



## **Congregate Meal Program Guideline**

Southern Health-Santé Sud has developed this guideline to provide a practical and useful resource for grant funded community meal programs.

The information in this guideline is based on policies from the Winnipeg Regional Health Authority's Congregate Meal Program Guidelines which make reference to City of Winnipeg Food Services Establishment By-Law No. 5160/89 (Dec. 2008) and Canada's Food Guide.

There may be instances when regulations of the Public Health Act: Food and Food Handling Establishments change and therefore it is important to note that the information in this guideline will not take precedence over the Public Health Act if a discrepancy is found. It is crucial programs follow these regulations in order to run safely.

There are a number of additional useful resources on food safety, menu planning, and nutrition which can be found at: <http://www.wrha.mb.ca/community/seniors/cmp.php>.



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## **Purpose of Congregate Meal Programs**

- Serve the needs of older adults in a community or area.
- Provide clients with well balanced meals appropriate to Canada's Food Guide to reduce malnutrition risk and improve nutritional status
- Provide meals at a reasonable cost
- Provide meals that encourage a friendly and welcoming atmosphere in a social context in order to decrease social isolation and loneliness
- Encourage volunteer and leadership opportunities
- Improve the health and social well-being of older adults
- Link older adults to community based services
- The sponsor *may* welcome clients from the community who are under the age of 55 and would benefit from a healthy meal in a social setting.



The Congregate Meal Program Coordinator is responsible to coordinate the provision of nutritious meals and social support to seniors in a congregate dining setting.

Responsibilities include:

- Planning a nutritious well balanced menu
- Preparing, serving and cleaning up the meal
- Recruiting, training and scheduling volunteers
- Encouraging participants and community volunteers to assist with the program
- Keeping attendance records of participants and volunteers
- Recording statistics for submission to the sponsoring Board and Southern Health-Santé Sud
- Purchasing equipment, supplies and groceries
- Promoting the program

Volunteer duties include

- Helping to shop for groceries, prepare meals, serve meals and clean – up
- Greet participants, assist with removal and putting on of coats as needed
- Setting tables
- Delivering food trays to suites, or delivering meals on wheels to participants unable to leave home
- Encouraging social interaction of participants at dining table

### **Checklist for a Successful Program**

- ✓ Nutritious, flavorful, well balanced meals as per Canada's Food Guide
- ✓ Attractive presentation of food
- ✓ Knowledgeable and friendly staff and volunteers
- ✓ Pleasant, welcoming and supportive environment
- ✓ Participant input
- ✓ Adequate access to the meals via transportation to the program and/or the availability of Meals on Wheels
- ✓ Publicity within the community
- ✓ For each day funded, a minimum of 10 meals are to be served to clients in a dining room setting and/or with meals on wheels

## **Food Safety**

It is the responsibility of the Meal Coordinator and the Sponsor (Board) to ensure best practices around food safety are being adhered to.

This includes, but is not limited to:

### **Certificates and Licenses:**

- Successfully completing a certified safe food handler's training program. If a replacement Coordinator is providing coverage, he or she must also have this training. The certificate of course completion must be posted in a prominent location in the kitchen.
- All Congregate Meal Programs must have a valid permit from the Public Health Inspector; the permit must be current and posted in a prominent location.
- The Congregate Meal Program must be able to document:
  - Compliance with fire safety standards
  - Certification as an accessible facility

### **Food Protection**

- No food shall be served at any Congregate Meal Program unless it is prepared on the premises or another place that has been approved by the Public Health Inspector.
- Potentially hazardous foods must be kept hot or cold as appropriate.

### **Food Storage**

- Food removed from original packaging must be stored in clean, covered containers. All leftover food shall be labeled identifying the food and when it was first used.
- Bulk food (if not in its original package) should be stored in a container identifying the food.



### **Refrigerated Storage**

- For best quality food and safety, keep fridge temperatures below 4° C.
- Frozen food must be kept and stored at -18°C (0°F) or below.
- All refrigeration equipment must have an easily readable thermometer.

### **Food Preparation**

- Food must be prepared on surfaces that have been properly cleaned, rinsed and sanitized.
- All raw fruits and vegetables must be properly washed in clean water prior to eating and cooking.
- Frozen foods must be thawed:
  - In a refrigerator kept below 5°C (41°F).
  - Under cold running water.
  - As part of the cooking process.
  - In a microwave.
- Once thawed, raw frozen food must not be re-frozen, unless cooked first.

### **Food Service**

- Foods shall be kept at an internal temperature below 5°C (41°F) or above 60°C (140°F) during service.
- Milk and milk products must be served from their original containers; cream and milk used as a beverage additive may be served in a protected pour type container not exceeding 250 ml in capacity.
- Every table used for eating must be provided with a clean tablecloth or place mats, or individual napkins, or sanitized trays.

