



**Department for
the Aging**

Older Adult Center Standards of Operation and Scope of Services

Based on standards set by the New York City Department for the Aging and the New York State Office for the Aging.

Updated June 2023

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General Standards of Operation

(Applicable to all NYC Aging-Funded Programs)

Introduction

The following General Standards of Operation apply to all NYC Aging-funded programs, unless otherwise specified. NYC Aging's Program Standards provide service-specific guidelines applicable to programs that provide those services.

Section 1. Eligibility

See specific program standards for eligibility requirements for that service.

Standard 1: Eligibility and Equal Access

Compliance 1.1. The program ensures equal access to all eligible persons.

- Within funding availability, the program ensures any eligible adult equal access to participation, services, activities and informational sessions without regard to race, color, creed, national origin, gender identity, age (over 60), non-citizen or citizen status, disability, sexual orientation, marital status, familial status, military status, arrest or conviction record, predisposing genetic characteristics or other categories protected by law against discrimination.
- Service denial to eligible individuals may occur under these circumstances:
 - Reasons stated in service-specific standards.
 - Another provider can more appropriately serve the individual (the individual may be referred to that provider).
 - In accordance with program policies and procedures when the individual's behavior causes physical or mental harm to others.

Compliance 1.2. Free-of-Cost Services.

- The program does not charge fees for program participation or for providing services, unless specified otherwise in service-specific standards.

Compliance 1.3. Persons with Disabilities.

- The program addresses the needs of persons with disabilities, including those with hearing and visual impairments. Resources may include assistive technology for persons with hearing impairments (TTY), large print documents for persons with visual impairments, and other resources specified in service-specific standards.
- The program complies with the Americans with Disabilities Act (ADA) if older adults are served on site. If not at street level, the center has an exterior ramp and/or elevator from ground level.
- At least one bathroom used by participants is barrier free and easily accessible from all program areas.
- Dining room access is barrier free and at least one table is wheelchair accessible.

Section 2. Informed Consent and Confidentiality

Pursuant to federal and state requirements, all providers of services under the Older Americans Act or New York's Elder Law must adhere to procedures protecting the confidentiality of personal information gathered in the conduct of their respective responsibilities. This includes obtaining the informed consent of an individual before his or her personal information is recorded in the client data system and before any disclosure of personal information is made,

including to service providers for referral purposes. (See *specific program standards for additional consent policies related to that service*.) All NYC Aging funded programs as well as those funded through NYC Aging (e.g., discretionary-funded program) **must** use the approved consent forms.

Standard 2: Consent to Collect and Record Data

Compliance 2.1. Consent to Collect and Record Data. The program obtains informed consent of all individuals to capture his/her information before a record is created and any identifying information is entered in the client data system.

- **Existing Clients.** For clients active prior to February 3, 2023, a signed Consent to Collect Data form, when applicable, must be obtained by February 5, 2024.
- **In-person.** When the program meets with a client in-person, the program obtains a signed Consent to Collect Data form at the time of the in-person contact.
- **Telephone/Virtual Consent to Collect Data.** When an initial contact is made over the telephone or virtually, the program obtains verbal consent to collect data before client information is recorded in the client data system. The program documents in the client data system that consent was received and obtains a signed consent during a follow-up face-to-face contact or electronically.

Standard 3: Consent to Refer and Share Information

Compliance 3.1. Consent to Share and Refer Information. The program obtains signed consent from the client before the client is referred to another provider for services and client information is shared.

Compliance 3.2. Information and Assistance/Referral Only. If a client refuses to provide consent to share and refer, the program provides the client with information for them to contact the service provider themselves. The program cannot enter identifying information or directly make any referrals on behalf of the client. The program explains this to the client.

Standard 4: Consent Revocation

Compliance 4.1. Consent Revocation Information. Clients wishing to revoke consent are provided with an Informed Consent Revocation Form by mail, or by email if requested by the client. Consent remains in effect until the client revokes it.

Compliance 4.2. Revocation of Consent to Refer/Share Information. If a client revokes consent to share/refer, the client is informed that no additional referrals or follow-up or advocacy can be made on his/her behalf. The program provides information for the client to follow up on their own.

- If a client revokes consent to share and refer, no further disclosures of the client's information may be made.
- Any revocation form received must be saved in the client's file.

Compliance 4.3. Revocation of Consent to Collect Data. If a client revokes his/her consent to collect data, the program continues to provide services that **do not** require consent. (See service specific consent requirements.) For all other services, the client is in effect refusing service. The program explains this to the client and provides information to the client to follow up on their own.

- If a client revokes consent to collect data, no new client data can be collected or entered in the client data system. This is noted in the client's file, and their case is immediately closed.

Compliance 4.4. Re-activating Consent. If a client decides to re-activate a consent that they have revoked, the program obtains new signed consent forms from the client.

Note: Any revocation of consent will apply prospectively only and will have no effect on disclosures already made with the client's consent. When a client revokes consent, any data previously entered in the client data system will not be deleted as that data is maintained as official service record.

Standard 5: Informed Consent for Non-English-Speaking Clients.

Compliance 5.1. Consent for non-English Speakers. Consent documents are provided to clients in the language understandable to them.

- If necessary, the program uses an interpreter fluent in the client's spoken language to aid in the consent process. (See Standard 9.1)

Standard 6: Consent Documentation

Compliance 6.1. The program records all consent activity in the appropriate sections in the NYC Aging client data system. Electronic signatures are acceptable.

- Any documentation NOT required by NYC Aging that is uploaded into the NYC Aging client data system is stored there at the program's risk. NYC Aging is not responsible for maintaining the integrity of another entity's records.

Compliance 6.2. The program utilizes the NYC Aging approved consent forms. The program does not modify the forms in any way, for example, by copying and pasting the forms onto the program's letterhead.

Compliance 6.3. The program uploads signed consent forms into the NYC Aging client data system.

Standard 7: Consent During Emergency Situations

Compliance 7.1. Client data can be shared via a referral on behalf of an older person without consent from the client if the situation is deemed an "actual and immediate danger to the health or welfare of the individual" (9 N.Y.C.R.R. §6663.3(q)). This applies to referrals to Adult Protective Services (APS), District Attorneys' Offices, police, courts, hospitals, rehabilitation facilities, and other emergency services.

Standard 8: Protection of Personal Information

Compliance 8.1. Confidentiality protections. The program keeps confidential all personal information about persons who apply for or receive services. It shares confidential information only on a need-to-know basis with its funding agency and with program staff for purposes of providing services. It shares confidential information with outside entities only with the informed consent of the individual or pursuant to a court order or when there is deemed to be actual and immediate danger to the health or welfare of the individual.

- The program respects the right of participants/clients and the public to information about how the program protects confidentiality.

- Staff members that use NYC Aging's client data system:
 - Have been given a unique user ID and password.
 - Do not allow unauthorized individuals to use the client data system, gain access to passwords, or share IDs.
 - Have their access to the client data system immediately deactivated when they are no longer employed by the program or no longer need access to the database.

Compliance 8.2. Privacy. Staff discuss personal matters with participants/clients in privacy.

Compliance 8.3. Maintenance of Participant/Client Information.

- Only workers authorized to use program files have access to them.
- Paper files are kept secure.
- All computer equipment is secure and protected from theft, damage, misuse or tampering.

Compliance 8.4. Requests for identifying information.

- The program refuses requests from outside organizations or persons for names or other identifying information about service receivers, such as addresses and phone numbers, unless such request is authorized by NYC Aging.

Compliance 8.5. Public Information Activities.

- Materials such as reports, press releases, videotapes, etc. produced by the program for public dissemination do not contain personally identifying information on any participant without his/her written consent.

Language Access and Cultural Competency

Standard 9: Language and Cultural Competency

Compliance 9.1. The program is linguistically and culturally competent.

- The program has a language access plan that includes these provisions:
 - The program will provide on-demand language assistance free of charge to persons with limited English proficiency (LEP). At minimum, the program will have a telephonic interpretation service contract or similar community arrangement with a language interpretation services provider to assist LEP individuals.
 - The program will inform persons with limited English proficiency of the availability of free language assistance at its location. The notice will be in writing designed to be understood by LEP individuals.
 - The program will train staff that have contact with the public in the timely and appropriate use of these and other language services.
 - The program includes information on its website in the languages of the communities it serves, in addition to English.
 - The program has visible signage about the availability of free interpretation services.
 - Vital documents are translated into the non-English language of regularly encountered LEP groups eligible to be served or likely to be affected by the program or activity. Examples of vital

documents include applications, consent, and complaint forms; notices of rights, and notices advising LEP persons of the availability of free language assistance.

Compliance 9.2. The program is culturally competent.

- All service activities reflect (1) understanding of the needs, characteristics, cultural expectations and preferences of different ethnic groups residing in the community; (2) sensitivity and responsiveness to issues relating to culture, religion, socioeconomic status, gender identity, sexual orientation and immigrant adjustment; (3) sensitivity to cultural barriers impeding service utilization, including but not limited to language barriers; and (4) knowledge of linguistically and culturally competent service providers in the community and City, and ability to refer individuals to these providers when needed.
- All services are provided with respect for cultural differences, preferences and styles of communication, and with skill in assisting individuals in overcoming cultural and linguistic barriers.
- As appropriate to the type of services provided, cultural preferences are respected – e.g., through foods served, holiday celebrations, social activities and program communications.

Administration

Standard 10: Hours of Operation

The program is open and services are provided during budgeted hours of operation.

Compliance 10.1. The program is open the number of days budgeted (at least 249 days for Older Adult Centers).

Compliance 10.2. The program provides services during its contracted business hours of operation (e.g., 8:00a.m to 4:00pm, or 9:00am to 5:00pm).

Compliance 10.3. The program's director or her/his appropriate delegate is present at the program during hours of operation.

Compliance 10.4. The program responds to telephone calls during business hours in a timely manner.

- Calls are answered in person or by voicemail during hours of operation. After hours and during weather emergencies and unexpected closings, a recorded message informs callers that the program is closed and states the hours of operation.

Compliance 10.5. If the program needs to close due to an emergency or as mandated by State or City authorities, such as DOHMH or NYPD, the program notifies NYC Aging immediately and follows approved emergency procedures.

Compliance 10.6. The program has at least one dedicated phone line during its hours of operation.

Standard 11: Respect for Clients

The program respects the rights of participants/clients.

Compliance 11.1. Respect for clients.

- The program respects the dignity of older persons, their right to receive reliable, safe, quality services, and their rights to courtesy, consideration and recognition of their needs and preferences.

- Older Adult Center programs post a NYC Aging-issued Participant Bill of Rights in a public place that is clearly visible to participants, their families and program staff.

Standard 12. Complaints and Grievance Procedures

Compliance 12.1. Complaints. The program has a written policy and procedure that covers responses to the following categories of complaints:

- Complaints about service denial (for NYC Aging-funded homecare, see Case Management standards).
- Complaints about satisfaction issues (e.g., program services or staff).
- Complaints about other clients/participants.

Compliance 12.2. Grievances. The program informs participants about its grievance procedure.

- A summary of the grievance procedures, including a statement that assistance to file shall be provided to older adults who are unable to or have difficulty doing to, is prominently posted at the service delivery site. The summary is written in each language other than English spoken by more than 30% of participants.
- In-home services clients are informed of the grievance procedures through written and verbal statements provided to them upon assessment and/reassessment for services.
- The grievance procedure is written in each of the languages spoken by more than 30% of participants and at least in 14 pt. font and is provided to clients in any other language requested.
- The grievance procedure is posted in a visible location.
- At a minimum, the written grievance procedure states the name(s) and title(s), where applicable, of an impartial third party with authority to make a binding decision on the grievance. If grievances are handled by a group or committee, the procedure states the composition of the group/committee. It also states the complainant's rights to:
 - Present his/her grievance privately.
 - Have his/her grievance addressed within a timeframe that is stated.
 - Appeal to the Board of Directors of the program's sponsor (procedure specifies name/title of person to whom the appeal should be addressed) or file a Request for a Hearing if the grievance is against a case management or homecare agency (see Service Specific Standards).
 - Appeal the Board of Directors' decision to NYC Aging.
 - Have all information and documentation relating to a grievance treated as a confidential matter unless disclosure is required by a court order or for program monitoring by an authorized agency.

Compliance 12.3. Denial of Service. The program gives any applicant or participant who is denied service a reason for the denial.

- For housekeeping, homemaker, home delivered meals, case management, and other services for which written applications are made, the denial shall be confirmed in writing and the applicant informed of the right to file a grievance and of the individual to whom the grievance shall be addressed.
- For congregate meals, transportation, recreation, and other services which are applied for by telephone or verbally in person, the client may be told of the right to file a grievance verbally.

Compliance 12.4. Documentation of Grievances. The program maintains complete and dated record of all grievances on file for six years. This includes at minimum: the initial grievance; any investigative reports; any written

response submitted; any documents or other records submitted by any party; the Initial Response of the program; and if applicable, the notice to the participant of the right to appeal.

Standard 13: Feedback

The program offers participants/clients opportunities to comment on satisfaction and suggest service improvements.

Compliance 13.1. The program provides opportunities for regular input from participants/clients on satisfaction and service issues and can demonstrate that feedback is considered.

