. Documentation for vehicle repairs, maintenance, inspections, etc. (i.e. invoices/bills) are required once annually for the preceding 6-12 months.

AVAILABILITY OF CPR EQUIPMENT

All nutrition sites are required to post a CPR sign/poster (See Section III Appendix). This should include the name of resuscitation equipment and location, name of Emergency Medical Services (EMS) and phone number, qualified CPR training available in their area which may include but are not limited to the American Red Cross and American Heart Association.

TARGETING AND OUTREACH

POLICY

Each Program must plan activities that are designed to increase participation of unserved and underserved older adults in greatest social or economic need, particularly those older adults who are:

- Low income
- Low income minorities
- Individuals with Limited English proficiency (LEP)
- Rural residents
- Native Americans
- Individuals who are institutionalized or at risk for institutionalization
- Individuals with Alzheimer's and related disorders
- Individuals with disabilities
- Caregivers of individuals with Alzheimer's or related disorders and individuals with disabilities
- Minorities
- Frail individuals
- Vulnerable individuals
- Lesbian, Gay, Bi-sexual or Transgender
- Homebound

PROCEDURE

Each contractor must have a method of outreach which may include flyers, newsletters and menus. However, the use of these items alone is not sufficient. Contact with local medical offices, senior citizen complex offices, churches, senior clubs and other places that are frequented by senior citizens within a reasonable catchment area are good places to contact for this purpose with special attention to those with disabilities. To ensure access to those who are not proficient in the English language multi-lingual staff may also be considered to assist with successful outreach efforts. Each program must contract with a language interpretation service.

LIMITED ENGLISH PROFICIENCY

POLICY

Each contractor must be able to communicate effectively with individuals who are not proficient in the English Language or are considered to be Limited in English Proficiency (LEP).

PROCEDURE

Each contractor, at a minimum, must maintain a telephonic interpretation service contract with a service provider of their choice. The contractor's staff for this program with public contact must be aware of, and trained in the timely and appropriate use of, these language services. The contractor shall also ensure that LEP persons are informed of the availability of language assistance, free of charge, by providing written notice in languages LEP persons will understand.

ELIGIBILITY CRITERIA

POLICY

Client eligibility must be determined prior to the delivery of meals based on specific criteria. A personal assessment performed by a qualified assessor must be completed to make this determination.

PROCEDURE

A qualified home delivered meal assessor (See Assessor requirements in the job description section of this manual) must determine eligibility of a client based on the following:

- Applicant must be physically and /or mentally unable to prepare or provide for his/her own nutritional needs, and be unable to attend a congregate nutrition site, and have no alternatives through which his/her nutritional needs can be met without hospitalization or institutionalization.
- Applicant must be 60 or over, or a resident spouse of a participant who is eligible and is receiving home-delivered meals.
- Applicant must reside in the County of Suffolk and within established or proposed delivery area served by the Nutrition Site.
- Applicant must live alone or with a spouse or resident who is unable to provide nutritionally adequate meals for the applicant.
- Applicant must have no family, or other persons, in the immediate area who are capable and willing to provide nutritionally adequate meals for the applicant.
- Applicant must be able to accept responsibility for consumption of home-delivered meals according to the instructions established by the Home Delivered Meal Program.

Short term meal service criteria

In addition to the criteria listed above the following criteria must be met for short term service:

- Applicant is recuperating from major or acute illness and was able to prepare meals prior to these problems.
- The spouse of the applicant (who usually prepared meals) is hospitalized.
- The applicant is awaiting placement of a supportive service (homemaker, home health aide or placement in a supervised facility).
- The applicant needs home delivered meals during the winter months when weather conditions and absence of family, friends or neighbors make it impossible for client to obtain necessary food items for meal preparation.

NOTE: In applying based on the above criteria, it is understood that home delivered meal service is not a substitute for institutionalization, if the latter is assessed to be necessary for immediate welfare of the client.

NEEDS ASSESSMENT

POLICY

All programs providing home delivered meals shall have completed intake and assessment, and 6 month contact forms in an individual file for each client.

PROCEDURE

When receiving referrals for home delivered meals, staff will complete the Community Based Long Term Care Services Intake Information form. Following completion of the Intake Information Form, (See Section III Appendix) a visit will then be scheduled to the prospective client to assess their needs.

Once eligibility has been determined (based on eligibility requirements) an assessment for the client **MUST** be completed prior to meal(s) served. In emergency situations, a meal may be served prior to the completed assessment with approval from SCOFA. In this instance, an assessment must be completed within 5 days. Failure to comply with this policy could result in a loss of reimbursement for meals served prior to an assessment being completed.

The completed NY Comprehensive AFM Assessment form (COMPASS or long form) will be kept at the site in additional folders in locked, secure location. A care plan may be in effect for no longer than 12 months before assessment. However, if there is a change in the client's situation which would affect the care plan, the client must be reassessed sooner. Event-based reassessments must be conducted within 5 days of the time you become aware of any changes regarding the appropriateness of the current care plan.

A follow-up contact is required at 6 months. For non-case managed home delivered meal clients, this may be a telephone contact exploring the 9 subject areas detailed in the 6 month follow up form (See Section III Appendix).

If nutrition counseling is indicated, the Suffolk County Office for the Aging staff nutritionist shall be notified and a referral made.

The intake, assessment required to be entered into the automated system and the six month follow up and nutrition counseling referral forms are all available in Section III Appendix.

SIX-MONTH CONTACT FOR HOME-DELIVERED MEAL CLIENTS

POLICY

All home delivered meal clients must be contacted at six month intervals providing there are no life changing experiences (i.e. death of a spouse, change in health status). In the event of a life changing experience an assessment must be performed prior to the six month date. During this contact key information must be updated and entered into the automated system. If there is a life changing event, an entire assessment is required.

PROCEDURE

Home delivered meal six month contact must explore the nine areas listed below to determine if any changes have occurred since the last assessment:

1. Health Status
2. Nutrition (Status and Service)
3. Psycho-Social Status
4. Medication Usage
5. Instrumental Activities of Daily Living
6. Activities of Daily Living
7. Informational Support Status
8. Services Client is Currently Receiving
9. Continued Eligibility

A detailed explanation of the nine areas listed above is available in Section III Appendix along with a Six Month Home Delivered Meal Contact Form.

CLIENT SECURITY AND CONFIDENTIALITY

POLICY

Confidential records shall be maintained on each recipient of meals. These must be stored in a locked and secured area. No personal or identifying information in conjunction with this program may be disclosed in a form in which it identifies the individual without the documented consent of that individual, except to Suffolk County Office for the Aging.

PROCEDURE

Client records and information must remain secure. Client information must be stored in a secure place and there must be strict policies to ensure that client information is not shared for any reason other than reasons pertaining to the program. Each site must have policies for record retention, maintenance and the procedure to discard records (i.e. shredding). This includes but is not limited to the security of automated records (passwords, policies for changing passwords, etc.). Programs using portable electronic devices (tablets, laptops or off-site computers) must have a security policy in place including but not limited to confidential passwords and log-in information.

DIETARY MODIFICATIONS

PHYSICIANS ORDERS

POLICY

There are only two dietary modifications that can be implemented by the home delivered meal program:

1. Diabetic (no concentrated sweets)
2. Low Sodium

Any other restrictions cannot be accommodated by this program. All dietary modifications must be in writing by the participant's physician. All dietary modifications must be kept current and on file.

PROCEDURE

Home delivered meal participants requiring a dietary modification must have a written and dated diet prescription by the participant's physician. Upon receipt of the written request the participant will receive the specified dietary modification. Once a written diet prescription is received it should be placed in the participant's file. Dietary modifications should be updated a minimum of every six months. A sample physician's letter is available in Section III Appendix along with permission for the assessor to consult with the client's physician for this purpose.

CONTRIBUTIONS

POLICY

Each person receiving a home delivered meal must be informed of the opportunity to make a voluntary, anonymous contribution toward the cost of the meal, and the amount of the suggested contribution. Participants must be advised that contributions are used to expand the programs. Letters may be sent to caregivers or family members providing the client has given permission to contact them. A release form is available in Section III Appendix.

PROCEDURE

A letter shall be sent to each home delivered meal participant not more than once a month. The letter must contain information about contributions including statements that address the following:

- Contributions for meals are confidential and voluntary and individuals are free to choose the amount they wish to contribute
- Any contribution made is used to expand the program
- No one will be denied the service due to the inability or unwillingness to contribute
- Persons with self-declared incomes at or above 185% of the federal poverty level are encouraged to make a contribution equal to the actual cost of the meal

A sample home delivered meal letter is available in Section III Appendix.

Food stamps are acceptable in lieu of voluntary cash contributions. However, the subcontractor must be certified to accept food stamps.

CLIENT FEEDBACK

POLICY

All sites shall have a means to allow clients the opportunity to comment on services. Programs may choose to survey clients in order to receive their comments and input about services.

PROCEDURE

Suggestions and comments received from participants should be given to the program manager. These comments and client suggestions should and taken into consideration whenever possible.

HOME DELIVERED MEAL SURVEY

POLICY

Participant's comments on the home delivered meal nutrition program should be solicited at a minimum of one time per year when SCOFA distributes Home Delivered Meal Surveys.