### **Food Transportation**

- All foods being transported from the Meal Program must be effectively protected from contamination.
- Potentially hazardous food requiring refrigeration or hot storage must be kept below 5°C (41°F) or above 60°C (140°F) during transport.
- Frozen food must be kept below -15°C (5°F) during transport.

### **Cleaning, Sanitization and Storage of Equipment & Utensils**

- Tableware, equipment and utensils must be washed, rinsed and sanitized after each use.
- Food contact surfaces (stoves, grills, etc) must be cleaned as often as necessary, but always at the end of each day's operation.
- Preparation tables and cutting boards must be cleaned and sanitized after each use.
- All equipment and utensils must be air dried after sanitation.
- Cleaned and sanitized utensils should be touched only by their handles.
- Cups, glasses, bowls, plates, and similar items must be handled without contact to inside surfaces or surfaces that contact the user's mouth.

### **Wiping Cloths**

- Cloths used for cleaning equipment, utensils, and shelves must be:
  - Moist with bleach as per Manitoba Health Safe Food Handler Training
  - Clean
  - Rinsed frequently
  - Used for no other purpose.





Additional information on safe food handling can be found at:

<http://www.gov.mb.ca/health/publichealth/environmentalhealth/protection/food.html>

<http://www.wrha.mb.ca/extranet/nutrition/FSM-SafeFoodHandling.php>

<http://www.wrha.mb.ca/community/seniors/cmp.php>

<http://befoodsafe.ca/>

### **Coordinator and Volunteer Health and Cleanliness Practices**

- Coordinators and volunteers must wash their hands and exposed arms thoroughly with soap and warm water before starting work, during work as often as necessary to keep them clean, and after smoking, drinking, or using the washroom.
- Clothing must be clean.
- No finger nail polish or jewelry is to be worn by individuals involved in the preparation of food.
- All individuals preparing food, dispensing food, or washing utensils must wear a clean, full length apron, smock, or uniform that is worn for no other purpose.
- Head covering or hair restraints must be worn so as to prevent direct or indirect contact of hair with food, equipment, or utensils.
- Beard Covers must be worn if an individual has facial hair

### **Public Health Standards**

- Major appliances are to be cleaned regularly.
- Storage cupboards are to be cleaned monthly.
- The freezer is to be cleaned quarterly.
- Warmers are to be emptied daily.

### **Safety Requirements**

- A fire extinguisher is to be available at all times.
- Exits are to be clearly marked and fire procedures posted.
- A telephone must be available for use during an emergency situation.
- Emergency first aid kits must be stocked and accessible.

## **Confidentiality**

The Congregate Meal Program Coordinators shall take all reasonable steps to protect Personal Information and Personal Health Information from risks such as inappropriate collection, use or disclosure in accordance with the provisions of *The Freedom of Information and Protection of Privacy Act* (Manitoba) and *The Personal Health Information Act* (Manitoba).

## **Daily Operations**

Statistics:

- Congregate meal programs will maintain a daily sign in sheet for meal participants (this includes meals that are delivered). This will enable the program to properly document the number of meals served each day.
- Volunteer signup sheets should also be maintained to enable accurate accounting of volunteer hours.

Payment:

- Cost will vary depending on the particular meal program.
- As of 2016, the average cost programs charged for a meal was \$7.00.
- Participants should be notified in advance if the cost of meals is to increase.

Leftovers:

- If there are sufficient leftovers, “take-home heat and serve” meals could be made available to participants at the same price as a regular meal or a reasonable price set by the Board. Ensure these meals are covered in containers and frozen if not sold immediately.
- If there are not enough leftovers to make dinners, then they can be sold to meal program participants and volunteers.

Menu Planning:

- Menus must be posted.

- Menus must be planned in accordance with Canada's Food Guide to Healthy Eating, keeping in mind the particular nutritional needs of seniors. (See Appendix B attached for sample menus).
- Menus should include sufficient variety.
- Fresh fruit and vegetables will be used as often as possible.
- Use and provision of "ready-made" meals (ex: frozen boxed lasagna) is strongly discouraged. The purpose of the meal program is to prepare nutritious meals using fresh ingredients.
- Meal Coordinators should attempt to accommodate diet restrictions and/or allergies.

### **Dining Space and Environment**

#### Space:

- The entrance to the facility should enable participants to get into and out of vehicles easily.
- Ramps for wheelchairs and walkers should be in place.

#### Washrooms:

- Must be wheelchair accessible.
- Must have hand washing signs posted in toilet rooms used by coordinators and volunteers.
- Must have adequate ventilation.