Compliance 13.2. At least annually, the program conducts a survey to evaluate client experience and satisfaction.

Compliance 13.3. The program maintains record of participant feedback for at least six years and makes these records available to NYC Aging for inspection upon request.

Standard 14: Contributions

The program offers participants/clients opportunities to contribute to service cost.

Compliance 14.1. Contribution guidelines.

- The program informs participants/clients of the following, via a posted sign where possible, and in writing when persons are not served on site:
 - Individuals are encouraged to contribute to the cost of the program. Contributions are used to help support the program.
 - Persons with incomes at or above 185% of the poverty line are encouraged to contribute at a level based on the actual cost of the service.
 - Contributions are voluntary and confidential.
 - No person will be denied service because s/he does not contribute.
 - Procedure for making a contribution.

Compliance 14.2. Service specific contribution guidelines.

- See Service specific standards for procedures for collecting, safeguarding, and accounting for contributions.

Standard 15: Welcoming Environment

The program is helpful, welcoming and respectful to inquirers and participants/clients.

Compliance 15.1. Phones are answered in a timely, helpful and courteous manner.

Compliance 15.2. The premises of programs that provide services on site are comfortable and cheerful to the extent possible within program resources.

Compliance 15.3. Participants and clients are welcomed, provided with accurate program information and, where services are provided on site, helped to feel “at home.”

Compliance 15.4. The program’s director and staff are accessible and available to participants/clients.

Compliance 15.5. Participants/clients receive information about changes in program policies and operations that affect their wellbeing in a timely manner.

Standard 16: Autonomy, Independence, and Civic Engagement

The program promotes participant/client autonomy, independence, decision-making and social/civic engagement to the extent possible.

Compliance 16.1. Wherever possible, the program offers service options and choices to participants/clients and respects individual preferences. Also see service-specific standards.

Standard 17: Promotional Activities (Public Information and Outreach)

Where appropriate to the services it provides, the program conducts activities to promote its services.

Compliance 17.1. Promotion of services.

- At least twice yearly, the program promotes its services to the general public and/or underserved populations in its service area through promotional activities, unless services are over-utilized. Where services are under-utilized, promotional activities occur more often. Promotional activities include:
 - **Public Information:** examples of public information include but are not limited to obtaining media coverage for the program's services; stationing a representative at a Resource Fair in the community; distributing flyers or other promotional materials to various places in the community such as local street fairs, retail shops, pharmacies, residences; organizing a mass mailing of information; holding an event that brings currently unserved older adults to its site.
 - **Outreach:** This includes face-to-face or telephone contact between a staff person and an individual. Outreach is when the program finds an isolated older person, not when an older person finds the program. Examples include: (1) Staff visits to a new senior housing building to locate isolated individuals who have never been clients of the program (this contact must be conducted one-on-one and not done as a group presentation). (2) The program has a table at a health event where staff conduct face-to-face identification of isolated individuals by discussing the individual's needs and available services one-on-one.

Compliance 17.2. The program utilizes multi-media methods and materials and traditional outreach and public information efforts to ensure that the community is aware of the program and its services/opportunities.

Compliance 17.3. The program has a digital presence (i.e., a website), however minimal, to ensure that older adults can avail themselves of services on which they often depend. Information presented on the website should be accurate, up to date, and include the address and contact information for the provider in question.

Compliance 17.4. The program's website be accessible (with a minimum of Web Content Accessibility Guidelines (WCAG AA) compliance) and optimized for use on a mobile device or tablet. (WCAG 2 Level AA Compliance: <https://www1.nyc.gov/site/mopd/about/reportspublications>.)

Compliance 17.5. The program's public information and outreach materials include the availability of free language assistance for persons with limited English proficiency.

Compliance 17.6. The program can demonstrate that it regularly seeks support for its services and activities from other organizations or institutions in the community.

Compliance 17.7. The program implements practices that increase outreach to older adults with Limited English proficiency residing within its service area.

Compliance 17.8. The program inputs its calendar of events in the NYC Aging Program Finder by the 20th of the prior month.

Standard 18: Linkages

The program works with other community service providers and organizations to foster co-ordination, minimize service duplication and promote access to services.

Compliance 18.1. The program maintains effective linkages.

- As appropriate to the services it provides, the program maintains effective linkages with other NYC Aging-funded programs in the community as well as with resources such as settlement houses and other multi-purpose service organizations, houses of worship, ethnic and social clubs, educational institutions, cultural programs, food stores, food pantries, banks and pharmacies.

Standard 19: Effective Administration

The program's policies and procedures promote effective administration.

Compliance 19.1. City, state, and federal regulations/contract requirements.

- The program's policies and procedures address applicable city, state and federal regulations as required by contract. These include but are not limited to:
 - Prohibition of the use of funds to advance any sectarian or partisan effort.
 - Prohibition of any sectarian, partisan or religious services, counseling, proselytizing, instruction.
 - Prohibition of partisan political activity at the program site or where clients receive program services. If the program permits any legally qualified candidate for any public office (including the current office holder) to visit the facility or to visit clients for political purposes (e.g., to make a speech, provide a photo or TV opportunity, etc.), other candidates for the same office are allowed to visit for the same purpose, amount of time, number of appearances, time of day, etc. (The program is not obligated to inform other candidates, but only to respond to requests).
 - Attendance by older adult at any event involving the appearance of public officials is voluntary.
 - Contributions for political purposes may not be collected.
 - Prohibition of illegal gambling.

Compliance 19.2. Personnel Policies.

- Written personnel policies cover these areas at minimum (note: where there are NYC Aging standards in these areas, policies are consistent with standards):
 - Prohibition of Nepotism and Conflict of Interest
 - Non-discrimination/non-harassment
 - Confidentiality protection
 - Background checks/references
 - Drug-free/Alcohol-free workplace
 - Employment classification (exempt/non-exempt, part-time, full-time, temporary)
 - Leave policies (vacation, sickness, FMLA)
 - Jury Duty
 - Military Service Leave
 - Employee Grievance Procedure
 - Employee Benefits
 - Compensatory Policy for Executive Director
 - Whistleblower Policy
 - Employee Termination

- Disciplinary Actions and Dismissals: Documentation regarding discipline/dismissal of NYC Aging-funded employees is maintained and made available to NYC Aging upon request.
- Any employee involved in theft or inflicting bodily harm on another is suspended immediately without pay pending further investigation of the charges.

Compliance 19.3. Other policies.

- Record retention and disposal
- Social Media
- Incident/Accident Protocols (on and off-site):

Standard 20: Prohibitions on the Usage of Public Funds

The program does not use public funds to support, endorse or promote commercial products or services.

Compliance 20.1. The program observes these prohibitions:

- Verbal or written endorsement of products or services is not allowed.
- Acceptance of money or other incentives from vendors aimed at encouraging enrollment of older adults in a service or purchase of a product is not allowed.
- Sales of commercial products or services are not allowed:
 - Mailing or calling lists that contain participant/client names, addresses, telephone numbers, etc. are not given out under any circumstances.
 - Individual vendors may not peddle products or conduct sales. Vendors may give instructional and educational talks on specific topics of concern to older persons – e.g., availability and use of home health equipment, medical equipment, etc. The presentations must be educational, not commercial, and the program must allow other similar vendors the same access if requested.

Standard 21: Due Recognition

The program gives due recognition to government funding sources.

Compliance 21.1. The program gives due recognition to NYC Aging and its state and federal funding sources (as applicable) for aging services in printed program brochures, printed stationery, and other public information materials.

Compliance 21.2. Unless inconsistent with applicable laws and lease and license requirements, the program has an identifying sign at its point of entrance, including sponsorship by the Department, program name and days and hours of operation.

Staffing

Standard 22: Staffing Levels

The program's staffing corresponds to levels specified in its contract proposal. (See also service specific standards.)

Compliance 22.1. The program's staffing corresponds to the levels proposed to NYC Aging in its response to NYC Aging's RFP, or as later approved by NYC Aging.

Compliance 22.2. Key positions are filled within three months, or the program can document strenuous efforts to fill important vacancies.

Compliance 22.3. The program notifies NYC Aging within two (2) weeks when there is a permanent change in staffing.

Standard 23: Staff Understanding of Responsibility

The program ensures that staff understand their job responsibilities, program purpose and mission and NYC AGING requirements as applicable to their functions.

Compliance 23.1. There are current job descriptions for each position, including title, minimum qualifications, and duties.

Compliance 23.2. The program maintains documentation that new staff have read and understood their job descriptions.

Compliance 23.3. Staff function in the position for which they were hired, and in accordance with their job descriptions and program personnel policies.

Compliance 23.4. The program provides staff with information needed for job performance in a timely and effective fashion, including but not limited to:

- The program's most recent contract proposal to NYC Aging.
- NYC Aging's program standards and applicable service standards.
- Changes to policies and procedures.
- Operational issues, problems, and concerns as relevant to effective job performance.

Standard 24. Orientation, Training, and Supervision

The program ensures that staff and volunteers are appropriately oriented, trained and supervised.

Compliance 24.1. The program provides and documents its orientation of new staff.

- Orientation covers the following at minimum (see also service specific standards):
 - Program personnel policies.
 - Job functions and tasks.
 - Program policies and procedures.
 - Relevant NYC Aging standards.
 - Participant and client rights (including rights to consideration, privacy, dignity, and respect).
 - Emergency procedures.

Compliance 24.2. Appropriate staff attend mandated NYC Aging trainings.

Compliance 24.3. A designated staff person supervises volunteers.

Procedures and Methods

Standard 25. Data Collection

The program uses NYC Aging's client data system to register all participants/clients and to document service provision. Please see NYC Aging's Senior Tracking, Analysis and Reporting System (STARS) Program Administrators' Guide (included in this document and in STARS under Support) and the STARS User Manual (in STARS under Support).

Compliance 25.1. Registration Data.

- The program collects the following information at registration: name; address; phone number(s); emergency contact; physician; major chronic condition(s); birth date; proof of age or signed declaration of age; and for referral and reporting purposes, income and ethnic status. *Note: Services cannot be denied if this information is not provided.*
- The program collects any additional program specific required registration information (e.g., by programs conducting and intake and/or assessment).

Compliance 25.2. The program reviews the participant/client's profile in the client data system with the individual on a quarterly basis, and updates as necessary, unless a more frequent review is specified.

Compliance 25.3. The program updates participant data in the client data system annually in line with specific requirements put forth by NYC Aging. Program uses the Annual Client Update form to update client information annually.

Compliance 25.4. The program records service provision to the participant/client in NYC Aging's client data system.

Compliance 25.5. The program inactivates/closes the participant/client's file in NYC Aging's client data base when the individual will no longer be receiving services from the program.

- See service specific standards for exceptions.

Compliance 25.6. Voter Registration. The program completes the Voter Registration information in the client's profile in NYC Aging's client data system.

Standard 26. Emergency Contact Information

The program requests emergency contact information from every participant/client.

Compliance 26.1. The program has a current record of emergency contacts for participants/clients, including name, address, telephone numbers and locations where contacts can be reached.

Standard 27. Emergency Procedures

The program has comprehensive accident and emergency procedures covering on-site and/or off-site services, as applicable.

Compliance 27.1. Fire/Other Evacuation Emergency Procedures.

- When services are provided on-site, the program has a written evacuation plan that has been developed in consultation with the local Fire Station for situations requiring building evacuation. The plan includes:
 - The location of fire extinguishers;
 - The primary fire exits and alternative exits;
 - The order in which groups should leave the building;
 - Persons responsible for leading groups;
 - Persons responsible for checking premises, including bathrooms; and,
 - The destination of each group once outside.

- The written plan and diagram are posted in each room, office, and public bulletin board.
- The program holds two evacuation (fire) drills annually and documents the date and time of each drill, who participated in the drill (to ensure that assigned staff manned the assigned exits and led group out as indicated in the written evacuation plan), the time needed to evacuate the building and any problems encountered.
- Each staff person and volunteer is trained on evacuation emergency procedures and knows his or her responsibility in the event of an emergency, including whom to notify.
- Staff is trained annually on the use of extinguishers, and training is documented.

Compliance 27.2. Accident/Medical Emergencies.

- The program has a written plan that specifies staff responsibilities in dealing with accidents or medical emergencies. The plan includes what to do for the victim, what to do for other participants who witness the emergency, who to notify, and insurance or other forms that must be completed.
- The program has the telephone number of all local emergency agencies including the local police precinct.
- When services are provided at the program facility, at least one staff person has current certification on CPR and how to use a defibrillator machine.
- If 911 has been called, a staff person:
 - stays with the participant until 911 is on the scene; and
 - informs the program director, who gets in touch with the participant's emergency contact.

Compliance 27.3. Emergencies on Group Trips.

- The program has a written plan to deal with emergencies that occur on trips, such as accidents, medical emergencies, or the disappearance of a participant from the group.
- The written plan specifies what to do for the ill or injured individual; what to do for the rest of the group; criteria for ending the trip; who to notify, and what forms to complete.
- A staff person or volunteer of the organization that has organized the trip accompanies each trip as the designated "leader," knows the exact population count, and has been trained on emergency procedures.
- Before each group trip the designated leader does a headcount and checks that participants carry identification with them, and that they have the telephone number of the center.
- Group trip participants are told that they must notify the group leader if they intend to leave the group for any reason.
- If a participant is "lost" from the group, and her/his whereabouts cannot be ascertained, the incident is immediately reported to the program, to NYC Aging and to the police.