Results of surveys will be shared with the Program Managers. A copy of the most recent survey may be found in Section III Appendix.

CLIENT RIGHTS

POLICY

All sites shall have a clear understanding of client rights and a grievance procedure in place for older individuals who are dissatisfied with or denied service.

PROCEDURE

The procedure for filing grievances shall be posted in a clearly visible place where seniors congregate and posted in both Spanish and English. These procedures should be available in other languages upon request.

FILING A GRIEVANCE

Grievance procedures shall apply to both denial of services and client dissatisfaction issues (see eligibility criteria). There are sample complaint letter forms (See Section III Appendix).

1. When denial of services is confirmed in writing the participant or applicant has the right to file a grievance.
2. Participants must submit their grievance in writing to the site manager or Food Service Supervisor at the Suffolk County Office for the Aging to conduct the initial review.
3. The grievance should be filed within (30) days of denial, reduction or termination of services or of the event or circumstances with which the participant is dissatisfied.
4. The grievance should be filed on the form provided by the AAA which shall include a written statement setting forth in detail the date, time and circumstances that are the basis of the complaint.
5. Assistance is available upon request.
6. All grievances will be held in a confidential manner.

STAFFING AND TRAINING

POLICY

In hiring for all staff positions, preference is given to persons age sixty or over when other qualifications are equal.

All employees of nutrition programs (including volunteers) will attend orientations and training sessions held quarterly. A training sign in sheet is available in Section III Appendix. They will receive a pamphlet or paperwork describing the nutrition program.

A Suffolk County Department of Health Services Food Manager's Certificate must be valid at all times. The site manager, cook and other staff that have daily supervisory control of food service operations must possess this certification.

PROCEDURE

Persons filling positions that are funded through nutrition program monies will receive a job description and quarterly training. These orientation and training sessions will be documented on forms provided.

STAFFING

JOB TITLE: SITE MANAGER

DUTIES AND RESPONSIBILITIES: The Site Manager will be responsible to the Sponsoring Agency and shall work directly with the Suffolk County Office for the Aging. The site manager will be responsible for the following:

- Establish annual objectives in accordance with federal and state regulations, to meet the specific needs of the seniors who reside in that particular geographic area. Involve senior representatives from the program in planning objectives. Objectives shall be measurable and outcomes documented annually.
- Seek feedback from clients. Revise program and facilities as finances and guidelines allow.
- Responsible for the fiscal and administrative management of the program. Must submit the appropriate reports to the Suffolk County Office for the Aging in a timely manner in order to receive reimbursement and continue operations. Responsible for the accuracy of the submitted reports.
- Coordinate supportive services such as transportation, information and referral, health and welfare counseling, shopping assistance and nutrition education.
- Maintain an active participant list in order to check on safety and any other needs that the senior may have during weather emergencies.
- Establish and maintain good communication and coordination with the Suffolk County Office for the Aging staff.
- Attend and participate in monthly meetings and other conferences required by the Suffolk County Office for the Aging.
- Supervise staff and volunteers. Promote efficient use of time and resources.
- Develop and maintain an active volunteer program.
- Preference should be given to persons age sixty and older when all other qualifications are equal. Comply with all applicable, federal, state and local laws (including Titles VI & VII of the Civil Rights Act, the Rehabilitation Act, the Equal Pay Act, the Age Discrimination in Employment Act) and the New York State Human Rights Law, Governor's Executive Order 16 (Prevention of Sexual Harassment) in hiring for all staff positions.
- Initiate and carry out training programs for staff members and volunteers.
- Make arrangements for home delivered meals, if applicable.
- Distribute congregate and home delivered (if applicable) meals according to the policies and procedures outlined by Suffolk County and the New York State Office for the Aging.
- Responsible for ensuring the safety and the quality of the food served. Adhere to proper food handling and storage practices as outlined by the Suffolk County Department of Health Services' Food Managers Course.
- Ensure temperatures of TCS (Time/Temperature Control for Safety) foods are taken and recorded in an on-site log book daily.

- Plan a six week cycle menu and revise as needed based on client preferences.
- Assess the effectiveness of the nutrition program via: quantitative measurement such as the number of clients served and number of supportive services provided; qualitative measurement such as client satisfaction with program and services; and cost measurement.
- Coordinate recreational activities and programs, which promote mental and physical well-being.

JOB QUALIFICATIONS/REQUIREMENTS:

1. Administrative ability.
2. Experience in program planning, budgeting and personnel management.
3. Proficiency in working with the elderly.
4. Cultural competence.
5. Bonded.
6. Suffolk County Department of Health Services Food Manager's Certification.

JOB TITLE: ASSISTANT SITE MANAGER

DUTIES AND RESPONSIBILITIES: The Assistant Site Manager will be responsible to the Sponsoring Agency and will conduct the day to day management and administrative functions of the nutrition site in the Site Manager's absence. The Assistant Site Manager will work directly with the Site Manager and the Suffolk County Office for the Aging Nutrition Supervisor and be responsible for the following:

Assist the Site Manager in the daily operation of all phases of the Nutrition Program

JOB QUALIFICATIONS/REQUIREMENTS: Suffolk County Department of Health Services Food Manager's Certification.

JOB TITLE: HOME DELIVERED MEAL ASSESSOR

DUTIES AND RESPONSIBILITIES: Responsible for conducting assessments and reassessments, development of care plans, authorizing services or terminating or discharging clients from home delivered meal program.

JOB QUALIFICATIONS AND REQUIREMENTS:

1. Graduate of a regionally accredited college or university, or a New York State registered four-year college or university, with a bachelor's degree; or
2. A registered nurse with one year of satisfactory full-time experience in that profession; or
3. Possess a full-time equivalent of four-years of satisfactory experience in the following:
 - Social work
 - Social work in a community or social action program;
 - Teaching in an accredited school;
 - Community services worker or case aide in a human services District; or
 - Possess a satisfactory equivalent combination of the foregoing training and experience.

Staff will participate in any required training and receive an orientation by Suffolk County Office for the Aging regarding local program administration, management, policies and procedures, client rights and the program's service area in terms of the characteristics of the community and the service delivery system.

JOB TITLE: COOK

MAIN FUNCTION: Food preparation; responsible for cleanliness of kitchen/service areas.

DUTIES AND RESPONSIBILITIES:

1. Prepare main course(s) and side dishes according to menu and hours of service.
2. Maintain a standardized recipe file.
3. Follow directions as written on standardized recipes.
4. Use and care for basic kitchen equipment.
5. Care for foods properly, both raw and cooked.
6. Carry out proper sanitation and safety procedures and keep work areas neat and clean.
7. Direct work of assistants as needed in production areas.
8. Take temperatures of TCS (Time/Temperature Control for Safety) foods and record in an on-site temperature log book daily.
9. Portion food for serving (meat slicing for example).
10. Attend trainings and in-services related to the job.

JOB QUALIFICATIONS/REQUIREMENTS:

1. Suffolk County Department of Health Services Food Manager's Certification
2. Ability to read, write and communicate effectively with staff and management
3. Experience in large quantity food preparation
4. Knowledge of operation of all kitchen equipment
5. High food standards
6. Ability to direct work of others
7. Mental alertness
8. Dependability
9. Honesty
10. Neat personal appearance
11. Ability to stand for long periods of time

JOB TITLE: ASSISTANT COOK

MAIN FUNCTION: Assists the Cook and is responsible for the same functions with the oversight of the cook including but not limited to food preparation; cleanliness of kitchen and service area.

DUTIES AND RESPONSIBILITIES: Assists the Cook in his/her duties and responsibilities. Handles the Cook responsibilities in the Cooks absence.

JOB QUALIFICATIONS/REQUIREMENTS:

1. Suffolk County Department of Health Services Food Manager's Certification
2. Ability to read and write
3. Experience in large quantity food preparation
4. Knowledge of operation of all kitchen equipment
5. High food standards
6. Ability to assist in directing work of others
7. Mental alertness
8. Dependability
9. Honesty
10. Neat personal appearance
11. Ability to stand for long periods of time

JOB TITLE: DRIVER

The driver must have a valid New York State Driver's License. The license must be appropriate for vehicles that they are driving.

100.56

REPORTING

POLICY

All required reports must reach the Suffolk County Office for the Aging in a timely fashion, and must be done in a complete and accurate manner.

PROCEDURE

All required forms regarding meal service, contributions, etc., will be completed and forwarded to the Suffolk County Office for the Aging, no later than the 8th of each month. The nutrition service report form can be found in Section III Appendix.

PARTICIPANTS' ROSTERS

The program will have completed rosters to track the meal count. The rosters should reflect the meals delivered to clients each week. These rosters are to be entered into the automated system and forwarded to the Suffolk County Office for the Aging by the 8th of each month.

VOUCHERING

POLICY

Suffolk County Vouchers must be submitted for payment no later than thirty (30) days after expenditures were made, signed in ink by an authorized signatory, and must be done in a complete and accurate manner, following the requirements of the contract. The County will only pay for one meal per person, per day, except in cases of weather emergencies or holiday closings. Meal service is Monday through Friday only.

