



## COVID-19 SUGGESTIONS FOR SENIOR NUTRITION PROGRAMS As of March 30, 2020

States and localities can use the flexibility of the Older Americans Act to adapt their policies and procedures. While States may seek a major disaster declaration ([click here to view the Administration Community Living's Nutrition Services Emergency Management FAQ](#)) to enact the Stafford Act (which offers more flexibilities), States may choose to still use their current authority.

Align the suggestions below with your State and local guidance.

### **Home Delivered Meal Programs (using C-2 monies) Consider:**

- Offering drive-through or pick-up meals such as frozen, shelf-stable, fresh, etc. with a daily check in call.
- Prioritizing congregate participants, placing participants on home-delivered routes using phone or an online screening process.
- Offering congregate nutrition program participants shelf-stable meals, drop shipped meals using UPS, Fed Ex or other known food vendors, or offering them frozen meals.
- Distributing a week's worth of frozen meals on rotating schedules, and make daily phone calls to check on people's well-being.
- Collaborating with local restaurant voucher partners to create "To Go" meals.

### **Maintaining a Congregate Nutrition Program Concept (using C-1 monies) Consider:**

- Setting up lunch friend programs where a healthy person dines with a senior virtually.
- Coordinating virtual sites to meet together at lunchtime.

### **Ways to Increase Meals/Food Delivery for All Programs Consider:**

- Providing seven meals a week with a daily check in call.
- Providing two meals a day up to 14 meals in a week. Provide daily check in calls.
- Providing breakfast as one of those meals. Breakfast may be a lower-cost meal, and receiving it can provide more variety, especially if canned/dried fruits, juices are included; instant oatmeal; dry cereals made of bran; bread for toast; peanut butter; coffee or tea, etc.
  - Providing breakfast meals for frail, older adults: many people have better appetites earlier in the day, and may need to take medications with food; and breakfast may be less expensive.
  - Providing breakfast meals might be an option as seniors may have limited refrigerator or freezer space to store additional meals, especially if you are delivering multiple meals.
- Collaborating with multiple small, local restaurant owners who may be willing to help make meals for your participants.



- Providing prioritized service by States, AAAs, and local providers: for example, provide two meals/day to the frailest or functionally impaired, based on local assessments, and provide one meal a day to those who are less frail or functionally impaired.
- Supporting spouses and other family caregivers to enable care for other people: for example, if a person was prioritized lower previously because of a having a caregiver, instead allow both the person and caregiver to receive meals to ensure better health for both of them.
- Providing sample menus for simple, low-cost food preparation for those who are functionally impaired, or who have caregivers, especially if there is bulk food or grocery delivery.
- Working local solutions with local restaurants, faith-based organizations, food banks and pantries: contract with local organizations, restaurants, grocery stores to assemble shelf-stable meals.
- Providing lists of sample foods to include in a bulk food or grocery delivery, along with a menu with recipes and include canned fruits and vegetables; and food items that are lower in sodium and added sugars such as low sodium canned vegetables or soup.
- Working with local food banks, faith-based and voluntary organizations to expand services.
- Working with college students and high school service groups and recruit them as volunteers.
- Providing training for new volunteers on food safety and safety measures, interacting with older adults, importance of socialization, and signs of distress in older adults.
- Working with local fire departments and adult protective services to be aware of vulnerable people.
- Working collaboratively with Title VI tribal programs, there may be opportunities to share viable ideas for both Title III and VI resources.
- Encouraging state nutritionists and administrators to share ideas on the listserv and communicate within the state and with AAAs and local providers.
- Collaborating with local school districts or local transportation providers to leverage school buses to deliver meals; particularly if your organization is in a rural area.
- Establishing meal delivery protocols and expand meal drop-off sites to include community centers, schools, places of worship, and pharmacies.
- Collaborating with local school systems to prepare meals, menus, and food supply access.
- Compiling helpful kits with hand sanitizer, toilet paper, paper towels, cleaning supplies, etc.

*If your State does not allow for flexibility such as these ideas, it may be an opportunity to revisit established polices, depending on your local situation. Think broadly, creatively, and look at new and existing partners to help you.*

### **All Programs: Tips to Engage Older Adults During Periods of Social Distancing**

*Consider:*

- Setting up virtual congregate site rooms using FaceTime, Zoom, GoToMeeting, UberConference etc. to host check-in calls, lunchtime, coffee hours, and book clubs.
- Leveraging social networking platforms such as Twitter, Facebook, and Instagram to share content, encouraging messages, helpful resources, and staying connected with others.



- Using platforms like Mailchimp and Constant Contact to create email newsletters.
- Establishing or expanding virtual friendly visiting programs and engaging staff and volunteers to make daily phone calls to older adults.
- Identifying virtual events (i.e. online concerts, museum tours, amusement park rides, aquarium visits) and sharing these events or website links using email.
- Engaging volunteers, participants and staff to design and send out greeting cards to homebound older adults and others such as socially distant congregate nutrition program participants and nursing home residents.

The Administration for Community Living (ACL) realizes how valuable Aging Network nutrition services are, and how essential the services are to high-risk older adults in our communities. ACL encourages you to communicate with your colleagues and others across the nation, in your states, and in your localities.

We are stronger together. Our strength and partnership serve as a powerful platform to support the older adults we so passionately care about. ACL appreciates what you do for our older adults, each day, across our great Nation.