Compliance 27.4. Program Incident and Accident Recording and Reporting.

- The program uses NYC Aging's Incident/Accident Report Form. (See Attachment A)
- The program creates and maintains an incident/accident report on file for all accidents and incidents that involve or affect client safety, services continuity, and program integrity. Examples include: accidents or other

participant/client emergencies; incidents of physical violence; facility emergencies such as flooding or fires; burglaries or forced entry; thefts; vandalism, etc.

- Accident and incident report elements comply with NYC Aging instructions.
- Accidents and incidents are reported appropriately and timely to insurance companies and other regulatory bodies.
- Accidents or incidents involving serious injury or death of a participant are reported immediately to NYC Aging and to appropriate authorities.
- The program provides requested information (including phone numbers, data, reports, etc.) to NYC Aging related to an ongoing emergency situation preferably by the Close of Business, but no later than 10:00 a.m. EST the following morning.

Standard 28. Emergency Preparedness and Response

The program has an emergency preparedness and response plan to address local, regional and citywide emergencies.

Compliance 28.1. As required by NYC Aging, the program has a current emergency preparedness and response plan for local, regional, and citywide emergencies.

Compliance 28.2. During any year in which the plan requires activation, the program's response is timely and in accordance with its plan and other NYC Aging and City requirements.

Compliance 28.3. The program arranges at least one emergency preparedness seminar annually.

Compliance 28.4. In the event of a public health emergency, the program adheres to any additional guidance issued by NYC Aging.

Target Population

Standard 29. Target Population

The program serves its target population and service areas.

Compliance 29.1. The program serves all communities and community districts within its service area.

Compliance 29.2. The program can demonstrate that it reaches out to the diverse linguistic, cultural and socioeconomic older adult groups within its service area and older adults across the age spectrum.

Compliance 29.3. The program can demonstrate that it reaches out to unserved and underserved older populations, including those in greatest economic and social need, particularly older persons in these categories: low-income; low-income minority; Limited English Proficiency (LEP); frail and/or with disabilities.

Physical Environment and Equipment

Standard 30. Safety

The program facility is safe.

Compliance 30.1. The program operates in a code compliant environment.

- Equipment is code compliant:
 - Inspections of fire alarm systems occur regularly (record is maintained and current), carbon monoxide detectors are maintained as required by code, including LL 10/2014 and, if required, there is a current holder of the required Certificate of Fitness.
 - If required by code, boilers are inspected, and reports filed annually with the Department of Buildings.
 - Central Air Conditioning systems have been filed with the Department of Buildings and have all required OTCR approvals, including energy code compliance.
 - Filters for central air conditioner and window/wall units are replaced or cleaned on a regular basis.
 - Central air conditioning systems are regularly serviced and maintained.
 - Range hood exhaust and ANSUL systems are periodically inspected as per the NYC Fire Code.
- **Code Violations.** All code violations cited by the NYC Building, Fire, Health or Sanitation Departments are addressed and corrected on a timely basis as required by the Department issuing the citation. Certificates of Correction for each violation are filed in a timely manner.
 - Upon receiving a citation for a violation, the program notifies NYC Aging immediately and forwards a copy of the citation.

Compliance 30.2. Certificate of Occupancy.

- The site has a Certificate of Occupancy (C of O) issued by the New York City Building Department (The C of O certifies that the building is suitable for occupancy for the purpose for which it is being used).
Exception: Buildings erected before 1938, with no change in occupancy or use. However, if the building has been substantially altered, a C of O is required.
- Program operations do not exceed or contradict the Certificate of Occupancy at any time.

Compliance 30.3. Place of Assembly Permit.

- Each room large enough to be occupied by 75 or more persons has a current Place of Assembly Certificate of Operation issued by the NYC Building Department and a current Place of Assembly Permit issued by the Fire Department.
Exception: Buildings erected before 1938 with no change in occupancy or use.
- The current Permit, maximum occupancy sign and approved floor plan are publicly posted.

Compliance 30.4. Exits and Exit Lights.

- The site has two exits.
- Exit doors:
 - Have working exit lights to identify their location.
 - Are clearly identified as exits.
 - Open in the direction of exit travel. If premises are occupied by 75 or more persons, one exit leads directly outside while the second may lead to a rated corridor.
 - Are unobstructed at all times and may be easily opened when building is in use.
 - Do not require a key from the exiting side.

Compliance 30.5. Emergency Lighting. Rooms occupied by 75 or more persons have emergency lighting as specified in building code.

Compliance 30.6. Fire Preparedness.

- Programs that are not required to obtain a Place of Assembly Permit each year request an annual fire inspection through the local Firehouse.
- Programs that have elevators maintain inspections as required by the Department of Buildings.
- Programs that have elevators place signs at each landing that show the location of the stairs in a diagram and instruct occupants to use the stairs in case of fire.
- Premises are equipped with smoke detectors as required by code.
- Premises are equipped with fire extinguishers as required by the Fire Department. Specifications of the type, number, placement and maintenance are obtained from the Bureau of Fire Prevention.
- Extinguishers are tagged with the date of the last maintenance inspection.
- Extinguishers are of approved type.
- Extinguishers are inspected annually.
- Decorations, drapes, curtains, scenery used in play production, etc. are certified flame proofed and flame-proof certification is kept up to date.
- Tables and seating in Place of Assembly permitted spaces are situated in accordance with the approved PA plan. Tables in the dining room provide clear aisles to the exits.
- Smoking is not permitted. "No Smoking" signs are posted in appropriately places.

Compliance 30.7. Emergency first aid.

- First Aid Kits are visible and accessible to staff.
- Contents are replenished after use or when passed their expiration dates.

Compliance 30.8. Pest and Rodent Control.

- There are no roaches or other pests or rodents in any program room, or in the kitchen, dining room, or bathroom.
- Infestation control is scheduled at a time that does not interfere with or disrupt programming.

Compliance 30.9. Avoidance of safety hazards.

- Stairs and passageways are well lit.
- Stairs, treads, and landings are built with/made of non-skid material. This is not limited to rubberized treads and could simply be sanded paint or concrete. Some programs are operating in buildings that were built before the 1968 building code, therefore, current stair conditions in those premises are grandfathered in, and should not be considered out of compliance.
- Hallways and areas leading to exits are free of obstructions and debris.
- Electric wires are covered.
- Window glass has no serious breaks or cracks.
- Flooring is safe, no broken, cracked, chipped loose tiles or planks.
- Ceilings are safe, no extensive breaks, cracks, peeling or chipping in tiles, paint or plaster.
- Toxic substances are stored in a locked area not accessible to participants.
- The site is litter free.

Standard 31. Cleanliness

The program facility is clean and well-maintained.

Compliance 31.1. Program rooms and grounds.

- All program rooms and grounds are clean and safe.
- All program rooms (including ceilings) and grounds are well-maintained.
- Paint and plaster are maintained in good condition (no serious breaks, peeling or cracks).

Compliance 31.2. Bathrooms.

- Cleanliness is maintained.
- Ventilation is adequate.
- Operable windows are screened.
- Adequate handwashing facilities are provided and maintained in or adjacent to toilet rooms.
- Each handwashing facility is to be provided with hot and cold potable running water.
- Each handwashing facility is to be provided with hand-cleaning soap or detergent with a sanitary storage receptacle. Individual single-service towels, warm air blowers or clean individual sections of continuous cloth are to be provided. Conveniently located waste receptacles are to be provided if disposable towels are used.
- Handwashing facilities, soap or detergent receptacles, handwashing devices and related facilities are kept clean and in good repair. Handwashing signs are posted at all handwashing facilities.
- Toilets, urinals, sinks and any mechanical hand dryers are in working condition.

Recordkeeping and Monitoring

Standard 32. Records Maintenance

The program maintains all records in good order.

Compliance 32.1. Records are:

- Easily accessible;
- Clear;
- Legible;
- Well-organized; and
- Up to date.

Standard 33. Monitoring

Records and other documents are available for monitoring.

Compliance 33.1. The program makes records available to NYC Aging and the New York State Office for the Aging (NYSOFA), as requested. These include but are not limited to the following, as applicable:

- Documentation of any service denials and temporary exclusions, including actions taken and reasons.
- Complaint/grievance records
- Contributions Records
- Notices of Code Violations and copies of responses to issuing agencies
- Fire/Theft/Vandalism Documentation
- Incident/Accident Reports
- Fire and Emergency Drill Records
- Employee files containing:
 - Documentation of orientation
 - Signed Job Description
 - Job application and/or resume
 - Other records relating to hiring process, as applicable
 - See service specific standards for other requirements
- Participant/client files containing documents specified in service-specific standards.

Standard 34: Recordkeeping

The program maintains records in accordance with NYC Aging requirements.

Compliance 34.1. See service-specific standards for specific documents/records that must be maintained.

Compliance 34.2. Maintaining records.

- The program maintains required records for seven years, unless otherwise specified in service-specific standards. If any litigation, claim, audit, negotiation, or other action involving the record has been started before the expiration of the seven-year period, the records are retained until completion of the action and resolution of all issues which arise from it, or for a seven-year period, whichever is longer.

Compliance 34.3. When required by NYC Aging, in accordance with required timeframes and content specifications, the program submits requested information, reports and documents.

Older Adult Center (OAC) Meal Program

Scope of Services and Standards of Operation

Introduction

The Older Adult Center Meal service is the provision of an appropriate meal that meets nutritional requirements to eligible participants, either in a congregate (group) setting or through one of the NYC Aging approved services, Meals on Wheels, or Grab and Go. There are two sections to these standards. The first section contains the programmatic scope and standards, and the second section contains standards related to nutrition, food preparation and safety, service and delivery.

All state and city requirements for food service and food service establishments apply to the provision of meal services, regardless of whether they are included in these standards.

Section 1: Programmatic Scope and Standards

Standard 1: Congregate Meals Eligibility

The program provides congregate meal service to all eligible persons.

Compliance 1.1. The following persons are eligible for congregate meal service:

- Any person 60 years of age or older.
- The spouse of an eligible individual regardless of age.
- Non-elderly physically or cognitively disabled individuals who live in the household with, and accompany, an age-eligible participant.
- Individuals with disabilities who reside in a primarily senior housing facility where the center is housed.

Compliance 1.2. The program serves ineligible persons (e.g., guests and staff under 60, volunteers and contributing food handlers) only if it is apparent that there is sufficient food for all eligible participants.

Standard 2: Congregate Meal Service Participation and Access

The program gives priority to eligible individuals and ensures sufficient opportunities for participation.

Compliance 2.1. Eligible participants are given priority for meals over all guests and staff under 60.

Compliance 2.2. The program holds more than one seating when there is insufficient table room for all participants (eligible persons who are registered with the program) who wish to attend meal service or when the number of persons attending meal service exceeds the number indicated on the Place of Assembly Permit.

Compliance 2.3. All participants attending the meal service are offered a complete meal before seconds are given.

Compliance 2.4. At least one table is handicapped-accessible.

Compliance 2.5. There are written procedures for the provision of appropriate food containers and utensils for the visually impaired and disabled.

Compliance 2.6. Participants are supplied with a list of alternate program sites and/or food pantries in the area when service is unavailable due to a program-related emergency.

Compliance 2.7. The program does not require eligible individuals to be a member, pay an entrance fee, be a resident, or participate in another program or service in order to gain access to the congregate meal.

Compliance 2.8. The program monitors participants for the possible need for home delivered meals instead of congregate meals and makes referrals as necessary.

Standard 3: Level of Services and Reported Units

The program provides the number of meals specified in its budget and reports units accordingly.

Compliance 3.1. Contracted/Budgeted Meals

- The program provides the number of participant meals specified in its contract.

Compliance 3.2. Reported participant meals meet these requirements:

- Only one meal per day is reported for each registered participant per meal service (e.g., breakfast, lunch, dinner).
- Participant meals do not include meals for staff below 60 years of age.
- Participant meals do not include meals for guests below 60 years of age.
- Participant meal counts do not include meals sold to non-NYC Aging agencies, or meals for which the program is reimbursed (e.g., social adult day programs).

Compliance 3.3. The number of reported units for each type of meal served (anonymous (eligible guests), participants, guests and staff under 60, contributing food handlers) is documented in NYC Aging's client data system and supported by the following paper documentation:

- Daily Meal Attendance Records correctly totaled in each category of meals served.
- Monthly Summary of Meals and Contributions with amounts (1) accurately transferred from Daily Meal Attendance Records; and (2) correctly totaled with amounts matching the number of meals reported for the month in each category.

Programmatic Procedures and Methods

Standard 4: Participant Registration

Meal participants are registered in NYC Aging's client data system.

Compliance 4.1. Eligible persons who regularly participate in meals are registered in NYC Aging's client data system. Until they are registered, meals for eligible persons are entered under the program's one "Anonymous" client.

- Unregistered participants are encouraged to provide, at minimum, the name and telephone number of an emergency contact.