#### Furniture Layout:

- Dining tables should be well spaced to allow ease of movement, and arranged to encourage socialization among participants.
- Arms of wheelchairs should fit under table tops.
- Chairs should have arms to provide support for frail participants, and side posts or raised top corners to provide a place for canes.



#### Lighting:

- Direct light in participants eyes, either artificial light or sunlight, should be avoided.
- For visually impaired participants', provide colour contrast between the dishes and table surface.
- Table coverings of soft colours and non-glare materials are most appropriate.

#### **Written Agreement Between Meal Program and Facility**

It is strongly encouraged that each program, not operating in an owned facility, create a written agreement with the owner/manager of the meal site. This will assist in creating a mutual understanding as to which party is responsible for certain issues as they arise.

The agreement should address at a minimum:

- Responsibility for care and maintenance of the facility, specifically including restrooms, kitchen, and areas of common use.
- Responsibility for snow removal.
- Agreement on utility costs.
- Responsibility for insurance coverage.
- Security procedures.
- Agreement on maintenance, repairs and replacement of appliances and replacement/breakage of dishes.
- Responsibility for appropriate licensing by the Health Department.
- Responsibility for safety inspections.

#### **Reporting Requirements**

The Congregate Meal Coordinator is responsible for submitting a monthly statistical report to Southern Health-Santé Sud by the 5<sup>th</sup> of the following month. Reports may be



submitted via fax, email or mail. Photos of the reports taken with a cell phone will not be accepted.

### **Quality Improvement**

The Congregate Meal Program is strongly encouraged to regularly survey participants about the program. Survey results should be reviewed by the Board. The Board should identify areas for improvement and implement an action to address those areas. Samples of surveys are attached (See Appendix A). As many older adults have difficulty seeing fine print, it is advised that a minimum size of 14 font and Arial style be considered on a survey for ease of reading.

**Sample Meal Program Survey**

Provide outline of current meal program:

- When program is offered
- Type of meal served
- Cost of meal
- Any other information of interest

**Thank you for your time. All information gathered will be kept confidential and is only being used for the improvement of the meal program.**

**Please check yes or no.**

**1. Do you currently participate in the meal program offered at \_\_\_\_\_?**

- Yes
- No

If no, please indicate reason:

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**2. Do you currently receive help with meal preparation?**

- Yes
- No

If yes, who is providing help with meal preparation?

- Home care
- Meals on Wheels
- Family / friend
- Other

If no, would you be interested in having meals provided for you?

- Yes
- No

**3. What meal would you prefer to be provided?**

- Noon meal  time: \_\_\_\_\_
- Evening meal  time: \_\_\_\_\_

**4. Which days of the week would you like the meal program to be offered?**

SUN\_\_\_ MON\_\_\_ TUES\_\_\_ WED\_\_\_ THURS\_\_\_ FRI\_\_\_ SAT\_\_\_

**5. How many days per week would you attend the program?**

- Every time it is offered
- Once or twice a week
- Every once in awhile

**6. What would you be willing to pay for a meal?**

Please indicate the highest amount you would pay for a noon meal: \_\_\_\_\_

Please indicate the highest amount you would pay for an evening meal:

\_\_\_\_\_

**7. Would you be interested in helping out with the meal program?**

- Yes
- No

**8. Would you be interested in recreational activities offered before or after the meal program?**

- Yes
- No

If yes, what types of activities would you be interested in attending?

**9. Would you be interested in purchasing food leftover from the meal program to take home?**

- Yes
- No

**10. Any other comments or questions:**

**Thank you for your time. All information gathered will be kept confidential and is only being used for the improvement of the meal program.**



The following questions are for residents who are **currently** attending the meal program:

**1. How often do you attend the meal program?**

- Every time it is offered
- A couple times a week
- Every once in awhile

**2. What do you think about the cost of the meals?**

- Too high
- High, but acceptable
- Acceptable

**3. Would you like the program to be offered...:**

- More often
- Stay the same
- Less often

**4. Is the menu posted in advance for you to decide what meals you'll attend?**

- Yes
- No

**5. Is there enough variety in the meals offered?**

- Yes
- No

**6. The quality of the food is:**

- Excellent
- Good
- Satisfactory
- Poor

**7. Do you feel you are eating healthy meals?**

- Yes
- No

If no, are there any changes you would like to see to make your meal healthier? (i.e. lower fat options, lower salt, sugar-free, etc.)

**8. Do you feel welcome when you come for a meal?**

- Yes
- No

**9. Are the volunteers friendly and helpful?**

- Yes
- No

**10. Are the other meal program participants friendly and enjoyable to eat with?**

- Yes
- No

**11. Are you able to give suggestions for meals? (i.e. variety, choices, etc.)**

- Yes
- No

**12. Do you volunteer with the meal program?**

- Yes
- No

If no, would you be interested in helping?