PROCEDURE

All Suffolk County vouchers submitted for payment for home delivered meals must be accompanied by acceptable documentation (see forms in Section III Appendix). These are as follows:

- Monthly Service roster, with unit entry per day (from automated system)
- Verification of contributions collected
- Report of meals served and contributions collected (NPAG1; See Section III Appendix)
- Monthly Summary of Meals Served and Contributions Collected
- Congregate eligible guest report
- Nutrition center eligible guest sign-in sheet (for special events)
- Monthly Statement of Revenue and Expenditures (599 Form)

Payment will not be made where documentation is not deemed sufficient by the County and /or meals are not accounted for through sign-in sheets and rosters.

Section II – Meal Service

MEAL TYPE REQUIREMENTS

POLICY

Meal Temperatures must be maintained during the delivery time as follows:

- Hot Meals: A hot holding temperature must be maintained at 140 degrees. There may not be more than two hours between the completion of cooking and the beginning of service. For home delivered meals, this applies to the last meal served on the route.
- Cook-Chilled Meals: The meal temperature must be maintained at 41 degrees.
- Frozen Meals: Meals must be solidly frozen and remain frozen throughout delivery.
- Cold Components: All cold components of the meal must remain below 41 degrees (i.e. milk).
- Labeling: All meals must be clearly labeled with components and the date they were prepared. Frozen and cook-chilled meals must also include heating instructions.

PROCEDURE

Temperatures must be taken before meals leave the service kitchen and logged in a temperature log book. Temperatures must be taken before the last meal delivery (no more than 2 hours for hot foods) with temperatures maintained as noted above. All clients not receiving daily meal delivery, Monday through Friday, must be contacted on the off-days. A call log must be maintained documenting these calls.

MENU PLANNING

POLICY

Menus are planned and written by the Nutrition Program Site Manager with the participants' input. Menus are to reflect the ethnic and cultural food patterns of the clients.

All menus must meet 1/3 of the current Dietary Reference Intakes ("DRI") for the 60 plus age group. A rich source of Vitamin C (30 mg of Vitamin C equals 1/3 of the DRI) must be provided every day. The Suffolk County Office for the Aging nutritionist requires the standardized recipes for nutrient analysis. A six week cycle menu must be submitted to the Suffolk County Office for the Aging 4 weeks prior to serving.

Local Suffolk Law Regarding Nutritional Claims: Claims such as salt-free, sugar free, low cholesterol, fat-free, low carb/no carb etc., require compliance with FDA nutrition labeling law and Suffolk County Nutrient Content Law. When such claims are made, a notice must be posted in customer view, that detailed nutritional information is available for the item(s) in question. (See attachment in appendix.)

All menus for the Nutrition Program are to be evaluated by the Suffolk County Office for the Aging nutritionist for nutritional adequacy and other criteria. Substitutions must be submitted either in writing or called in to the Suffolk County Office for the Aging prior to serving.

Menus must be kept on file for a period of one year.

PROCEDURE

Upon receipt of menus by the Suffolk County Office for the Aging, the nutritionist will review and evaluate menus for nutritional adequacy and other criteria. Corrections or adjustments will be conducted via phone, in writing, by e-mail or by fax to the respective sites.

Copies of all menus will be kept on file at the Suffolk County Office for the Aging.

NUTRIENT CONTENT REGULATIONS

POLICY

Local Suffolk County Law regarding nutritional claims must be adhered to. Claims such as salt-free, sugar-free, low cholesterol, fat-free, low carb/no carb etc., require compliance with FDA nutrition labeling law and Suffolk County Nutrient Content Law.

PROCEDURE

When such claims as listed above are made, a notice must be posted in customer view, that detailed nutritional information is available for the item(s) in question.

Refer to Section III Appendix.

MEAL SERVICE

STAFF

Staff may consume a meal only when a meal is available, after all participants have been served. Staff under 60 must contribute to the actual cost of the meal (caterer's cost or raw food and disposables). Staff and volunteers over 60 should be given the same opportunity as participants to contribute to the cost of the meal.

VOLUNTEERS UNDER 60

Volunteers under 60 who provide Congregate and Home Delivered Meal Service during the meal time may be provided with a meal, if extra meals are available. Volunteers must be provided with the opportunity to contribute to the cost of the meal in the same manner as participants.

UNDER 60 DISABLED

Non-elderly disabled persons who reside at home with home delivered meal clients are eligible for meals. Those who reside in housing facilities occupied primarily by older individuals receiving nutrition services may be eligible as well. These clients must be given the same opportunity to voluntarily contribute toward the cost of the meal.

ADAPTIVE FOOD UTENSILS AND CONTAINERS

POLICY

The Suffolk County Office for the Aging will offer adaptive wares to those who are having difficulty consuming food using typical plates, utensils, cups or food service containers. The agency will work to protect the participant's dignity and be sure to promptly communicate with participants in regard to their needs and desires.

PROCEDURE

Contractor staff should consult with the Office for the Aging's Nutrition Supervisor to discuss participant circumstances and determine possible adaptations to be considered and provided. The Nutrition Supervisor may seek advice from staff from local agencies (nursing homes, hospitals) that have considerable experience with the use of adaptive equipment to help assure that the most optimal choices are offered to the participant.

Equipment that may adequately meet participants' needs include compartmentalized plates, weighted cups, scoop dish, swivel utensils, rocker or roller knife.

RESTRICTIONS CONCERNING HOME DELIVERY OF MEALS

POLICY

Under no circumstances should a home delivered meal be left for a client if they are not at home. Meals may never be left outside of the home.

PROCEDURE

A client must be at home in order to receive a home delivered meal. Clients are encouraged to notify the Nutrition Program as early as possible if they are not going to be at home.

PORTION CONTROL

POLICY

All programs will utilize appropriate serving utensils necessary for portion control during food preparation and service to be consistent with menu and service requirements.

PROCEDURE

According to the menu pattern, appropriate serving utensils will be utilized. This will be monitored by the nutrition staff of Suffolk County Office for the Aging during regular site monitoring.

PORTION CONTROL/LADLES AND SCOOPS

Standardized portions help control food costs. A portion is the amount of food to be served to each person, and it is measured in ounces.

Portion sizes will vary in different types of food. Once the portion size is determined for a food, this is the standard portion size to serve.

Standard portions are better because:

1. Participants are served the same quantity or amount.
2. Food costs can be controlled.

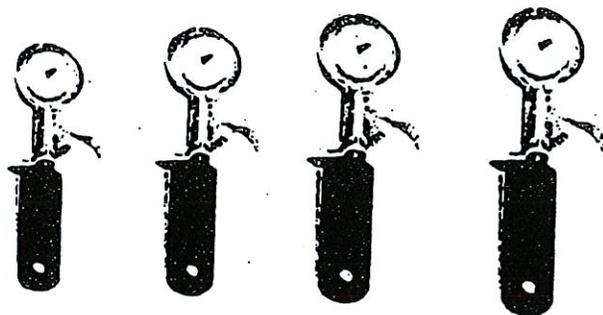
It is imperative for all food service employees to be familiar with and understand the need and purposes of standardized portions. It is also imperative they be given the necessary tools to carry out their job responsibilities.

LADLES – Ladles are ideal for portioning soups, sauces, gravies and juices.



Bowl Capacity (oz.)	Portion Per 20" Transport Pan	
	2 1/2" Pan	4" Pan
1/2	384	--
1	192	320
2	96	160
3	64	107
4	48	80
6	32	53
8	24	40
12	16	26
24	--	--
72	--	--

SCOOPS – Scoops are the most commonly used utensil for measuring portions to be served. The number designated for each scoop means the number of level liquid servings per quart. Scoops are used for accurately portioning mashed potatoes, tuna salad, casseroles, some vegetables, and gelatin or pudding desserts.



Dipper Or Scoop No.	Level Measure	Ounces
6	2/3 Cup	5 1/5
*8	1/2 Cup	4
10	2/5 Cup	3 1/5
*12	1/3 Cup	2 2/3
*16	1/4 Cup	2
20	3 1/5 Tablespoons	1 3/5
24	2 2/3 Tablespoons	1 1/3
30	2 1/5 Tablespoons	1 1/10
40	1 3/5 Tablespoons	4/5

*Most commonly used sizes

TRANSPORT PANS

USE FOR:

All Vegetables (except broccoli spears)	Hamburgers
Barbecue	Meat Loaf
Fish Fillets	Mexican Hamburger
Frankfurters	Salisbury Steak
French Fries	Soups (use foil sheet as a one time gasket between pan and cover)
Gravy	Spaghetti Sauce
Grilled Cheese Sandwich (42 standing on end per pan)	

WITH COLD LID:

All sliced meats and cheeses	Puddings
Any salad using mayonnaise	Tossed Salad
Lettuce	Tuna
	Turkey or chicken

TRANSPORT PAN

17 3/4 X 12 3/4 X 4



#16 SCOOP (1/4 CUP) SERVING		
MEASURES	PANS	SERVINGS
1 qt.		16
2 qt.		32
3 qt.		48
1 gal.		64
1 gal. - 1 qt.		80
1 gal. - 2 qt.		96
1 gal. - 3 qt.		112
2 gal.		128
2 gal. - 1 qt.	1 Full Pan	144

#12 SCOOP (1/3 CUP) SERVING		
MEASURES	PANS	SERVINGS
1 qt.		12
2 qt.		24
3 qt.		36
1 gal.		48
1 gal. - 1 qt.		60
1 gal. - 2 qt.		72
1 gal. - 3 qt.		84
2 gal.		96
2 gal. - 1 qt.	1 Full Pan	108