Standard 5: Informed Consent for OAC Meals Clients

The program obtains consent from clients. (See also General Program Standards, Standard 2.)

Compliance 5.1. Consent to Collect and Record Data. The program makes reasonable effort to obtain necessary data from all meal participants. The program obtains the client's consent to collect and record data prior to entering their information into the client data system.

- If the client chooses not to provide the requested information or does not consent to having their personal information entered in the client data system, so long as they are eligible, they may be served a meal without having their personal information recorded. If the client is to receive any other service, informed consent to

capture must be obtained, following any specific consent requirements outlined in the standards for that specific service.

- If a meal client does not provide consent to capture their information and continues to receive a meal, the program enters the units of service for the meal under the program's one "Anonymous" client.

Compliance 5.2. Documentation of Consent. The program records receipt of consent in the NYC Aging client data system and uploads all signed consent forms into the system. Verbal consent to collect and record data is acceptable for meal clients.

Standard 6: Take Home Meal Restrictions

Participants eat their meals in the congregate setting, unless approved for Meals on Heels or Grab and Go.

Compliance 6.1. Take home of full meals. Full take home meals are not permitted unless the program is approved for Meals on Heels or contracted for Grab and Go, and in accordance with program policy. Participants eat their meals on-site or with other participants on trips (Congregate Meals). (See Standard 7 and 8 respectively for definitions of Meals on Heels and Grab and Go services.)

Compliance 6.2. Take home of partial meals. The program has a written policy regarding clients taking home parts of their meal. The program's written policy addresses:

- allowance/disallowance of participants taking home part of their meal (e.g., bread, desert, milk) for later consumption;
- safety and liability; and
- provision of whole meals for at-home consumption during emergencies.

Standard 7: Meals-on-Heels

With NYC AGING's approval, the program provides Meals-on-Heels to eligible participants. Meals-on-Heels are individually packaged meal that meets nutritional requirements delivered by the program to the homes of eligible participants of an Older Adult Center due to temporary or emergency circumstances.

Compliance 7.1. Meals on Heels Eligibility. To receive Meals on Heels an individual must be:

- 60 years of age and over.
- A registered member of the program.
- Temporarily unable to participate in the congregate setting due to temporary or emergency circumstances.

Compliance 7.2. If the program permits Meals-on-Heels, its policy stipulates:

- With the approval of the director or meal service supervisor, meals may be delivered, on a temporary basis, for participants under the following circumstances:
 - The participant has an acceptable reason (e.g., health reason, or has a medical appointment or other urgent business during meal service).
 - Approval is given in writing for the specified period.
 - Approval and time frame are documented in the participant's record.

Compliance 7.3. Four weeks after the date of approval, the program contacts any participant who has had meals sent home to determine whether: (1) participant should be referred to a case management program for an in-home assessment or (2) an extension, no longer than one (1) week, is necessary, or (3) meal take home is no longer necessary.

Note: All actions related to this approval are documented in the client file. Activities may be reported as case assistance activities.

Compliance 7.4. If the program permits Meals-on-Heels, it posts a sign stating its policy for this service.

Compliance 7.5. The program follows all NYC Aging food safety and Nutrition standards in provision of Meals-on-Heels.

Compliance 7.6. Packaging. Meals-on-Heels meet the following packaging standards:

- Meals are individually portioned and sealed in containers that are leak proof.
- Containers are easy to open and shall be made of non-porous, disposable, recyclable materials that are microwave and oven safe. The containers cannot be made of Styrofoam.
- Each meal has a large-print label which contains the meal contents, prepared on, expiration/consume-by date, and clear instructions for safe handling including directions on storing and reheating the meal;
 - Hot and cold meals have a maximum shelf life of 48 hours from the day of production.
 - Frozen meals have a shelf life of one (1) year from the day of production.
- A nutrition facts panel, which contains the nutritional information for the meal, can either be on the label, or be distributed on a separate sheet of paper.

Compliance 7.7. Time and Temperature. Meals-on-Heels meals meet the following requirements:

- Hot meals must be kept at or above 140 degrees Fahrenheit (140° F)
- Cold/chilled meals must be kept at or below 40 degrees Fahrenheit (40° F). If chilling hot food, proper cooling methods should be followed to rapidly chill meals to 40° F or below.
- Frozen meals must be stored and kept at a temperature below 0 degrees Fahrenheit (0° F). Proper cooling methods should be followed to rapidly chill meals to 40° F or below prior to freezing.
- Time and temperatures must be taken at the following times either onsite or at the site of the meal preparer:
 - Final cooking temperatures of prepared food.
 - For bulk food and pre-packaged meals that are not sealed, temperatures must be taken prior to delivery, at delivery, and at serving time.
 - For sealed pre-packaged meals, receiving temperatures should be taken one day per month.
 - For grab and go meals, the temperature of the last meal served should be taken monthly.
 - For frozen meals, the temperature taker can note on the temperature record that the meal appears frozen. Meal components that are not frozen should follow the temperature taking procedure as described above. For monthly end of service temperatures, it is recommended that the directions for reheating the meals be tested at this time including checking the temperature of the meal after reheating to ensure that the reheating instructions are accurate.

Compliance 7.8. Nutrition Education Materials for Clients. The program provides Nutrition Education Materials to Meals-on-Heels participants on a monthly basis, following the protocol in Standard 3 page 29.

Standard 8: Grab and Go Meals

With NYC Aging's approval, the program provides Grab and Go Meals to eligible participants. A Grab-and-Go Meal is an individually packaged meal that meets nutritional requirements, picked up by eligible participants at the OAC for their consumption away from the center's premises.

Compliance 8.1. With written approval from NYC Aging, the program provides Grab-and-Go meals to eligible participants in place of a congregate meal. Individuals must be 60 years or older to participate in the Grab-and-Go Meals program.

Compliance 8.2. Packaging. Grab-and-Go meals meet the following packaging standards:

- Meals are individually portioned and sealed in containers that are leak proof;
- Containers are easy to open and shall be made of non-porous, disposable, recyclable materials that are microwave and oven safe. The containers cannot be made of Styrofoam;
- Each meal has a large-print label which contains the meal contents, prepared on, expiration/consume-by date, and clear instructions for safe handling including directions on storing and reheating the meal;
 - Hot and cold meals have a maximum shelf life of 48 hours from the day of production. Frozen meals have a shelf life of 1 year from the day of production;
 - Participants should be advised to take the meal straight home and if not consumed right away, refrigerate immediately;
 - If a participant plans to remain at the center after meal distribution, the meal is safely stored at the proper temperature until the participant is ready to leave the premises; and
- A nutrition facts panel, which contains the nutritional information for the meal, can either be on the label, or be distributed on a separate sheet of paper.

Compliance 8.3. Time and Temperature. Grab-and-Go meals meet the following requirements:

- Hot meals must be kept at or above 140 degrees Fahrenheit (140° F)
- Cold/chilled meals must be kept at or below 40 degrees Fahrenheit (40° F). If chilling hot food, proper cooling methods should be followed to rapidly chill meals to 40° F or below.
- Frozen meals must be stored and kept at a temperature below 0 degrees Fahrenheit (0° F). Proper cooling methods should be followed to rapidly chill meals to 40° F or below prior to freezing.
- Time and temperatures must be taken at the following times either onsite or at the site of the meal preparer:
 - Final cooking temperatures of prepared food.
 - For bulk food and pre-packaged meals that are not sealed, temperatures must be taken prior to delivery, at delivery, and at serving time.
 - For sealed pre-packaged meals, receiving temperatures should be taken one day per month.
 - For grab and go meals, the temperature of the last meal served should be taken monthly.
 - For frozen meals, the temperature taker can note on the temperature record that the meal appears frozen. Meal components that are not frozen should follow the temperature taking procedure as described above. For monthly end of service temperatures, it is recommended that the directions for reheating the meals be tested at this time including checking the temperature of the meal after reheating to ensure that the reheating instructions are accurate.

Compliance 8.4. Nutrition Education Materials for Clients. The program provides Nutrition Education Materials to Grab-and-Go participants on a monthly basis following the protocol in Standard 3 page 29.

Compliance 8.5. Grab and Go Reported Units. Units for Grab-and-Go meals are counted and reported separately and are not included in the congregate meal count.

Standard 9: Documentation of Meal Services

The program uses approved procedures for “signing in” persons who receive meals.

Compliance 9.1. The program follows procedures for documenting meal service in NYC Aging’s client data system.

Compliance 9.2. The program follows these procedures for paper documentation of meal service:

- A trained staff member or volunteer monitors sign-in and scans key tags.
- Each meal recipient signs on the appropriate section of the Daily Attendance/Income Record.
- Any participant unable to sign signs with an X and the attendance monitor fills in their name and initials the entry.

- If a person other than the attendance monitor signs for a participant, the attendance monitor initials the entry.
- Each participant signs in only once regardless of the amount of food that the participant receives.
- The NYC Aging Daily Attendance/Income Record is completed daily, with two signatures.
- The Daily Attendance/Income Records clearly distinguishes categories of recipients.
- On a daily basis, each category of meal is totaled accurately and accurately transferred to NYC Aging's client data system (may also be recorded on a Monthly Meals/Income Summary at program discretion).

Contributions and Payments

(See General Program Standards for information on the voluntary nature of contributions and their use.)

Standard 10: Contributions and Payment for Meals

The program follows NYC Aging's requirements for requesting contributions toward meal costs or full payment of meal costs. *(Also see General Standards, Standard 6.)*

Compliance 10.1. Contribution requests and written policy.

- The program requests a contribution toward the cost of the meal from eligible persons who receive a meal (registered participants and guests 60 years of age and older). Contribution is requested for all meals, including congregate, Grab & Go, and Temporary Take Home meals.
- The program does not deny any eligible person a meal because of his/her inability or unwillingness to contribute.
- The program has a written policy concerning the provision of meals on a contribution or meal cost basis to staff/volunteers /guest under the age of 60.
- The program requests the full cost of raw food and disposables or the caterer's charge per meal from:
 - Staff less than 60 years of age.
 - Volunteers less than 60 years of age.
 - Guests (including home attendants) less than 60 years of age.

Compliance 10.2. Non-coercive solicitation of contribution. The program does not use any coercive form to solicit contribution from participants.

Compliance 10.3. Contribution Signage. The program has visible signage that informs participants of the contribution policy, and that states the suggested amount of contribution, including the full cost of service and or/guest meal.

Standard 11: Contribution Collection and Documentation

The program has appropriate procedures for collecting and documenting contributions and full cost payments.

Compliance 11.1. Collection of contributions from participants. The program protects the privacy and confidentiality of participants with respect to their contribution or lack of contribution.

Compliance 11.2. Contribution collection in a Congregate Setting. The program provides a slotted box or other similar receptacle that ensures privacy for contributions.

Compliance 11.3. Meals on Heels Contribution Collection:

- The program provides participants with an envelope in which to place his/her contribution.
- The deliverer collects the contribution in a sealed envelope with the participant's signature on the front.
- The deliverer places the envelope in the contribution receptacle upon return to the program site on the same day of collection. (Deliverers are not allowed to take contribution home).
- The program provides the participant with a receipt with the amount of contribution received.

Compliance 11.4. Tips. Deliverers do not accept tips from participants.

Compliance 11.5. Safeguarding and accounting for contributions: The program establishes procedures for safeguarding and accounting for contributions.

- Two persons (minimum of one staff) count the total contributions from participants each day and co-sign the Daily Summary section of the Daily Attendance/Income Record.
- Contribution amounts are entered into NYC Aging's client data system.
- Contribution amounts are transferred on a daily basis to the Monthly Meals/Income Summary.

Contributions are safely stored until deposited in the bank.

Compliance 11.6. Payments collected from non-participants.

- The amount of payment received from each non-participant is recorded next to the person's name on the Daily Summary Section of the Daily Attendance/Income Record.

Standard 12: Meals Covered by Non-NYC Aging Programs/Payers

The program collects the full cost of the meal for persons whose meal costs are covered by another government program.

Compliance 12.1. Programs that receive government funding to provide meals among their other services (e.g., group homes, programs that provide adult day services) reimburse the program for any meals provided to their clients.

- The program has a written agreement concerning the reimbursement of meal costs by a residential care, social adult day program or other community-based service provider.
- The amount of reimbursement is, at minimum, the full cost of the meal to the center.
- Any meals paid for by another funder (a non-NYC Aging payer), or by a NYC Aging-funded social adult day services program whose rate includes meals, should not be reported as NYC Aging-funded participant units.

Recordkeeping

Standard 13: Recordkeeping

The program maintains programmatic records for the required number of years.

Compliance 13.1. The program maintains complete, accurate, and up-to date records of participant and service delivery in the NYC Aging client data system.

Compliance 13.2. The following records are maintained and available for six years.

- Congregate meals participant registration.
- Participant, staff, guests and volunteer meal service records.
- Contributions collection and deposit records.

Section 2: OAC Meals Nutrition and Food Safety

Standard 1: Adherence to Food Standards and Guidelines

All meals adhere to the USDA's Dietary Guidelines for Americans, NYSOFA guidelines, the New York City Food Standards (<https://www.nyc.gov/assets/doh/downloads/pdf/cardio/cardio-meals-snacks-standards.pdf>) and NYC Aging guidelines.