Name: \_\_\_\_\_ Phone number: \_\_\_\_\_

**13. Any other comments or suggestions:**

**Thank you for your time. All information gathered will be kept confidential and is only being used for the improvement of the meal program.**

## **Possible Client Satisfaction Survey Questions**

### **Meals**

Are you satisfied with the way the food tastes?  
Are the hot foods served hot and the cold foods served cold?  
Are you satisfied with the variety of foods provided?  
Is there enough food offered at each meal?  
Are you happy with the menu choices each month?  
Do you feel the cost of the meals is affordable?  
Are there alternate foods available for those people with special dietary needs (e.g. diabetes)?  
Can you take leftover food home?  
What types of food would you like to see offered?

### **Social Isolation**

Have your social opportunities increased since you starting attending the meal program?  
Do you now enjoy mealtime more because of the company?  
As a result of the mealtime, do you have something to look forward to?  
Do you feel cared for by the meal program volunteers?  
Have you made friends as a result of this program?  
Do you enjoy socializing at mealtime?

### **Site Characteristics**

Would you recommend this meal program to a friend?  
Are the staff and volunteers at the site friendly and welcoming?  
Is the environment pleasant, welcoming and supportive?  
Is attending the meal program easily accessible?  
Is the facility held in a welcoming, inviting atmosphere?

Do you have any suggestions that would make the congregate meal program better? Please write down your ideas and suggestions below.

**Congregate Meal Program Sample Menu Week One**

	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>
<b>Soup</b>	Chicken Noodle	Pea	Tomato Juice	Vegetable	Beef Barley
<b>Entrée</b>	Roast Pork	Baked Salmon	Beef Stew	Roast Turkey with Gravy	Quiche
<b>Starch</b>	Rice Pilaf	Mashed Potato	Boiled Potato	Brown Rice	Whole Wheat Bread
<b>Vegetable</b>	Mixed Vegetable	Broccoli	Tossed salad	Carrots	Caesar salad
<b>Dessert</b>	Fresh Fruit Salad with Yogurt	Banana Pudding	Applesauce	Oatmeal cookie	Date Square



**Appendix B**

**Congregate Meal Program Sample Menu Week Two**

	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>
<b>Soup</b>	Cream of Potato	Apple Juice	Pea	Minestrone	Tomato Rice
<b>Entrée</b>	Salisbury Steak with Gravy	Glazed Baked Ham	Meat Loaf	Baked Chicken Breast	Spinach Lasagna
<b>Starch</b>	Cabbage Rolls	Sweet Mashed Potato	Perogies	Boiled Potato	Garlic Bread
<b>Vegetable</b>	Creamed Corn	Mixed Vegetables	Tossed salad	Carrots	Caesar salad
<b>Dessert</b>	Angel Food Cake with Strawberries	Chocolate Pudding	Boston Cream Pie	Fruit Salad and Yogurt	Banana Loaf

**Congregate Meal Program Sample Menu Week 3**

	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>
<b>Soup</b>	Vegetable	Corn Chowder	Beef Barley	Chicken Noodle	Cream of Mushroom
<b>Entrée</b>	Orange Beef Stir Fry	Baked Fish Fillets	BBQ Chicken	Shepherd's Pie	Roast Beef
<b>Starch</b>	Rice or Noodles	Oven Roasted Potatoes	Baked Potato	Whole Wheat Bun	Mashed Potato
<b>Vegetable</b>	Small Spinach Salad	Coleslaw	Broccoli with Cheese Sauce	Tossed Salad	Triple Bean Salad
<b>Dessert</b>	Fresh Fruit with Yogurt	Rhubarb Pie	Chocolate Cupcake	Ice Cream	Fruit Cake



**Appendix B**

**Congregate Meal Program Sample Menu Week 4**

	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>
<b>Soup</b>	Tomato	Beef Barley	Vegetable	Minestrone	Pea
<b>Entrée</b>	Sweet & Sour Pork	Tuna & Noodles	Chicken Stew	Spaghetti with Meat Sauce	Baked Ham with Pineapple Sauce
<b>Starch</b>	Rice Pilaf	Whole Wheat Bread	Oven Roasted Potatoes	Garlic Bread	Scalloped Potatoes
<b>Vegetable</b>	Mixed Vegetables	Green Beans	Caesar Salad	Tossed Salad	Creamed Corn
<b>Dessert</b>	Fruit Cocktail	Sliced Peaches	Chocolate Cake	Apple Crisp	Ice Cream