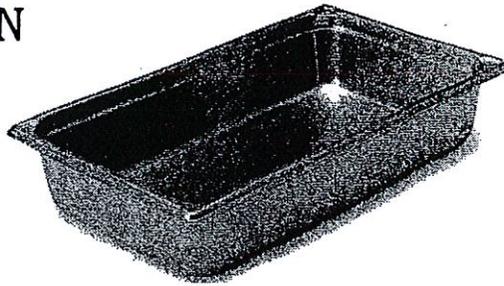
#8 SCOOP (1/2 CUP) SERVING		
MEASURES	PANS	SERVINGS
1 qt.		8
2 qt.		16
3 qt.		24
1 gal.		32
1 gal. - 1 qt.		40
1 gal. - 2 qt.		48
1 gal. - 3 qt.		56
2 gal.		64
2 gal. - 1 qt.	1 Full Pan	72
2 gal. - 2 qt.		80
2 gal. - 3 qt.		88
3 gal.		96
3 gal. - 1 qt.		104
3 gal. - 2 qt.		112
3 gal. - 3 qt.		120
4 gal.		128
4 gal. - 1 qt.		136
4 gal. - 2 qt.	2 Full Pans	144

TRANSPORT PAN

17 3/4 X 12 3/4 X 2 1/2"

USE FOR:

Broccoli Spears
 Hamburgers *(50 per pan)
 Frankfurters
 -- or with cold lid
 Jello, Tomato or Egg slices or wedges



#16 SCOOP (1/4 CUP) SERVING		
MEASURES	PANS	SERVINGS
1 qt.		16
2 qt.		32
3 qt.		48
1 gal.		64
1 gal. - 1 qt.	1 Full Pan	80

#12 SCOOP (1/3 CUP) SERVING		
MEASURES	PANS	SERVINGS
1 qt.		12
2 qt.		24
3 qt.		36
1 gal.		48
1 gal. - 1 qt.	1 Full Pan	60
1 gal. - 2 qt.		72
1 gal. - 3 qt.		84
2 gal.		96
2 gal. - 1 qt.		108
2 gal. - 2 qt.	2 Full Pans	120

#8 SCOOP (1/2 CUP) SERVING		
MEASURES	PANS	SERVINGS
1 qt.		8
2 qt.		16
3 qt.		24
1 gal.		32
1 gal. - 1 qt.	1 Full Pan	40
1 gal. - 2 qt.		48
1 gal. - 3 qt.		56
2 gal.		64
2 gal. - 1 qt.		72
2 gal. - 2 qt.	2 Full Pans	80
2 gal. - 3 qt.		88
3 gal.		96
3 gal. - 1 qt.		104
3 gal. - 2 qt.		112
3 gal. - 3 qt.	3 Full Pans	120

TRANSPORT PAN

20 3/4 X 12 3/4 X 2 1/2"



USE FOR:

- Broccoli Spears
- Hamburgers *(50 per pan)
- Frankfurters
- or with cold lid
- Jello, Tomato or Egg slices or wedges

#16 SCOOP (1/4 CUP) SERVING			#12 SCOOP (1/3 CUP) SERVING			#8 SCOOP (1/2 CUP) SERVING		
MEASURES	PANS	SERVINGS	MEASURES	PANS	SERVINGS	MEASURES	PANS	SERVINGS
1 qt.		16	1 qt.		12	1 qt.		8
2 qt.		32	2 qt.		24	2 qt.		16
3 qt.		48	3 qt.		36	3 qt.		24
1 gal.		64	1 gal.		48	1 gal.		32
1 gal. - 1 qt.	2" Pan	80	1 gal. - 1 qt.	1 Pan	60	1 gal. - 1 qt.	1 Pan	40
1 1/2 gal.	1 Full Pan	96	1 gal. - 2 qt.	1 Full Pan	72	1 gal. - 2 qt.	1 Full Pan	48
			1 gal. - 3 qt.	1 Full Pan & 1 qt.	84	1 gal. - 3 qt.	1 Full Pan & 1 qt.	56
			2 gal.	1 Full Pan & 2 qt.	96	2 gal.	1 Full Pan & 2 qt.	64
			2 gal. - 1 qt.	1 Full Pan & 3 qt.	108	2 gal. - 1 qt.	1 Full Pan & 3 qt.	72
			2 gal. - 2 qt.	1 Full Pan & 1 gal.	120	2 gal. - 2 qt.	1 Full Pan & 1 gal.	80
			2 gal. - 3 qt.	1 Full Pan & 1 gal.-1qt.	132	2 gal. - 3 qt.	1 Full Pan & 1 gal.-1 qt.	88
			3 gal.	2 Full Pans	144	3 gal.	2 Full Pans	96

USE FOR:

- All Vegetables (except broccoli spears)
- Barbecue
- Fish Fillets
- Frankfurters
- French Fries
- Gravy
- Grilled Cheese Sandwich (42 standing on end per pan)
- Hamburgers
- Meat Loaf
- Mexican Hamburger
- Salisbury Steak
- Soups (use foil sheet as a one time gasket between pan and cover)
- Spaghetti Sauce

TRANSPORT PAN

20 3/4 X 12 3/4 X 4



WITH COLD LID:

- All sliced meats and cheeses
- Any salad using mayonnaise
- Lettuce
- Puddings
- Tossed Salad
- Tuna (2 gal.)
- Turkey or chicken

#16 SCOOP (1/4 CUP) SERVING			#12 SCOOP (1/3 CUP) SERVING			#8 SCOOP (1/2 CUP) SERVING		
MEASURES	PANS	SERVINGS	MEASURES	PANS	SERVINGS	MEASURES	PANS	SERVINGS
1 qt.		16	1 qt.		12	1 qt.		8
2 qt.		32	2 qt.		24	2 qt.		16
3 qt.		48	3 qt.		36	3 qt.		24
1 gal.		64	1 gal.		48	1 gal.		32
1 gal. - 1 qt.		80	1 gal. - 1 qt.		60	1 gal. - 1 qt.		40
1 gal. - 2 qt.		96	1 gal. - 2 qt.		72	1 gal. - 2 qt.		48
1 gal. - 3 qt.		112	1 gal. - 3 qt.		84	1 gal. - 3 qt.		56
2 gal.		128	2 gal.		96	2 gal.		64
2 gal. - 1 qt.		144	2 gal. - 1 qt.	4" Pan	108	2 gal. - 1 qt.		72
2 gal. - 2 qt.	1 Full Pan	160	2 gal. - 2 qt.	1 Full Pan	120	2 gal. - 2 qt.	1 Full Pan	80

8 OZ. LADLE (1 CUP) SERVING		
MEASURES	PANS	SERVINGS
1 qt.		4
2 qt.		8
3 qt.		12
1 gal.		16
1 gal. - 1 qt.		20
1 gal. - 2 qt.		24
1 gal. - 3 qt.		28
2 gal.		32
2 gal. - 1 qt.		36
2 gal. - 2 qt.	1 Full Pan	40