Compliance 1.1. Each participant is offered a meal that meets 1/3 of the Dietary Reference Intakes (DRI), and that adheres to the USDA's Dietary Guidelines for Americans, NYSOFA guidelines, the New York City Agency Food Standards, and NYC Aging guidelines. The menu must include at least one vegetarian meal per menu each week. The vegetarian meal should follow the guidelines of lacto-ovo-vegetarian (which includes eggs and dairy but does not include fish, seafood, or meat). Starting July 2023, per the updated NYC Food Standards, one plant-based entrée per week is required that features a whole or minimally processed plant-based protein. This plant-based entrée may be served instead of the one vegetarian meal per week requirement.

Compliance 1.2. Menus are approved by NYC Aging through NYC Aging's web-based menu application, Simple Servings.

- The program submits 6-week cycle menus by the required deadline.
- Menus are submitted according to NYC Aging menu submission guidance.
- Special occasion and emergency menus are submitted for approval.
- The program implements any changes required by the NYC Aging nutritionist.
- Menus reflect variety and quality in terms of color, texture, flavor, aroma, and appearance.
- Menus are appropriate to participants' cultural and religious backgrounds and include meals to celebrate different cultural and religious holidays and celebrations. (Programs and caterers offering Kosher meals must be certified Kosher and programs and caterers offering Halal meals must be certified Halal).

Compliance 1.3. The program adheres to the NYC Aging nutritionist-approved menu and NYC Aging meal guidelines.

- The program notifies the NYC Aging Nutritionist of all substitution prior to making the substitution. Substitutions are comparable in nutritional value to the Approved Menu and must be documented. *See also requirements for monitoring caterers to ensure match between bulk food and/or plated meals and approved menu for the day (Standard 22).*

Compliance 1.4. Standardized portions. Food is served in standardized portions as indicated on approved recipes and menus. Note: Participants may request that an item not be put on their plate.

Compliance 1.5. Drinking water. Unlimited drinking water is available from a water cooler, a water fountain or in a clean, sanitary dispenser at each table.

Compliance 1.6. Therapeutic Diets.

- Participants receive a therapeutic diet only if prescribed by a physician. Prescriptions are on file and updated annually.
- Preparation and/or service are feasible.
- A registered dietitian has approved the therapeutic meal.
- Nutritional supplements (canned formulas, powdered mixes, food bars, etc.) may be made available to participants based on documented assessed need as determined by a Registered Dietitian. Such products do not replace conventional meals unless a physical disability warrants their sole use.
- Vitamin and mineral supplements are not purchased with program funds.

Standard 2: Menus

Approved menus are available to participants.

Compliance 2.1. Menu-Posting.

- The day's nutritionist-approved menu is posted in a public and visible place.
- The menu is printed in at least 14-point font.

Compliance 2.2. Nutritional Analysis. Nutritional analysis information is made available to participants upon request.

Standard 3: Nutrition Education Information

Compliance 3.1. The program provides nutrition education information to clients on a monthly basis. The information may be distributed directly to clients, sent by email, or posted in the center and must vary each month within the contract year.

- Materials must be from government websites, universities and professional organizations, and must be approved by a NYC Aging nutritionist prior to distribution. The program may use the following NYC Aging pre-approved handouts.
 - Nutrition handouts from the DOHMH: <https://www1.nyc.gov/site/doh/health/health-topics/cdp-farmersmarkets.page> (click on "Start a Farmers Market Nutrition Education Program" then "Handouts for Adult Workshops.")
 - Monthly Nutrition Newsletters sent by NYC Aging Nutrition

Compliance 3.2. The program informs the NYC Aging Nutritionist if it plans to use one of the pre-approved handouts.

Compliance 3.3. The program documents distribution of nutrition information.

Standard 4: Participant Feedback on Meals, Meal Services and Nutrition Education

The program routinely solicits and considers participants' comments on meals, meals service, and nutrition education.

Compliance 4.1. The program obtains and considers participant input on menu planning, meal service and nutrition education. Over the course of the contract year, program conducts one meal satisfaction and nutrition education survey and one meal satisfaction and nutrition education feedback meeting. Feedback from survey and meetings are

used for program enhancement. Meeting minutes and survey results must be made available to NYC AGING upon request.

Compliance 4.2. The program administers a program customer satisfaction survey annually. NYC Aging may coordinate the release of specific client satisfaction surveys that the department takes the lead in developing. The program may release its own survey in addition to the NYC AGING required generated survey.

Compliance 4.3 Surveys are available in the languages of the population served.

Compliance 4.4 Feedback from surveys is used for program enhancement, and the results are made available to NYC AGING upon request.

Standard 5: Additional Nutritional Service Needs

Participants who need additional nutritional services are identified and assisted.

Compliance 5.1. The program administers the Nutrition Screening Questionnaire (NSI) to meal participants at registration and at least once during the year. *(The Questionnaire may be self-administered, or the program may use appropriately qualified students –e.g., nursing students or nutrition students supervised by a Registered Dietitian.* Participants with a nutrition risk score of 6 or higher are considered high risk and are offered nutrition counseling through a referral to NYC Aging’s nutrition counselors through NYC Aging’s client data system or another appropriate referral.

Compliance 5.2. Nutritional risk information

- During the year the program makes a specific effort to educate participants and staff about the signs of nutritional risk and what to do if present – e.g., bulletin board display, nutrition education presentation, distribution of a flyer or other printed material, etc.

Congregate Meals Staff, Food Handlers, and Volunteers

Standard 6: Number of Food Handlers

The program has an appropriate number of food handlers to meet its level of budgeted congregate meals.

(Note: “Food handlers” include paid staff, volunteers, and others who work in the kitchen or assist with meal service)

Compliance 6.1. The program is staffed with the number of food handlers specified in the current budget.

Compliance 6.2. The number of food handlers is sufficient to meet service needs.

Standard 7: Supervision of Food Handlers and Volunteers

Food handlers and volunteers are appropriately trained and supervised.

Compliance 7.1. Staff with Food Protection Certificates Course.

- At least two food handlers have a current Food Protection Certificate issued by the DOHMH, which must be made available upon request. At least one food handler with a current Food Protection Certificate is on site at all times.

Compliance 7.2. The program provides training at orientation and at least quarterly for all food service staff and volunteers. Training may be provided by the food services supervisor, the program director, or consultants/invited speakers. Training plans, schedules and attendance at trainings must be documented.

Compliance 7.3. Food handlers receive on-going supervision from the food service supervisor or director.

Procedures and Methods

(Note: Food Handlers include all personnel involved in the preparation, service or delivery of foods.)

Standard 8: Health, Attire, Sanitary Procedures

Food handlers follow basic sanitary procedures.

Compliance 8.1. Health.

- Food handlers are in good health and free from communicable diseases.
- Food handlers who are suffering from sneezing, coughing, diarrhea, open sores, or other communicable or contagious conditions are removed from food service tasks and areas.

Compliance 8.2. Attire.

- Food handlers wear clean and washable outer garments (e.g., aprons, smocks) or disposable outer garments.
- Food handlers wear hair restraints. (Note: Hair spray is not an acceptable alternative to hair restraints.)
- Long beards are protected by restraints.
- Food handlers have clean and trimmed fingernails, free of polish and artificial nails (or wear gloves at all times).
- Food handlers wear a minimum of jewelry (only plain wedding bands).
- Food handlers have clean personal habits.

Compliance 8.3. Basic sanitary procedures.

- Food handlers wash their hands with soap and warm water before beginning work, after each visit to the toilet, and as required by the sanitary code. Note: The use of hand sanitizer is not a substitute for hand washing with soap and water.
- Handwash signs are posted near hand washing sinks in the kitchen and bathroom. The signs direct food handlers to wash their hands after toilet use.
- Food handlers do not use any tobacco products in designated food storage, service and preparation areas.
- Smoking is not permitted. "No Smoking" signs are posted in the food preparation, storage and service areas.
- Spitting is not permitted. "No Spitting" signs are posted in the food preparation, storage and service areas.
- Food handlers consume food only in designated dining areas where it will not result in contamination of food, equipment, or other items needing protection.
- Food handlers keep personal belongings outside of the food preparation, service and storage areas.

Food Regulations and Guidelines

Standard 9: Health, Attire, Sanitary Procedures

Food purchases are nutritionally safe and checked against market order.

Compliance 9.1. Purchases.

- Food specifications meet commercial standards for quality, sanitation and safety.
- All food is purchased from sources that comply with federal, state and local regulations related to food and food labeling and handling.
- Food purchasing practices are cost-effective.
- All milk is pasteurized.
- All purchased meat, poultry and fish is government-inspected.
- Food delivery invoices/receipts are signed and dated upon delivery by the person receiving the food.
- Purchased food is carefully inspected and checked against the market order to ensure:
 - Delivery matches the order, including nutrient requirements outlined in the NYC Food Standards.
 - Price is correct.
 - Quantity and weight are correct.
 - Quality and grade are acceptable.
 - Food is at required temperature.
 - Food is in original packaging, which is free from swelling, bulges, dents, mold, leaks, and odors.
- Rejected foods are removed and arrangement made for immediate return and credit. (Spoiled goods are removed and stored separately until they are returned.)

Compliance 9.2. Donated food.

- The program accepts only appropriate donated foods.
- The program does not serve foods prepared or canned in the home, road-killed game, wild game, or fresh/frozen fish donated by sportsmen.
- The program does not serve donated canned foods when:
 - Dates on packing cases or cans are expired.
 - Case or cans are missing labels.
 - Cans are rusted, moldy, leaky, swollen or severely dented.

Compliance 9.3. Good Food Purchasing Program. The program complies with the data requests and guidelines of the New York City's Good Food Purchasing Program, accessible at <https://goodfoodpurchasing.org>.

Standard 10: Food Expiration Dates, Storage and Disposal

Food is dated and stored or disposed of in a sanitary manner.

Compliance 10.1. Prepared and fresh foods.

- Prepared food that is to be stored in refrigerators, freezers, or in storerooms is placed in food grade containers, covered, labeled and dated.
- Stored foods are protected against cross-contamination (e.g., raw meat, chicken and fish are kept apart from raw fruits and vegetables).
- Cooked food is stored above raw food.

Compliance 10.2. Dry food and supplies storage.

- Items are stored in an organized fashion so that they can be rotated on a first-in/first-out basis.
- Food and supplies are stored at least 6 inches above the floor and away from walls and ceiling.
- Precautions are taken to protect dry foods from dust, dirt, dampness, rodents, insects, pests and foreign materials.
- Cartons are dated on receipt if contents are maintained in cartons.
- Individual containers are dated with month and year if removed from cartons.
- Cans or other individual items are dated on receipt.

- Canned goods are not stored longer than one year.
- Spoiled foods (dented, leaking, or rusted containers), outdated foods (received more than one year ago) and expired foods (past expiration date on original packaging) are discarded.

Compliance 10.3. Food storage temperatures.

- Dry storage areas are maintained at a temperature between 50°F and 70°F and are well-ventilated.
- Refrigerators are maintained at a temperature at or below 40°F.
- Freezers are maintained at a temperature at or below 0°F.
- Perishable foods are refrigerated, except during necessary preparation.
- Commercially frozen foods are maintained in freezers.

Compliance 10.4. Food disposal.

- Food that needs to be disposed of is promptly discarded.
- Canned food that needs to be disposed of is denatured by the addition of a disinfectant, removed from the can and marked condemned. The label of the can is defaced and marked condemned.
- Food that needs to be discarded (or returned to vendor because it is spoiled) is held separate and apart from foodstuff offered for consumption.

Standard 11: Cleanliness

Food storage, preparation and service areas are kept clean.

Compliance 11.1. If food is stored and prepared in areas not used solely for that purpose, the space has been adapted to fit food and safety requirements.

Compliance 11.2. Food storage, preparation and utensil-washing areas are restricted to those involved in food service.

Compliance 11.3. All areas are clean and well maintained, including floors, walls, ceilings, windows, doors, skylights, light fixtures, vent covers, fans, mats, duckboards and decorative materials.

Compliance 11.4. Utensils, tableware, equipment and work surfaces used for food preparation and service are kept clean and sanitized. A test kit should be used for measuring sanitizing solution concentration.

- Hot and cold running water are available in food service areas.
- Food contact surfaces are cleaned using cloths that are free of metal.
- Utensils and work surfaces are cleaned with soap and hot water and sanitized whenever they are used and in accordance with the cleaning schedule.
- All multi-use receptacles and other containers used in food preparation, service or transportation of food are cleaned before and after each use, sterilized or sanitized.
- New bottles, receptacles and utensils are thoroughly cleansed and sanitized before use.
- Utensils for handling food and containers for storing food that are chipped, cracked, rusted, corroded, or badly worn are discarded.
- Grease is not poured down sinks but disposed of as garbage.
- The following cleaning and wiping cloths are kept separately:
 - Clean, dry cloths used for wiping food spills from tableware.
 - Moist cloths used for wiping food spills on kitchenware and food-contact surfaces.
 - Moist cloths for cleaning of non-food-contact surfaces (e.g., counters, walls, dining tables).
- Moist cloths used for cleaning are stored in a sanitizing solution between uses.

Standard 12: Food Preparation

Food preparation follows principles of nutritional health and safety.

Compliance 12.1. Conservation of nutrient value, flavor, and appearance.

- Food is not overcooked.
- Food is prepared as close as possible to the serving time.

Compliance 12.2. Appropriate and safe temperatures.

- Perishable or potentially hazardous foods that require cooking are cooked to an appropriate temperature.
- Hot food is held at 140°F or above until it is served as well as during food service.
- When cooked perishable food falls below 140°F, it is reheated quickly to 165°F or higher, then held at a minimum of 140°F.
- Poultry, poultry stuffing, stuffed meats and stuffing containing meat or poultry are cooked to an internal temperature of at least 165°F, with no interruption of the cooking process.
- Pork and food containing pork are cooked to an internal temperature of at least 155°F.
- Ground beef and food containing ground beef are cooked to an internal temperature of at least 158°F.
- All other meats, fish and shell eggs are cooked to an internal temperature of at least 145°F.
- Frozen food is thawed in the refrigerator at 40°F, or under potable running water at 70°F, or as part of the cooking process. (*Note: If item weighs more than 3 lbs., it is not thawed by cooking.*)
- Cold food is held at 40°F or below until it is served and during service.
- Perishable food that is not served immediately after it is delivered or prepared is refrigerated.

Compliance 12.3. Sanitary practices.

- Food that requires no further cooking or is ready to eat is protected from bare hand contact by the use of appropriate utensils (e.g., long-handled tongs) or disposable gloves.
- Food is free from spoilage, filth, mold, odors, and contamination.
- Proteins and foods containing milk and egg products are handled with particular caution.
- Raw fruits and vegetables are washed thoroughly in potable water before they are served.
- Food preparation takes place only when there is hot and cold running water.

Standard 13: Using Cook Chill Methods

Proper cook chill methods are used when chilled or frozen meals are being prepared.

Compliance 13.1. Initial cooling. Cooked bulk food is allowed to cool at room temperature in shallow pans for approximately 30 minutes to bring internal temperatures down to 120°F.

Compliance 13.2. Rapid chilling (non-freezer). Once the food has been brought down to 120° F, it is rapidly cooled to 70°F within the next 2 hours, and to 40°F within another 4 hours. Note: Total cooling time never exceeds six hours.

Compliance 13.3. Rapid chilling (freezer method – recommended).

- Shallow pans containing food cooled down to 120° F are distributed to all available freezers.
- Sufficient space is left for cold air circulation between pans.
- Food in freezers that are set to operate at 0° to -10°F. chills to an internal temperature of 70°F. within one hour.

Compliance 13.4. Refrigerating/plating chilled meals. Chilled meals are transferred to the refrigerator and kept at 40°F and/or portioned and packed as cold meals.

Standard 14: Efficiency of Food Service

Food Service is efficient and organized.

Compliance 14.1. The following is observable:

- There are no avoidable delays or long waits for food.
- The method of serving food is well organized.
- Food servers are efficient.
- There is appropriate and adequate dinnerware for the number of participants served.

Standard 15: Sanitary Food Service

Food is served in a sanitary fashion.

Compliance 15.1. Temperatures.

- Time and temperature of foods should be taken with a sanitized probe thermometer and recorded as follows:
 - Final cooking temperature.
 - Receiving temperature of bulk food that is catered.
 - Receiving temperature of pre-packaged meals monthly.
 - Temperature at meal service.
- Cold food is maintained and served at 40°F or below.
- Hot food is maintained and served at 140°F or above.
- Frozen food is maintained and served at 0°F or below.

Compliance 15.2. Sanitary practices.

- Food is served restaurant style (e.g., waiter, cafeteria).
- Sneeze guards or other appropriate means protect food placed out for service (e.g., cafeteria style).
- Participants do not touch food with their bare hands before it is on their plates.
- Common drinking cups are not used.
- Straws for drinking are completely enclosed.
- Milk is served in unopened half-pint containers or dispensed from a chilled milk dispenser.

Compliance 15.3. Single service utensils.

- Single-service utensils are used when adequate facilities for cleaning and sanitizing utensils are unavailable.
- Single-service utensils and cookware (e.g., aluminum pans) are discarded after use.

Standard 16: Leftover Food

Leftover food is properly managed.

Compliance 16.1. Leftover catered food.

- Catered sites dispose of leftovers on the same day as first service (by offering seconds at the end of meal service, by increasing portion size or by discarding food).
- Leftovers are unplanned and occur infrequently.

Compliance 16.2. Leftover storage (at meal preparation sites only).

- Meal preparation sites store food for next day (or second day) use as follows:
 - Leftovers are rapidly cooled in shallow containers (not more than 2" deep) to 40°F, using the proper chill-down methods.
 - When internal temperature reaches 40°F, the containers are covered, labeled and dated.
- Leftovers are not frozen.

Compliance 16.3. Re-serving leftovers at meal preparation sites.

- Leftovers not consumed on the day of preparation may be offered as an alternate choice up to two days following the date of preparation.
- Appropriate miscellaneous leftovers less than 48 hours old can be added to soup stock.
- Leftover food that requires heating is reheated to an internal temperature of 165°F or held to a boil for at least 15 seconds.
- Leftover food that requires heating is reheated and served only once.

Standard 17: Food Emergencies

Food emergencies are handled appropriately.

Compliance 17.1. Choking.

- Choking and First Aid posters are posted in each dining room.
- At least one staff member present during meal service knows how to do the Heimlich Maneuver.

Compliance 17.2. Procedures for food-borne illness. The following procedures are followed when several participants complain about an upset stomach, diarrhea, or feeling ill within 3 to 36 hours after consuming a meal at the site.

- Any suspected outbreaks of food-borne illness are reported promptly to the Department of Health and Mental Hygiene by calling 311, NYC Aging nutritionist, and NYC Aging Nutrition Director.
- If possible, half cup portions of all meal items are saved on a paper or aluminum plate covered with plastic wrap and frozen for later laboratory tests.
- The program contacts affected persons to determine if they are under medical supervision or require medical assistance. Follow up is provided until the total incident has been resolved.
- The incident is documented in the program's incident file.

Standard 18: Inventory and Food Use

Sites monitor inventory and monthly food cost.

Compliance 18.1. Inventory. The provider conducts an inventory of food and supplies each month.

Compliance 18.2. Monthly food cost. The provider calculates food cost monthly.

Standard 19: Delivery of Catered Food

The program monitors delivery of catered food.

Compliance 19.1. On a daily basis, the program monitors:

- Arrival of food at agreed upon time.

- Agreed upon number/quantity of food items.
- Safe and appropriate meal packaging.
- Arrival of food at required temperatures.
- Matching of food to approved menu.

Compliance 19.2. The program keeps a catered meals issue log and documents recurring problems and follow-up actions with the caterer.

Compliance 19.3. The program records the quantity of catered meals ordered, consumed and leftover.

Standard 20: Catering Subcontracting Monitoring

Compliance 20.1. The program follows NYC Aging's procedures approval before entering into contracts with caterers.

Compliance 20.2. The program gets prior written approval from NYC AGING for catering subcontractors that further subcontract out services. In order to get approval, the provider must send written justification to NYC Aging. Generally, this practice is discouraged and is unlikely to be approved by NYC Aging unless a strong rationale exists as to why the arrangement should be allowed.

Compliance 20.3. The food service supervisor or director shall make a documented visit once a year to the caterer's preparation site to monitor whether meals are prepared in accordance with the terms of the Agreement and basic sanitary requirements.

Compliance 20.4. The food service supervisor or program director shall document all complaints and problems regarding the caterer/preparation site as well as the resolution in a log. The food service supervisor or program director shall visit the caterer/preparation site if there are substantial or repeated client complaints or noted problems and will document the problem and its resolution. The program shall report recurrent problems with the caterer to NYC Aging.

Compliance 20.5. The program notifies the NYC AGING Nutrition Unit via email at the beginning of each contract year that the subcontractor's facility meets all applicable Federal, New York State and City requirements, including the monitoring and inspections of preparation facilities. Providers are encouraged to familiarize themselves with 9 N.Y. Comp. Codes and Regs. 6654.10 for applicable requirements.

Standard 21: Caterer Compliance with NYC Aging's Standards

Caterers comply with NYC Aging standards for food preparation, food transportation, storage and sanitation.

Compliance 21.1. The program ensures that catering subcontractors adhere to all pertinent expectations as laid out in the scope of services, these standards, and policies and procedures established during the contract period, including requirements for reporting food purchases for the Good Food Purchasing Program.

Compliance 21.2. The caterer complies with sanitary requirements set forth in the contract and NYC Aging's standards for nutrition, food preparation, storage, and sanitation, including the following:

- Temperatures are taken with a probe thermometer before portioning and/or packaging each day.
- Hot foods are packaged at a minimum of 140°F.
- Cold foods are packaged at a temperature below 40°F.
- Hot and cold foods are packed separately.

- All foods are packed for transportation in insulated carriers.
- Insulated carriers are in good condition and sanitarily maintained.
- Food is ready for pick-up or delivered on time.
- Food is ready for pick-up or delivered at the correct temperature.

Compliance 21.3. The caterer reports any Department of Health and Mental Hygiene inspections along with the corrective action plan to the program within 24 hours of inspection (see Compliance 24.1 in reference to submission of DOHMH inspection reports and corrective action plans to NYC AGING).

Physical Environment and Equipment

Standard 22: Facility Compliance with Federal, State, and City Codes

The congregate meal facility and/or meal preparation site complies with all applicable federal, state and city codes. *(Code compliance includes NYC Health Code, Article 81 for food preparation and food establishments.)*

Compliance 22.1. Facility Compliance.

- The provider, or its food service subcontractor, has a current Permit to Operate from DOHMH or applicable regulatory agency.
- The provider must provide a copy of any DOHMH inspection reports or inspection by applicable regulatory agency for any food preparation site including subcontractors to NYC Aging along with a corrective action plan within 24-hours of inspection.
- All facilities are in compliance with City and State Sanitary Codes and display operation permits.
- All facilities have written confirmation or a permit that they comply with Fire Department or Building Department regulations.
- NYC Aging's Program Facilities Design and Construction Management (PFDCM) has full access to the center to ensure the site complies with the ADA relevant building and fire codes.
- NYC Aging reserves the right to close programs due to serious health and safety concerns.

Compliance 22.2. Physical Structures.

- Floors are made of or covered with non-slip, hard, non-absorbent, watertight material.
- Walls and ceilings in food preparation areas are made of or covered with a hard, non-absorbent, light-colored material.
- Walls and ceilings in contact with steam or vapor are made of smooth cement, glazed tile, glazed brick, or other non-absorbent material.
- Windows and doors in food preparation and service areas that open into outer air (with the exception of emergency exits) are equipped with appropriate screens.

Compliance 22.3. Plumbing.

- Floors, refrigerators, cooking kettles, and steam tables have proper drains.
- Dishwashers have indirect drains and boosters for sanitizing temperatures.
- Indirect drains are installed where required by sanitary code, including in all food preparation and ware washing sinks.
- Sinks for food preparation and for the sanitizing of utensils, equipment, or the premises, are an adequate size, and have boosters where required by sanitary code.
- Sinks are of sufficient size and have running hot and cold water.
- Plumbing and plumbing fixtures are properly connected, vented and drained.
- Each water supply outlet or connection is protected from back flow into the water system.
- Grease traps have been installed where needed and are well maintained.

Compliance 22.4. Food Storage, Preparation, and Service Areas.

- Food storage areas contain no exposed or unprotected sewer lines.
- Toilet rooms are not used as storage areas for food and cooking supplies.
- There is a handwashing sink no more than 25 feet from any food preparation, service or ware washing area.
- The hand washing sink(s) is equipped with hot and cold running water, soap, a hand washing sign, paper towel dispensers or electric hand dryers and a trash receptacle nearby (if using paper towels).
- Lighting fixtures in all three areas have protective shields or shatterproof light bulbs.
- Fans in all three areas are shielded.

Compliance 22.5. Ventilation and Fire Protection Systems.

- The NYC Aging Facilities Unit and the Bureau of Fire Prevention are consulted before the purchase of a new ventilation and/or fire protection system (includes optional range hoods, exhaust fans, ductwork, filters).
- All contracts for new systems guarantee that the systems meet applicable code requirements.
- The Fire Department inspects extinguishing systems for cooking equipment upon installation.
- Exhaust systems and filters are inspected, and cleaned, and changed at least once every three months by a qualified employee or an approved cleaning service.
- Only “baffle” filters are used.
- Operating and cleaning instructions for cooking exhaust and the fire extinguisher system are posted under glass at the entrance to the kitchen.
- A sketch on 8-1/2x11 inch paper showing the origin, run, and terminus of the grease duct is posted over the grease duct.
- A sufficient number of A:B:C portable fire extinguishers are strategically placed throughout food service areas.
- Portable fire extinguishers and fire extinguishing systems are inspected, tested and tagged with a current date.
- Fire extinguishing devices are inspected annually by a licensed maintenance service.