FOOD TEMPERATURE MONITORING

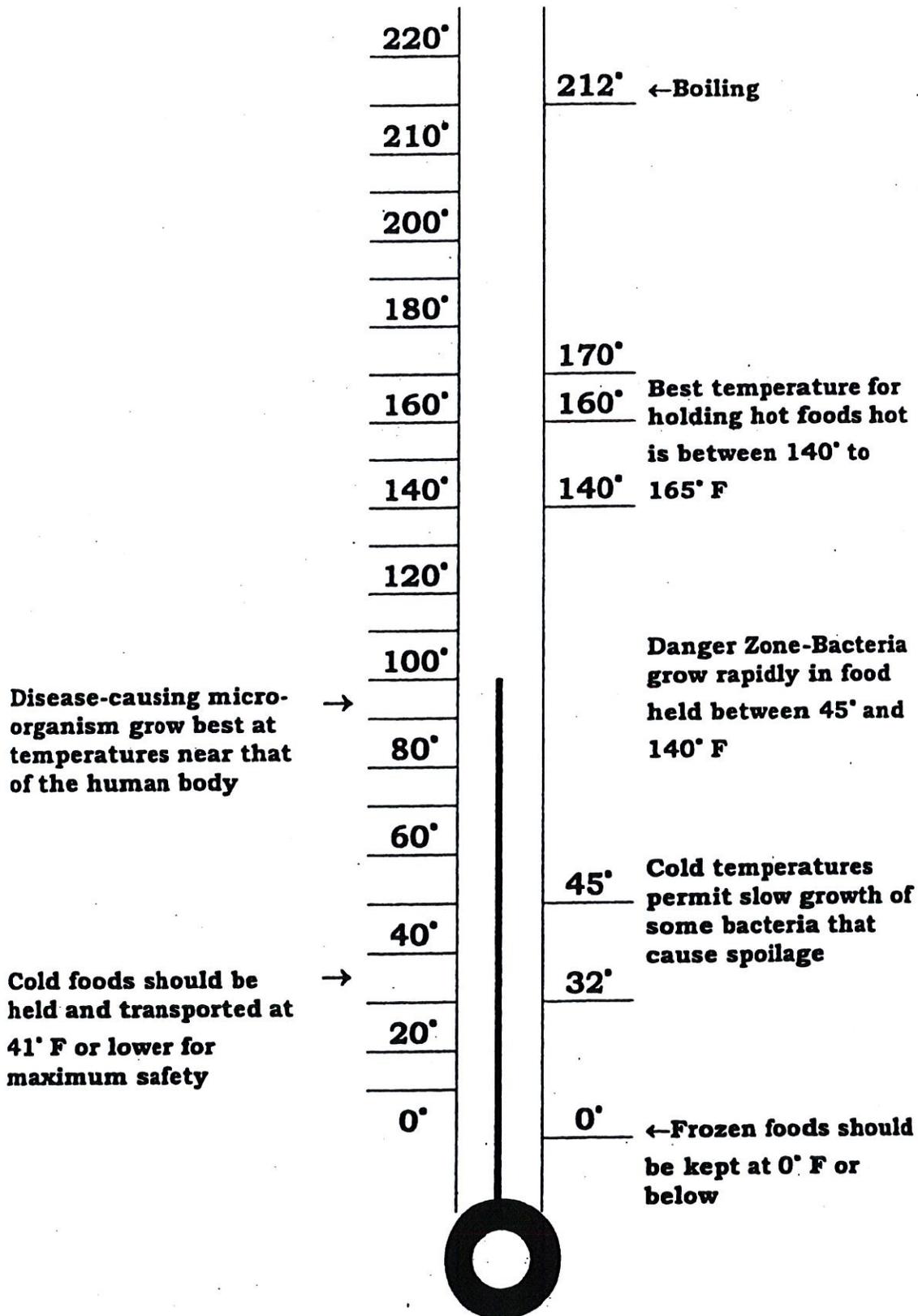
POLICY

Time/Temperature Control for Safety (TCS) Foods are foods that require attention to time and temperature control to limit pathogenic microorganism growth or toxin formation. TCS foods include all foods of animal origin (raw or heat-treated); a food of plant origin that has been heat-treated, cooked starch foods, all raw seed sprouts, all cut melons; and garlic-in-oil mixtures that are not modified to prevent the growth of microorganisms.

PROCEDURE

1. Record the time and temperature of TCS foods upon arrival or completion of cooking.
2. If foods are outside of the "danger zone", serve immediately or hold hot foods above 140 degrees F and cold foods below 41 degrees F.
3. Temperatures of TCS foods that are transported shall be taken prior to delivery and at serving time on a daily basis.
4. If foods are not served immediately and are held for a period of time prior to serving, then at the time of serving the TCS, temperatures and time of serving should be recorded.
5. All recorded temperatures should be dated and initialed.
6. Temperature logs should be maintained on a daily basis.

TEMPERATURE OF FOOD FOR CONTROL OF BACTERIA



FOOD TEMPERATURE CRITERIA

COOLING

Food temperature:

120°F - 70°F

More than 2 hours, discard food

70°F - 41°F

More than 4 hours, discard food

41°F or less but cooled too slowly, discard

Food

PROCESSING

SLICING

DEBONING

MIXING

DICING

ASSEMBLING

SERVING

Cold TCS food:

More than 41°F more than or equal to 2

hours discard;

More than 70°F, discard

Hot TCS food

More than or equal to 2 hours, discard; less

than 2 hours reheat to 165°F and hold at 140°F

120°F-41°F

More than or equal to 2 hours, discard; less

than 2 hour, reheat to 165°F and hold at 140°F

REHEATING

Food temperature less than 165°F, continue reheating

HOLDING FOOD

HOT/COLD

Hot holding TCS food:

140°F- 120°F

More than or equal to 2 hours, discard;

less than 2 hours, reheat to 165°F and

hold at 140°F

TRANSPORTING

FOOD

120°F - 41°F

More than or equal to 2 hours, discard;

less than 2 hours, reheat to 165°F and

hold at 140°F

Cold holding TCS food:

41°F - 70°F

More than or equal to 2 hours, discard; less

than 2 hours, serve or refrigerate

More than or equal to 70°F, discard

HOLDING TEST MEALS

COOKING SITES

Hold a dated, complete meal, inclusive of soup, gravy and dessert in the refrigerator for 5 days.

CATERED SITES

Hold a dated, complete meal (as stated above) if possible, otherwise hold 3 tablespoons of each meal component, inclusive of soup, gravy and dessert in the refrigerator for 5 days.

FOOD THERMOMETERS

POLICY

All food thermometers, bayonet (manual) and digital, shall be calibrated weekly and recorded in a log book.

Thermometers are required in the warmest zone of the refrigerator and freezer.

PROCEDURE

Food thermometers are to be calibrated as follows on the next page:

If a food thermometer has been **DROPPED** or handled roughly it **MUST** be calibrated **BEFORE** being used. A reserve supply of two or three thermometers shall be kept on premises at all times.

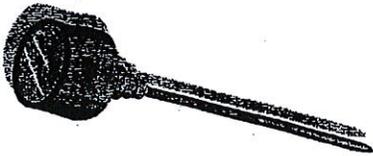
The log book of food temperature calibrations shall include the date checked, thermometer identification (i.e., A, B, C or 1, 2, 3 or another identification system), temperatures recorded and initialed by appropriate staff.

NOTE: Digital thermometers shall be calibrated according to the manufacturer's directions using the above procedures.

CALIBRATING A THERMOMETER

STEM or BAYONET THERMOMETER can be dial or digital. It must be calibrated weekly, sanitized prior to use, and designed for use in foods, with a range of at least 0°F to 220°F and accurate to within 2°. This is a required instrument and must be used to verify the temperature of all TCS foods. Thermocouples have a major advantage for testing certain foods and are highly recommended for use in food service establishments.

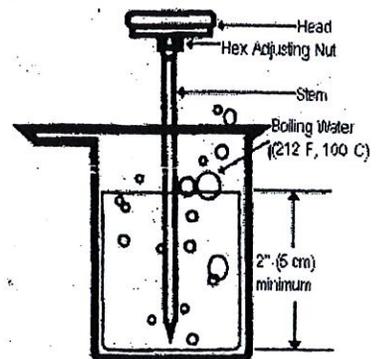
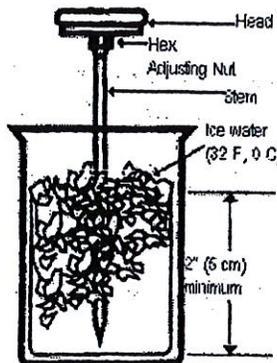
To **sanitize a thermometer**: use either hot water of 165°F or above, OR 70% isopropyl alcohol swabs, OR a bleach and water sanitizing solution of 200-ppm strength.



CALIBRATING A THERMOMETER

There are two steps to check the accuracy of a food thermometer. Use both steps.

ICE WATER---Fill at least a 5-7 oz. cup with finely crushed ice. Add clean tap water to the top of the ice and stir well. Immerse the food thermometer stem a minimum of 2 inches into the mixture. The thermometer should read 32°F. Having to adjust the thermometer more than 2°, voids the use of the thermometer, replace it.



BOILING WATER---To use the boiling water method, bring a pot of clean tap water to a full rolling boil. Immerse the stem of the food thermometer in boiling water a minimum of 2 inches. The thermometer should read 212°F. If the ice water method or the boil method is off by more than 2°, replace the thermometer.

Calibration should be recorded weekly and immediately following any impact event such as dropping the thermometer on the floor. (using 32°F and 212°F)

THERMOMETER CALIBRATION LOG

DATE	THERMOMETER I.D.	TEMPERATURE READING	INITIAL

REMEMBER ! THESE ARE CRITICAL VIOLATIONS!

Not having a calibrated stem thermometer.

Not using your stem thermometer for "reheats" to 165°F or more.

Not using your stem thermometer for monitoring minimum safe cooking temperatures.

FOOD HANDLING INSTRUCTIONS FOR CLIENTS

POLICY

Once a meal is delivered to a client's home, the handling of the meal becomes his/her responsibility.

PROCEDURE

In order to protect the client's health and assure safe consumption of the meal, all clients should be given instructions on safe food handling. A sample of safe food handling guidelines (sample letter) is available in Section III Appendix. This may also be accomplished by stamping instruction on the lid of the meal. All meals that are not delivered hot must have the date prepared, reheating instructions and contents on the meal. It is a good practice to follow this procedure on all meals.

LEFTOVER FOOD

POLICY

Only food that is prepared fresh daily and not reheated can be frozen and delivered when needed in emergency situations for nutrition program participants.

PROCEDURE

Leftover bulk food is to be properly portioned in disposable trays immediately after serving. Hot food must be held at a minimum of 140 degrees F. If held under 140 degrees F, it cannot be frozen. The following information must be written on the lid of all frozen meals:

The date, meal and packaging temperature before freezing (not to exceed one hour from start of meal service)

A log book must be maintained and include:

LEFTOVER MEALS (INFO TAKEN FROM LID)

FOOD	DATE	PRE-FROZEN TEMPERATURE	REHEAT DATE	REHEAT TEMPERATURE	INITIALS

LEFTOVER FROZEN MEALS SHOULD **NOT** BE HELD IN THE FREEZER LONGER THAN **3 MONTHS**.

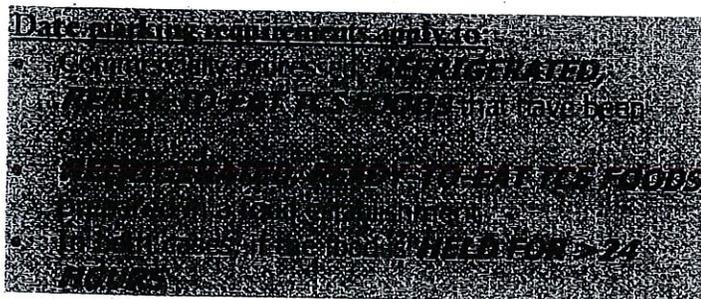


Date Marking Guidance Document

Suffolk County Sanitary Code, Article 13, Section 760-1330.4

Refrigeration significantly slows the growth of most bacteria, which prevents foods from becoming a hazard. Growth of some bacteria, such as *Listeria monocytogenes*, is slowed but not stopped by refrigeration. Over a period of time, this and similar organisms may increase their risk of causing illness in ready-to-eat foods.

Date marking provides **Active Managerial Control** of the temperature and time combinations for cold holding **PREPARED, TEMPERATURE-CONTROLLED FOR SAFETY (TCS), READY-TO-EAT FOODS**.



Date marked foods:

- May be kept at 41°F or less for a **total of 7 days**
- Must be **consumed, sold or discarded after 7 total days** in refrigeration
- The **date of preparation** is always counted as **day one**
- Food which is prepared, frozen, and thawed, must be controlled by date marking to ensure its safety for the **TOTAL** amount of time it is held in refrigeration, **up to 7 days** (time frozen does not count towards the 7 days)
- The 7 days may not exceed a manufacturer's "use by" date (for commercially manufactured foods) if the date is based on food safety

Date marking system:

- A date marking system may be used which places **information on the food**, such as on an overwrap or container
- The marking can identify the **first date of preparation**, or the **last day** that the food can be consumed or sold
- The system may use calendar dates, days of the week, or color coded marks on labels affixed to food or food containers, as long as the date marking system can be **explained to a Department representative** (sanitarian) on request
- Using a date marking system also improves product **quality management** by providing monitoring points for product rotation (FIFO - first in, first out)
- Date marked food labels should be checked daily and foods that have been held for **more than 7 days discarded**

Examples of foods that require date marking (if held for >24 hours)

- House-made salads, such as tuna, egg, chicken, seafood, pasta, macaroni and potato
- Cooked meats and veggies, cooled and served cold
- Soft cheeses, e.g., mozzarella
- Sliced tomatoes
- Shrimp cocktail
- Hummus
- Cold cuts – bulk and sliced
- "Sea legs"
- Soft-serve ice cream mix
- Ceviche
- Cream cheese
- Cut melons
- Smoked salmon
- Cut leafy greens
- Bulk milk (in dispenser)

Examples of foods exempt from date marking

- Commercially manufactured salads, such as tuna, egg, chicken, seafood, pasta, macaroni and potato
- Hard cheeses such as parmesan, and romano
- Pepperoni (not labeled "KEEP REFRIGERATED")
- Yogurt
- Buttermilk
- Check with the Department for further information
- Sour cream
- Pickled herring

HOME DELIVERED MEAL EQUIPMENT SANITIZING AND MAINTENANCE

POLICY

Home delivered meals are to be packaged in appropriate disposable containers and transported in appropriate carriers for delivery to clients. All meals that are not delivered hot (ready to eat) must have a label including contents, reheating instructions and the date prepared.

PROCEDURE

All components of the home delivered meal program are packaged in disposable containers appropriate for the item. Hot foods must be transported and packaged separately from cold food items.

The packaged items then shall be placed in hot and cold food carriers. Ice packs or freezants and hot stones or other heating elements are used in carriers for cold and hot food items, respectively.

Sanitizing: All equipment used in delivering food should be cleaned and sanitized daily. Refer to the Suffolk County Department of Health Services or manufacturer's recommendations for cleaning food carriers. Regular maintenance checks should be done on all equipment, to be sure it is operating properly.

HEALTH AND SANITARY STANDARDS

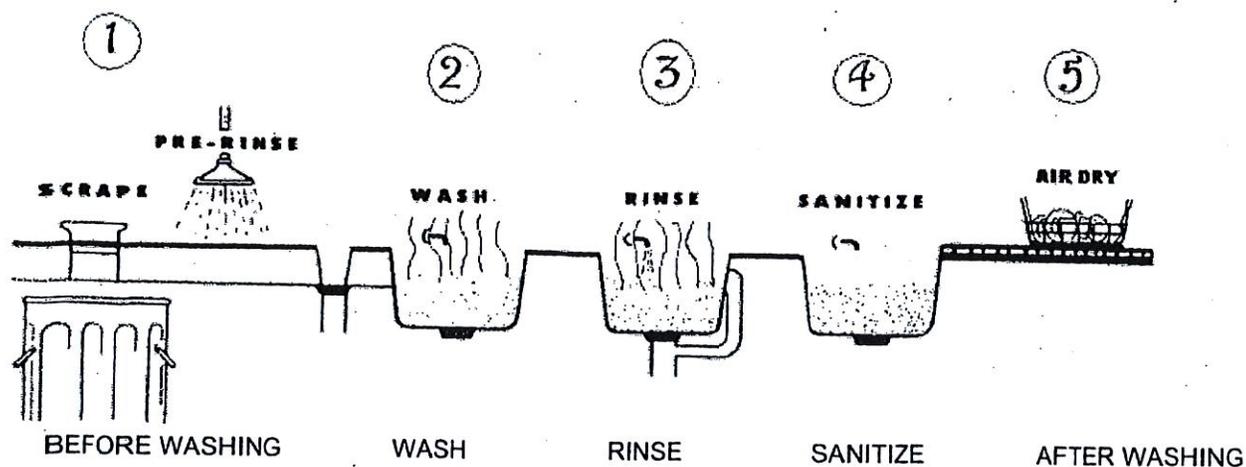
POLICY

Sites shall maintain food service sanitation and safety standards as designated by the Suffolk County Department of Health Services and the Suffolk County Office for the Aging.

PROCEDURE

All sites are evaluated not only by the Suffolk County Office for the Aging staff, but by staff from the Suffolk County Department of Health Services in regard to compliance with regulations. Training sessions will be conducted by the Suffolk County Department of Health Services and the Suffolk County Office for the Aging to increase site personnel's knowledge of these sanitation and safety standards. It is also the responsibility of the site manager to ensure that these standards are being maintained. Please refer to the Suffolk County Department of Health Sanitary Code, Article 13. www.suffolkcountyny.gov/Portals/0/health/pdf/Article%2013%20Adopted%20031815.pdf.

MANUAL WAREWASHING INSTRUCTIONS



<p>1</p> <p>SCRAPE</p> <p>BEFORE WASHING</p> <p>Scrape and stack kitchenware, pre-rinse to keep the wash water clean</p>	<p>2</p> <p>WASH</p> <p>WASH</p> <p>Wash kitchenware in clean warm water (110°F-120°F) containing a suitable approved cleaning agent.</p>	<p>3</p> <p>RINSE</p> <p>RINSE</p> <p>Rinse kitchenware in clean warm water (110°F-120°F) to make the sanitizing process more effective.</p> <p style="text-align: center;">DO NOT RINSE IN DIRTY WATER</p>	<p>4</p> <p>SANITIZE</p> <p>SANITIZE</p> <p>Sanitize by immersing all cleaned and rinsed glasses, utensils, equipment.</p> <p>NOTE: A suitable test kit shall be available and used.</p>	<p>5</p> <p>AIR DRY</p> <p>AFTER WASHING</p> <p>Drain until dry -</p> <p><u>DO NOT CLOTH TOWEL DRY.</u></p> <p>Store clean utensils, pots and pans in a clean place.</p> <p>Store cleaned kitchenware inverted on dirt free shelves.</p>
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SANITIZE IN THE THREE BAY SINK BY ONE OF THESE METHODS:

AGENT	CHLORINE	IODINE	QUATERNARY AMMONIUM	HOT WATER
TEMPERATURE	75°F	75°F	75°F	170°F
CONCENTRATION	100 ppm	12.5 ppm	200 ppm	
CONTACT TIME	1 minute	1 minute	1 minute	½ minute

SANITIZING WITH HOT WATER REQUIRES A HEATING ELEMENT ON THE SANITIZING SINK AND SPECIAL EQUIPMENT FOR HANDLING SANITIZED ITEMS IN HEATED WATER.

A CHEMICAL TEST KIT MUST BE PROVIDED AND USED.

THE DIFFERENT SANITIZERS EACH HAVE A DIFFERENT TEST KIT.

FOOD WORKER RULES

Do not work if you have....

- a cold, sore throat, fever, diarrhea or vomiting
- an infected cut or sore
- a boil

Wash your hands thoroughly after you....

- use the bathroom
- use a handkerchief
- touch any soiled object, surface or clothing
- handle raw food, particularly meat and poultry
- eat or drink
- smoke
- touch or scratch any area of the body (ears, mouth, nose or hair)

AND

- before you work with ready-to-eat foods

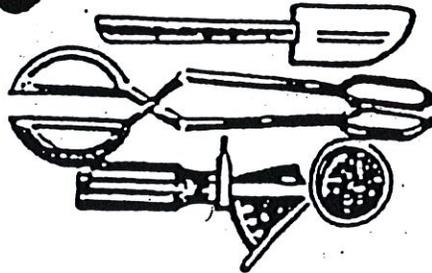
Do not touch ready-to-eat foods with your hands, use...