Compliance 22.6. Pest Control.

- Extermination service is provided at least monthly or more frequently if necessary.
- The exterminator is licensed by the State Department of Environmental Conservation.
- The exterminator uses only closed bait stations in food storage, service, and preparation areas and in utensil washing and storage areas.
- The program does not use or store pesticides.
- Exterminator services are used for fly and pest control (e.g., the program does not hang fly paper/strips in food storage, preparation or serving areas).

Standard 23: Equipment and Utensil Compliance with Federal, State, and City Codes

Equipment/utensils comply with all applicable federal, state and city codes.

Compliance 23.1. Equipment/Utensils.

- Unless easily movable, equipment is sealed to the floor; or installed on a raised platform of concrete or other smooth masonry; or elevated at least 6 inches on legs.
- Equipment and utensils used for food preparation and service are lead and cadmium-free.
- No Styrofoam plates, cups, bowls or take-out containers are used.
- Equipment and utensils used for food preparation and service are easily cleaned and inspected (e.g., easily disassembled).
- Cutting blocks and boards are smooth, clean, and constructed of non-absorbent material.

Compliance 23.2. Equipment Maintenance.

- All major equipment receives routine maintenance.
- Dish washing machines are maintained in good repair and operated in accordance with manufacturer's instructions. (Recommended temperature for washing is 140-150°F; 170-180°F for final rinse.)
- Refrigerators and freezers are equipped with internal working thermometers.
- Precautions are taken to prevent machinery, exposed pipes and equipment from entrapping foreign materials (for example, dusting).
- Equipment is appropriately tagged to correspond with inventory lists.

Compliance 23.3. Garbage Containers.

- Garbage receptacles are sufficient in size and number and lined.
- Garbage receptacles are constructed of an appropriate material.
- Garbage containers hold contents without leakage and have tight-fitting covers.
- Garbage receptacles are rodent proof.
- Filled garbage receptacles weigh less than 100 pounds.
- Garbage receptacles are emptied before garbage and waste materials accumulate and become a nuisance.
- Garbage receptacles and covers are properly cleansed after emptying.
- Garbage receptacles are covered when not in use and maintained in a sanitary condition in the building or at the rear of the premises until the time of garbage removal.
- All waste is sorted according to recycling requirements (papers bundled, etc.).

Recordkeeping

Standard 24: Recordkeeping

The program maintains documents/records/reports for the required number of years.

Compliance 25.1. Records are maintained and available for six years after the closing date of the contract year in which they took place, including:

- OAC meals participant registration.
- Participant, staff and volunteer meal service record, e.g., sign-in sheets.
- Contributions collected and deposit records.
- Time and temperature records.
- NYC Aging assessment and monitoring correspondence.
- Department of Health and Mental Hygiene Sanitary Inspection Reports and CAP submitted to NYC Aging.
- Communications with the Department of Health and Mental Hygiene in response to citation.
- Participant surveys and other written input.
- Menus served, with substitutions documented.
- Dated Monthly Food Cost Reports.
- Dated Monthly Inventories of Food and Supplies.
- Physician diet prescriptions.
- Staff training documentation including the names of participants, names of persons providing the training, date and time of training, topic of training, and outline/handouts.
- Bills for quarterly exhaust system cleaning and inspection.
- Extermination service bills or reports specifying the provider's name, address, license number, date and the form of service provided.
- Service documents for other major equipment servicing.

Case Assistance

Scope of Services and Standards of Operation

Introduction

Case Assistance service assists older consumers to obtain appropriate services, benefits/entitlement and other resources to address an identified need(s). The service is delivered on an individual basis and includes: assisting the older adults in defining concerns, needs and capacities; providing direction or guidance relative to identified needs; and assisting with referrals and linkages to appropriate services and opportunities. Where a referral has been initiated, the service includes follow-up to determine whether the service/benefit has been, or is being, provided.

Case assistance addresses a specific issue(s) and usually results in a specific outcome – e.g., application for an entitlement; receipt of a service; linkage to a program; translation of a document. Case assistance is usually a short-term or time-limited service.

Case Assistance Services

Standard 1: Service Provision

The program provides comprehensive case assistance.

Compliance 1.1. Assisted referral and/or linkages. The program assists older adults who need referrals to appropriate resources in the community.

- When needed, the referral involves contact with the resource provider to ascertain that the client can be served and to facilitate the linkage – e.g., by making an appointment, arranging for the service, sending client information (with the client's consent), etc.
- Referrals are timely.
- After making an assisted referral to a resource (with client's consent), the program follows up within one month to determine outcome/status. Follow-up is monthly thereafter if outcome is pending.
 - Each follow-up contact is documented in the client's record.
 - Outcome of the referral is documented in the client's record.

Note: In instances where follow-up with the client is more appropriate, the program follows up with the client until an outcome can be documented.

Compliance 1.2. Benefits and Entitlements Assistance. The program makes a concerted effort to screen all new members for benefits/entitlements eligibility and offers periodic screening for benefits/entitlements assistance to all members. Older adults with benefits/entitlements needs are assisted as needed through one or more of the following activities:

- Screening to determine the person's eligibility for benefits and entitlements, using Access NYC, Benefits Check-up and/or other electronic programs where possible.
- Counseling when the client is reluctant to apply.
- Assistance filling out forms, completing paperwork and/or collecting documentation.
- Submission of forms on the client's behalf.
- Accompanying the client who cannot manage on her/his own to the office that administers the benefit or to other locations in connection with application.
- Advocacy on behalf of the client if a benefit/entitlement has been denied.
- Follow-up to ascertain whether the client is receiving/will receive the benefit.
- Assisting the client in timely recertification for the benefit/entitlement.

Compliance 1.3. The program completes the benefits and entitlement forms in the NYC Aging client data system.

Compliance 1.4. Immigrant Assistance. The program helps older immigrants adjust to new customs, systems and institutions, acquire benefits and entitlements, and develop support networks.

- The program provides assistance in the language of the immigrant requesting services, using interpretation services where necessary.
- Activities include but are not limited to: advocacy; assisted referral to immigrant assistance organizations and coordination to the extent necessary with other organizations providing assistance; translation of documents; linkages to culture-specific social service agencies; ESL linkages; interventions to address social isolation.

Compliance 1.5. Supportive contact. The program provides supportive contact to help individuals address problems of daily living, such as managing mail; making and remembering appointments; organizing daily activities; coping with specific personal or family problems.

- Support is provided only where there is an identified problem/need/issue.
- Assistance involves such activities as reassurance, clarification, advice giving, filling out papers or forms.
Note: Referral for mental health counseling should be considered when the client's emotional or personal needs exceed the scope of this type of case assistance.
- Each interaction to provide supportive contact is documented in case notes, with an explanation of the issue(s) addressed.

Compliance 1.6. Advocacy. The program helps clients who require personal representation or other types of advocacy to obtain an entitlement or needed service which has been denied (or which is in jeopardy of being denied); to prevent or forestall an action against the client (e.g. eviction; service cut-off); to assist with housing problems; or to initiate a formal appeals process; etc.

Standard 2: Time-Limited Interventions

The program provides the service to clients who have a specific need, problem and/or issue appropriate for short-term or time-limited interventions.

Compliance 2.1. A determination is made during the initial client interview that the client has a specific need/problem/issue that can be addressed through specific activities of the worker over a period of time. Note: Older New Yorkers with needs that the program cannot address are referred to a more appropriate provider, wherever possible.

Standard 3: Intake Interview

The program completes an Intake Interview with each case assistance client and enters pertinent information in NYC Aging's client data system.

Compliance 3.1. Intake. An intake interview is conducted with each client found to be appropriate for case assistance to learn more about his/her request. The client's presenting problem, plan of action and follow-up schedule are to be documented in an initial Case Assistance note for the client in NYC Aging's client data system.

Compliance 3.2. Client interviews are conducted in privacy in a location where client confidentiality can be maintained.

Standard 4: Documentation

The program documents in case notes the appropriateness of the service provided to the client's needs/issues/concerns.

Compliance 4.1. Case notes reflect complete and appropriate actions taken, client issues, and other pertinent matters.

- Entries include the date, name of person with whom there was contact, a brief summary of the reason for the contact, actions to be taken and who will be responsible for taking those actions.

Compliance 4.2. Case notes are written within four business days of the actions taken and/or worker/client contact.

Compliance 4.3. Case notes should be marked as final within ten (10) business days of the date of the case note.

Standard 5: Resource Information

The program maintains comprehensive and up-to-date resource information.

Compliance 5.1. The program's information about eligibility and application requirements for benefits and entitlements needed by older adults is current and comprehensive. This may be in the form of paper resource files or electronic programs such as ACCESSNY and Benefits Check-UP.

Compliance 5.2. The program's information about resources and services available in its service area is current and comprehensive. It includes but is not limited to information about: NYC Aging-funded programs and other community resources such as mental health programs; social security office; tax preparation assistance; continuing education programs for older adults; low or no-cost health maintenance facilities; local hospitals and clinics; houses of worship; fraternal organizations; sources of immigrant assistance; culture-specific societies; food pantries; sources of free transportation; free holiday meals.

Compliance 5.3. The program's information on each resource includes the provider organization's name (including common name or acronym, if applicable), address, offices, telephone number, days and hours when open, eligibility requirements, fees and other crucial facts.

Standard 6: Promotion of Case Assistance Services

The program promotes utilization of case assistance service.

Compliance 6.1. The program's literature and other public materials include statements in each of the languages spoken by more than 30% of community residents that: (1) the program can assist with information about services, benefits and resources for older persons and with benefits/entitlements application and (2) the program can provide this assistance in the primary language of the older adult requesting assistance.

- Program literature includes the service phone number if different from the program's main telephone number.
- See also General Program Standards, Standard 2: Language and Cultural Competency.

Compliance 6.2. The program publicizes hours when the service is available if these are at specific times of the day. When case assistance is available only during certain hours, notice of available dates and times is visibly posted in the languages spoken by more than 30% of members.

Level of Service

Standard 7: Budgeted Units

The program provides its budgeted annual units.

Compliance 7.1. The program provides the number of units specified in its contract.

Standard 8: Service Definitions

The program uses the correct definition in documenting service provision.

Compliance 8.1. The program reports units for each direct client service (assistance to or on behalf of a client). The unit also includes:

- Collateral contacts on behalf of the client.
- Case review with supervisor. *Note: Time spent by the supervisor and the worker discussing or reviewing the case together can only be claimed by the worker **or** the supervisor, not both. If both do separate follow-up on the case, each records her/his own time spent separately.*
- Documenting client information.

*Note: The unit does not include professional development such as training. Case assistance is a one-on-one service requested by the client; units of case assistance do not include the provision of public information. As per NYSOFA's definition, Public Information refers to **group informational activities** designed to inform clients or potential clients of available services and/or interventions initiated by the program for the purpose of identifying potential clients and encouraging their use of available services and benefits.*

Case Assistance Staffing

Standard 9: Staffing Levels and Qualifications

The required level of staff is secured, and staff have the required level of education and training to provide the service.

Compliance 9.1. As appropriate to the tasks they perform, all casework staff (including students) demonstrate the following skills and knowledge:

- Cultural sensitivity/competence in recognizing and addressing the special needs and challenges of diverse populations in the program's service area, including different socio-economic, racial and ethnic older populations as well as population with different cultural preferences and lifestyles and new immigrant populations.
- Knowledge of types of entitlements/benefits for older people and eligibility and application requirements.
- Knowledge of local and citywide resources for older persons.
- Ability to accurately prepare entitlement applications and to assist clients in gathering documentation, completing applications.
- Interviewing skills.
- Ability to make appropriate referrals and follow-up in a timely manner.
- Ability to write clear, professional case notes.
- Ability to work with clients empathically and respectfully.

Standard 10: Training and Supervision

Staff receive appropriate training and supervision.

(Also see General Program Standards.)

Compliance 10.1. Each casework staff has a designated supervisor who reviews the worker's intakes, referrals, application assistance, follow-up, case notes and case closings with the worker on a regular schedule determined by the program.

Target Populations

Standard 11: Serving Older New Yorkers

Within funding limits, the program provides case assistance to any resident age 60+ who seeks out these services.

Compliance 11.1. The program can demonstrate that it serves persons who live throughout its service area.

Compliance 11.2 The program makes targeted efforts to reach the most vulnerable older adult populations in its service area, including low-income and minority older adults, older adults with Limited English Proficiency (LEP), and other under-served older adults.

Recordkeeping

Standard 12: Documentation of Clients and Services

The program maintains required documentation of client and service information.

Compliance 12.1. All worker activities related to each case assistance client (type of activity, intake, case notes, consents, time spent, service termination, etc.) are entered into NYC Aging's client data system in the appropriate module.

Education and Recreation

Scope of Services and Standards of Operation

Introduction

Education/Recreation consists of scheduled and organized activities designed to foster the well-being of older persons through (1) satisfying use of leisure time; (2) social interaction; (3) development/enjoyment of interests, skills, talents, creative expression; and (4) participant leadership. Unit: Each session of a group scheduled activity. An education/recreation unit of service is one session.

Scope

Standard 1: Varied and Diverse Programming

The program offers varied and diverse programming in the areas of arts and culture, technology and non-health related education/ recreation.