- disposable gloves
- utensils
- napkins or deli wraps

EMPLOYEE HEALTH AND DISEASE CONTROL

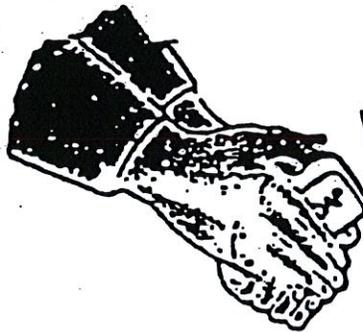
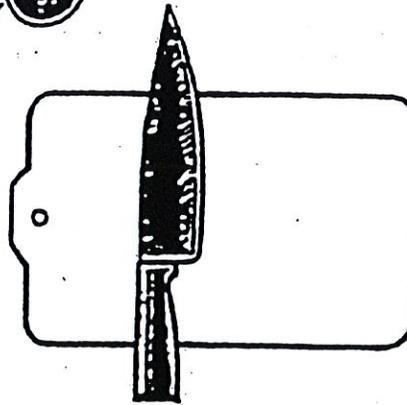
- DO NOT COME TO WORK IF YOU ARE COUGHING AND SNEEZING.
- KEEP HANDS AND BODY CLEAN.
- KEEP NAILS CLEAN AND NEATLY TRIMMED.
- WEAR A CLEAN UNIFORM AND NO EXCESSIVE JEWELRY.
- KEEP HAIR PROPERLY RESTRAINED.
- KEEP FOOD COVERED. (UNLESS IT IS IN THE PROCESS OF RAPIDLY COOLING.)
- DO NOT USE BARE HANDS TO HANDLE OR SERVE READY TO EAT FOODS.
- DO NOT TOUCH FOOD CONTACT SURFACES.
- KEEP FOOD OVER 140 DEGREES FAHRENHEIT OR UNDER 41 DEGREES FAHRENHEIT AT ALL TIMES.
- HEAT AND COOL FOOD QUICKLY. COOL FOODS IN SHALLOW PANS UNCOVERED.
- STORE FOOD AWAY FROM WALLS AND OFF THE FLOOR.
- DO NOT STORE FOOD NEAR CHEMICALS.
- USE DESIGNATED AREAS FOR EATING (NOT FOOD PREP AREAS).

CROSS CONTAMINATION



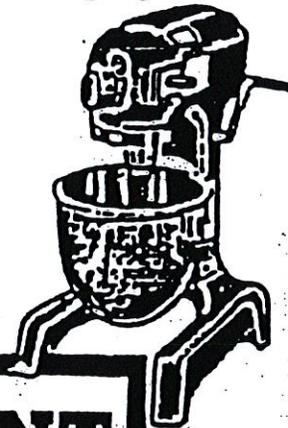
UTENSILS
Wash and sanitize
after every use

CUTTING BOARDS
Wash and sanitize
after every task



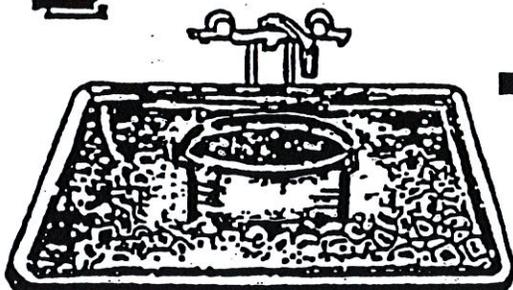
HANDS
Wash frequently
and thoroughly

EQUIPMENT
Clean and sanitize
after every use



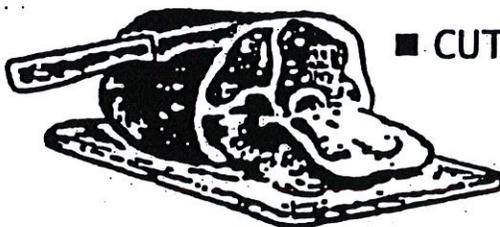
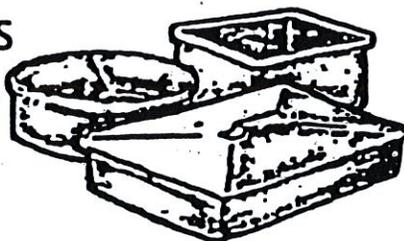
**PREVENT
A DANGEROUS
RECIPE**

KEYS TO



■ COOL FOODS QUICKLY
Use an ice bath

■ STORE LEFTOVERS SAFELY
Use small, shallow containers



■ CUT MEATS DOWN TO SIZE
Slice to 3"
Or less
In thickness

■ REHEAT FOODS TO SAFE TEMPERATURES
Reheat to 165 degrees F.



SAFE
COOLING AND
REHEATING

CLEANING AND DISINFECTING

FOLLOW THIS PROCEDURE TO RESPOND TO ANY ACCIDENT INVOLVING VOMITING OR DIARRHEA IN A FOOD ESTABLISHMENT

NOTE: Any open food or beverage in the vicinity of a vomiting or diarrheal accident should be discarded. Any equipment or fixture that has been in contact with vomit or diarrhea should be disinfected.

1. Clean !

a. Remove vomit or diarrhea right away

- Temporarily close or segregate the contaminated area to minimize unnecessary exposure to patrons and employees. Remove the ill person from the food establishment as soon as possible.
- Wearing protective clothing, such as disposable gloves, apron and mask, wipe up vomit or diarrhea with paper towels
- Use absorbent material such as baking soda or cat litter on carpets and upholstery to absorb liquid. Do not vacuum, pick up using paper towels
- Dispose of paper towel/waste in a plastic trash bag, close tightly, and remove from the premises immediately

- b. Use warm soapy water to wash surfaces contacted by vomit or diarrhea and all hand contact surfaces in the area, such as door knobs, toilet handles and sinks
- c. Rinse thoroughly with clean water
- d. Dry with paper towels

2. Disinfect hard surfaces with a chlorine bleach solution !

Steam cleaning may be preferable for carpets and upholstery as chlorine bleach may permanently stain fabrics.

- a. Prepare a 1000-5000 PPM chlorine bleach solution (never mix bleach with other cleaners)



= ~3500 PPM

1 CUP REGULAR STRENGTH BLEACH

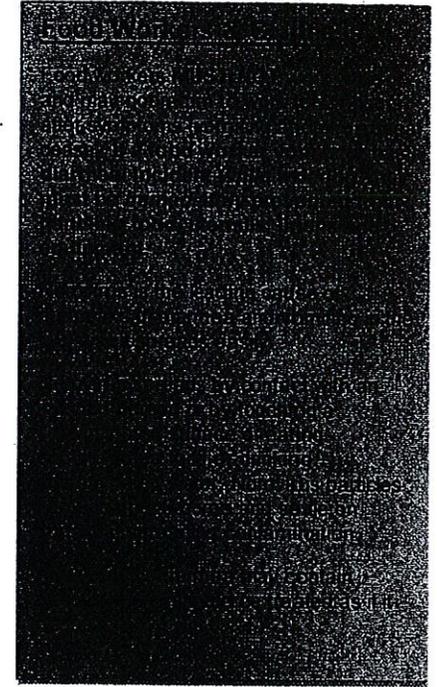
1 GALLON WATER

NOTE: Quaternary ammonium and iodophor sanitizers may not be effective against some disease-causing germs. Use chlorine bleach.

- b. Apply and leave surfaces wet for 5 minutes
- c. Rinse all surfaces intended for food or mouth contact with clean water before use
- d. Discard or thoroughly wash and disinfect all tools used for clean up

3. Wash hands with soap and water !

NOTE: Hand sanitizers may not be effective against some disease-causing germs, including Norovirus.



IF CLOTHING OR OTHER FABRICS ARE AFFECTED...

- Remove and wash all clothing or fabric that may have had contact with vomit or diarrhea
- Machine wash these items with detergent, hot water and bleach if recommended, using the longest wash cycle
- Machine dry on highest setting

This procedure was developed for food establishments by the Suffolk County Department of Health Services, using information available from the

and the
Feel free to adapt or modify this procedure to suit the needs of your establishment.

INSTRUCCIONES PARA LIMPIAR Y DESINFECTAR

SIGA ESTAS INSTRUCCIONES PARA RESPONDER ACUALQUIER ACCIDENTE EN EL QUE HAYA VOMITO O DIARREA EN UN ESTABLECIMIENTO DE COMIDA

ATENCIÓN: Toda comida o bebida que se encuentre cerca del sitio donde hayan sucedido accidentes en los que vomito o diarrea estén presentes debe de ser eliminada. Todo equipo o instalación que haya estado en contacto con vomito o diarrea debe de ser desinfectado.

1. ¡Límpielo!

- Limpie el vomito y la diarrea inmediatamente**
 - Cierre o aisle el área contaminada para limitar exposición innecesaria de clientes y empleados. Saque a la persona enferma del establecimiento de comida lo más pronto posible.
 - Use equipo protector como guantes, delantal y careta/mascara, limpie el vomito o diarrea con toallas de papel.
 - Use material absorbente como bicarbonato de sodio o arena para gatos para absorber el líquido. No aspire, recójalo con toallas de papel.
 - Tire las toallas de papel/residuos en una bolsa plástica de basura, ciérrela firmemente y sáquela del establecimiento inmediatamente.
- Utilice agua jabón para lavar las áreas contaminadas con vomito y diarrea y todas las superficies que hayan sido tocadas con las manos como las manijas de las puertas, manijas de los inodoros/retretes y lavamanos/fregaderos.**
- Enjuague completamente con agua limpia.**
- Seque con toallas de papel.**

2. Desinfecte las superficies planas con solución de cloro/lejía

Limpiado al vapor puede ser preferible para alfombras y mueblería ya que el cloro/lejía puede manchar permanentemente.

- Prepare una solución de 1000-5000 partes por millón de cloro/lejía (nunca mezcle cloro/lejía con otros químicos de limpieza)**



= ~3500 PPM

8 ONZAS LIQUIDAS DE CLORO/LEJÍA REGULAR 1 GALÓN DE AGUA

- Aplique y deje las superficies húmedas por 5 minutos**
- Enjuague todas las superficies destinadas para comida o contacto con la boca con agua limpia antes de usarlas.**
- Elimine o lave completamente y desinfecte todos los utensilios usados para limpiar.**

3. Lávese las manos con agua y jabón

ATENCIÓN: Desinfectantes de manos no siempre son efectivos contra algunos gérmenes que causan enfermedades, incluyendo Norovirus.



SI LA ROPA U OTRAS SUPERFICIES DE TELA SON CONTAMINADAS...

- Quite y lave toda la ropa o superficies de tela que puedan haber estado en contacto con vomito y diarrea.
- Lávelos en la maquina de lavar ropa con detergente, agua caliente y cloro/lejía si ha sido recomendado, usando el ciclo de lavado mas largo
- Séquelos en la maquina secadora en el ciclo mas caliente.

Estas instrucciones fueron elaboradas para establecimientos de comida por el departamento de servicios de salud, usando información disponible del

Departamento de Salud y de la

Estas instrucciones pueden ser adaptadas a las necesidades de su negocio

SAFETY PROCEDURES

POLICY

A sufficient number of the correct type of fire extinguishers are strategically placed and inspected annually.

PROCEDURE

- Training is provided and documented at least annually to site staff and participants on the use of fire extinguishers and evacuation procedures.
- Fire drills are conducted and documented annually.

FOOD INVENTORY

POLICY

All sites will have an established food inventory system. They will utilize both the perpetual and physical methods of inventory control.

PROCEDURE

Each site will utilize inventory forms or develop one suitable to their site. Designated staff will be responsible for maintaining this inventory. Instructions for utilizing both the perpetual and physical systems can be found on pages 200.49 and 200.50.

PERPETUAL FOOD INVENTORY

- a. Name of Food. One food goes on each page. Give separate pages for canned, frozen, and fresh food items. For example, one page for frozen spinach and one page for canned spinach. Classify this list of foods so it coincides with the Physical Inventory. Put separate food items into groups. For example, beverages include coffee, tea, cocoa, etc., condiments include spices, flavorings, etc.
- b. Write the size of the container the food is purchased in, such as 1 case of 6 #10 cans of spinach. This size can be found on the Market Order Form.
- c. Write the size of one unit. For example, #10 can, 1 pound package, 1 pound of meat.
- d. Write the number of portions you expect to get from one unit (can, pound, etc.). For example: 24 one half cup servings of spinach in 1 #10 can.
- e. Write the date food is received. This can be obtained from the Market Order Form.
- f. Write the quantity of food received, such as 1 case of 6 #10 cans of spinach. Add this amount to the Balance on hand (k).
- g. Write the total cost of the quantity received. For example: 1 case of spinach cost \$4.20. This price comes from the Market Order Form.
- h. Write the cost of the unit size. Divide the cost of the quantity purchased by the number of units in the purchased size. For example: 1 case of spinach cost \$4.20, there are 6 cans in a case, so $\$4.20 \div 6 = 70 \text{ cents}$ - 70 cents is the Unit Price.
- i. Write the day or week the food was used and the quantity used.
- j. This comes from the Actual Daily Food Cost Sheet. Subtract the quantity used from the Balance on Hand.
- k. Add or subtract the quantity received or used to adjust the Balance on Hand. The Balance on Hand originally comes from the Physical Inventory. At month's end, correct your perpetual inventory so it equals your physical inventory. Note correction under Comments (i).
- i. Write other Comments such as brands preferred, dealers preferred, and any errors that appear between the physical and perpetual inventory.

MONTHLY PHYSICAL FOOD INVENTORY

This listing of foods on hand should be taken monthly at the same time each month. Date the inventory form.

The list is completed by counting all the unopened individual containers of food, including those unopened or unused foods in the refrigerator and freezer. **DO NOT** include any food item or container of food that will be used the day the list is taken. **DO NOT** include leftovers.

This listing separates the food items into groups and then alphabetically lists them. Look over the three sheets before you begin the actual inventory.

The count is most easily done by two people. One person counts the food items including size of containers (cans, packages, etc.) in stock while the other person records the information.

Obtain the unit cost (cost per pound, can, package, etc.) for each food item from the perpetual inventory. While obtaining the price, check to see if the amounts on hand are the same. If they are different, recheck the physical inventory. Correct the perpetual inventory so it agrees with the physical inventory. Note the corrections under other comments on the perpetual inventory. Find the total value of each food item by multiplying the number of units on hand by the unit cost.

Add up the total value of each food. This will give you the monetary value of the food you have on hand in your storeroom, refrigerator and freezer. This figure should be used to calculate your monthly food cost.

EMERGENCY CLOSING AND PROVISIONS

Nutrition program staff must call by 8:30 a.m. to notify the Suffolk County Office for the Aging of their closing.

When a nutrition site is closed due to inclement weather, the closing should be announced on local radio and television stations.

Seniors should be instructed to listen to their local radio and television stations.

POLICY

A suggested emergency food list has been developed as a guide to provide clients with suitable food items in the event of weather related emergencies or such times that meals cannot be served and/or prepared.

This list could also be utilized as a guide for providing shopping assistance.

PROCEDURE

A letter should accompany the emergency food supplies, stating its purpose and use.

Emergency food supplies should ideally be sent out twice a year to cover winter weather and the hurricane season.

When possible, meals should be provided for anticipated weather emergencies. NPE (Nutrition Program for the Elderly) staff should contact at risk, and/or isolated participants especially during disruption of regular scheduled meal delivery and check on participant's access to food and safety.

CLIENT EMERGENCY PROCEDURE

POLICY

In the event of emergencies, such as weather events or power outages, at risk clients must be contacted for safety and other needs that may arise.

PROCEDURE

NPE (Nutrition Program for the Elderly) staff must maintain an active client list in order to check on their safety.

IDEAS FOR YOUR EMERGENCY FOOD SHELF

FRUITS AND VEGETABLES

Canned fruits or vegetable juices	Canned Soups
Canned fruits or vegetables	Dried fruits

BREAD AND CEREALS

Crackers, rice cakes or bread sticks	Granola bars
Instant cereal	Ready to eat cereals
	Canned spaghetti dishes
	Instant mashed potatoes

MILK AND MILK PRODUCTS

Parmalat milk	Cheese snack packs
Canned milk	Instant or canned puddings
Dry milk	

MEAT AND MEAT ALTERNATIVES

Canned meat, poultry or fish	Canned stew, chili or soups
Baked beans or other canned beans	Dried soups (cup-a-soup, noodle or bean soups)
	Peanut butter

OTHER FOODS

Jelly, jam, syrup	Bottled water
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ALWAYS REMEMBER TO RESTOCK NEEDED ITEMS!!!

EMERGENCY MENU

Breakfast

Canned 100% Fruit Juice (4 oz.)
Instant Oatmeal or Cream of Wheat (1 pkg.)
Canned Ham Spread or Peanut Butter (1/2 of 1 ½ oz.)
Unsalted Crackers (4-5)
Parmalat Low-Fat Milk (8 oz.)

Lunch

Low Sodium Canned Vegetable Soup (6 oz.)
Or Canned Three Bean Salad (1/2 cup)
Canned 100% Fruit Juice (4 oz.)
Tuna or Chicken Canned in Water (3 ¼ oz.)
Or Sardines Canned in Tomato Sauce
or Olive Oil (3 ¾ oz.)
Unsalted Crackers (5-6)
Canned Pudding (4 oz.)
Parmalat Low-Fat Milk (8 oz.)

Dinner

Low Sodium Canned Lentil or Pea Soup (6 oz.)
Tuna or Chicken Canned in Water (3 ¼ oz.)
Or Sardines Canned in Tomato Sauce
or Olive Oil (3 ¾ oz.)
Canned Carrots or Beets (1/2 cup)
Peaches or Pears Canned in Water,
Juice or Lite Syrup (1/2 cup)
Unsalted Crackers (5-6)
Parmalat Low-Fat Milk (8 oz.)

Snack

Canned Ham Spread or Peanut Butter (1/2 of 1 ½ oz.)
Unsalted Crackers (4-5)
Parmalat Low-Fat Milk (8 oz.)