Compliance 1.1. The program provides weekly activities in each of these three categories: (1) arts and culture, (2) technology, and (3) non-health related education/recreation. Activities may take the form of organized and scheduled workshops, classes, discussion groups, trips, rehearsals, performances, games, sports, studio sessions and other types of session.

Compliance 1.2. The program offers the number of sessions as contracted.

Compliance 1.3. At least two sessions each year are on elder abuse prevention and awareness, with instructions on how to detect and report instances of elder abuse.

- The required number of elder abuse sessions are held within one year after contract start date, and annually subsequently.
- The program posts signage in a prominent common area within the center that directs those who need information regarding elder abuse detection, reporting, counseling, and services to call either 311 or the NYC Aging's Elderly Crime Victims Resource Center.

Compliance 1.4. The program includes technology within its Education/Recreation offerings, which may consist of training and education in the use of technology, virtual programming to include homebound older adults, and/or linkages with technology programs/providers in the community.

Standard 2: Planned Activities

Activities are planned, structured, and organized.

Compliance 2.1. Each activity has a planned beginning and ending time.

Compliance 2.2. The program posts and/distributes a calendar or schedule listing each activity, with its name and start time at least one day before the activity is scheduled to occur.

Compliance 2.3. The posted calendar or schedule is current.

Compliance 2.4. Each group activity has a leader (staff, volunteer, or consultant) that teaches or leads the activity.

Compliance 2.5. All activities have a minimum monthly average of at least five individuals per session.

Compliance 2.6. OAC members have leadership roles in planning activities.

Compliance 2.7. Each group activity is at least 45 minutes in duration.

Standard 3: Program Appeal to Older New Yorkers

Activities are designed to appeal to both current and prospective center members.

Compliance 3.1. The program has an annual (or more frequent) process for gauging interests among older persons in the community (participants and those who do not attend the center).

- The program can demonstrate that it responds to emerging interests and trends through new education/recreation offerings.

Compliance 3.2. All sessions have an annual average of at least five individuals.

Standard 4: Participation

Activities are open to any member who wishes to participate.

Compliance 4.1. Eligible persons may participate in any activity on the program's schedule within the limits of space (e.g., room limitation), or specific proficiency requirements. (*See also General Program Standards.*)

Standard 5: Publicizing Activities

The program publicizes its education/recreation activities in the community.

Compliance 5.1. The center's promotional activities in the community include information about the types of educational/recreational programs and activities it offers.

Compliance 5.2. At least one (1) special event or activity session during the year draws older adults from the community who are not members of the center at the time.

Level of Service

Standard 6: Budgeted Units

The program provides the number of budgeted units yearly.

Compliance 6.1. The program provides the number of units specified in its contract.

Standard 7: Unit Definitions

The correct unit definition is used in reporting the level of education/recreation service.

Compliance 7.1. Units are reported only for scheduled education/recreation sessions that are planned, structured and organized.

Compliance 7.2. Activities reported as education/recreation are not also reported as another service – for example, activities are not reported as both education/recreation and health promotion.

Compliance 7.3. The program indicates in the client data system whether the session was conducted virtually, in-person, or hybrid (combination of virtual and in-person).

Compliance 7.4. Per the NYS Gaming Commission – Bingo games cannot be conducted on more than fifteen (15) days during any calendar year. Provider may report no more than 15 units of Bingo during any contract year.

Education and Recreation Staffing

Standard 8: Staffing Levels and Qualifications

Instructors/leaders are appropriately qualified.

Compliance 8.1. Appropriate documentation is on file for each consultant or volunteer instructing or leading education/recreation sessions. This includes:

- Resume or application indicating that person is qualified (e.g., appropriate education, training).
- Contracts or written agreements specifying rates and number of sessions for individuals who are paid consultants.

Note: This does not apply for continuous play (games) education/ recreation activities.

Documentation

Standard 9: Attendance

Each participant's attendance at an education/recreation activity is documented.

Compliance 9.1. The program documents each participant's attendance at an education/recreation activity in his/her client data system record. *Note: Sign-in sheets are maintained as back-up.*

Escort (Assisted Transportation)

Scope of Services and Standards of Operation

Introduction

Escort Service is a form of assisted transportation provided to an older person who needs personal accompaniment to a destination in the community, including medical or other appointments. It involves personal accompaniment throughout the outing or trip. Persons accompanied by escorts have mobility, vision or cognitive impairments.

Unit of Service: Each one-way trip provided to a person with documented need for the service.

Eligibility

Standard 1: Eligibility

The program serves eligible older persons who need escort services.

Compliance 1.1. The program provides the service to persons who meet the following eligibility criteria:

- 60 years of age or older.
- Unable to travel independently to and from destinations in the community due to mobility problems, cognitive problems, sight or hearing problems, or other types of disability.
- Unavailability of informal supports to meet their escort needs.

Note: The program conducts outreach specifically for this service if it is not reaching its target population.

Standard 2: Escort Assistance

The program provides escort assistance.

Compliance 2.1. Service activities include the following:

- Helping the older person dress in outerwear such as coat, sweater, or hat for the trip.
- Helping the older person lock and unlock his/her residence.
- Accompanying the person while she/he uses public or private transportation or walks to her/his destination.
- Remaining with the older person throughout the duration of the visit and accompanying him/her home.

Compliance 2.2. The program provides escort workers with carfare when needed for the escorted trip. The program does not pay workers' travel costs to and from work.

Standard 3: Escort Services

The program provides escort only to clients with documented need for assisted transportation (escort).

Compliance 3.1. A worker conducts a face-to-face interview with each individual requesting escort service prior to service provision to screen for eligibility and to obtain intake information. Note: The program may accept referrals from hospitals, case management agencies and other social service agencies as indicating client meets eligibility criteria. *Clients who do not meet eligibility criteria are assisted with referral to other programs if possible, and a "service ticket" is completed in NYC Aging's client data system.* Exception: When the client has an emergency need for an escort, the interview (and Intake) may be completed after the first time service is provided.

Compliance 3.2. The worker opens a case record on each client found to be appropriate for Escort service and documents the client's need for the service in the client record. *Note: The program may need to first register the client in the system if the client has not been previously registered.*

Standard 4: Service Schedules

The program develops a service schedule with the client when service is needed regularly.

Compliance 4.1. When service is needed regularly, the program establishes a schedule with the client. Note: The effective date for the schedule cannot be longer than one year without re-evaluation.

- Schedule (day, time, service destination and whether a return trip will be provided) and time period during which schedule will be in effect are documented in the client's record.

Standard 5: Evaluating Client Needs

The program re-evaluates the client's need for recurring service at the end of the time frame for the service schedule.

Compliance 5.1. The program re-evaluates the client's need for the service at the conclusion of the time frame indicated on the client's service schedule.

Compliance 5.2. Continued need is documented, or the service is terminated if need no longer exists.

Standard 6: Safety and Follow-up

Escorts monitor clients' safety and welfare.

Compliance 6.1. Escorts document their clients' reported unmet needs, health problems and other problem situations for review with their supervisor.

Compliance 6.2. The supervisor follows up as necessary on all reported problems (for example, with a case management referral; additional services; phone calls to family members).

Compliance 6.3. Client emergencies and other urgent situations are reported and handled appropriately.

Level of Service

Standard 7: Budgeted Units

The program provides the number of budgeted units annually.

Compliance 7.1. The program provides the number of units specified in its contract.

Standard 8: Unit Definitions

The correct unit definition is used in documenting service provided to the client.

Compliance 8.1. Units are counted only for one-way trips that meet the service definition. Escort service is *not* assisting a client to the ladies' room in an Older Adult Center or the counter to receive their meal at a congregate site. It is *not* the assistance offered by a van driver in operating a wheelchair lift or walking with an older person from the van to his/her front door. The driver is simply being helpful to the older person as part of regular transportation activities.

Compliance 8.2. Units reported as escort service are not also reported as another service – e.g., shopping assistance, case assistance, transportation. (If a client receives an escort and transportation service, that service is counted only under escort. A unit of escort and a unit of transportation cannot both be claimed.)

Escort (Assisted Transportation) Staffing

Standard 9: Staffing Levels and Qualifications

Staffing is appropriate to and adequate for the service.

Compliance 9.1. The number of full and/or part-time personnel (including volunteers) providing this service is sufficient to meet the contracted service level.

Compliance 9.2. Volunteers. Volunteers who provide the service:

- Are consistently available.
- Unless known to the program, have been screened and interviewed to establish reliability and suitability by the staff person with oversight responsibility for the service.
- Unless known to the program, have provided at least two references.
- Have been assigned a supervisor.

Compliance 9.3. The service is overseen by a staff person who has at minimum a BSW degree, or a Bachelor's degree and one year experience in social services provision or an AA degree and two years social service experience or four years of direct social service experience.

Standard 10: Staffing Levels and Qualifications

The program trains and supervises visitors.

Compliance 10.1. All new escorts (staff and volunteers) receive documented orientation on topics pertinent to the service they will be providing. Examples include but are not limited to: roles and responsibilities; relationship-building; limit-setting; services and activities that can be performed by the escort; situations that should be reported to staff; confidentiality; response to urgent situations; record keeping.

Compliance 10.2. Escorts meet with their supervisor alone or in a group at least monthly.

Recordkeeping

Standard 11: Attendance

The program maintains required records.

Compliance 11.1. Client records

- Intake information (need for service) in client data system.
- Client's escort schedule if service is provided regularly, including time period schedule will be in effect.
- Date of Service Start.
- One-way trips provided.
- Date(s) of service re-evaluation and documentation of continued need.
- Date of Service termination if client is no longer receiving the service and reason for termination.

- Case notes on contacts with client, reported incident, need, etc.
- Consent forms.

Compliance 11.2. Escort Records

- Name, address, contact information and family and emergency contact(s).
- Record of screening interview and references (particularly for volunteers).
- Record of supervisory contacts.

Friendly Visiting

Scope of Services and Standards of Operation

Introduction

Friendly Visiting is a scheduled visiting service provided on a regular basis to older persons in their homes or virtually to (1) help reduce isolation, and (2) monitor the older person's safety, well-being and need for additional services. Friendly Visiting is not a one-time service.

Unit of Service: *Each contact with a client with documented need for this service.*

Standard 1: Eligibility

The program serves eligible older persons who need Friendly Visiting service.

Compliance 1.1. The program provides Friendly Visiting service to persons who meet the following criteria:

- Are 60 years of age or older.
- Have limited ability to leave home due to frailty, disability or other health issues.
- Have few or no informal supports or opportunities for socialization (isolated or at risk for social isolation).

Standard 2: Adherence to Target Population

The program conducts outreach to the target population.

Compliance 2.1. If the program is an *Older Adult Center*, it does outreach to non-center members.

- The program can demonstrate referrals from the community - for example, from social service agencies, hospitals, case management agencies, neighbors, friends and families.
- The program conducts outreach specifically for this service if it is not reaching its target population.

Procedures and Methods

Standard 3: Screening

The program provides the service only to clients with documented need for in-home assistance.

Compliance 3.1. A worker screens the request for friendly visiting service to make a preliminary decision about eligibility (need for in-home support due to frailty, disability, or other health issues and risk of social isolation).

Note: The program may accept referrals from hospitals, case management agencies and other social service agencies as indicating preliminary eligibility has been determined. In these cases, the worker schedules an in-home visit to collect Intake information.

Compliance 3.2. A worker visits the client in the home to confirm eligibility and obtain Intake information. The worker:

- Collects the information needed to open a case record on the client in NYC Aging's client data system and complete the In-Home Eligibility Intake.
- Collects information about the client's interests, concerns and needs to communicate to the client's visitor(s) and documents discussion in case notes.
- Gives/sends the client a copy of the program's complaint procedures.

Compliance 3.3. If the client needs additional services, the program refers the client to a provider within two weeks and follows up to confirm linkage has been made.

Note: Clients who do not meet in-home eligibility criteria are assisted with referral to the extent possible, and a “service ticket” is completed in NYC Aging’s client data system.

Standard 4: Visiting Schedule and Service Time Period

The program develops a visiting schedule with the client and an effective end date for service provision.

Compliance 4.1. The worker establishes a visiting schedule with the client but visiting occurs no less frequently than once every two weeks.

- The schedule specifies the effective end date for the time period (number of weeks or months) during which service will be provided. *Note: The time period cannot be longer than one year without re-evaluation.*
- The schedule specifies the assigned visitor(s).
- Schedule and time period for service provision are documented in the client’s record.

Standard 5: Re-evaluation of Service Needs

The program re-evaluates the client’s need for the service at the conclusion of the time period specified on the visiting schedule.

Compliance 5.1. The client’s need for the service is re-evaluated at the conclusion of the time period indicated on the visiting schedule.

Compliance 5.2. Continued need is documented, or the service is terminated if need no longer exists.

Standard 6: Service Delivery

Visitors provide companionship and engage in conversation and activities with their assigned clients.

Compliance 6.1. The program makes every effort to ensure visitors and clients are compatible.

Compliance 6.2. The program provides each visitor with information about the client’s needs, circumstances and interests before the first visit.

Compliance 6.3. The program lets the client (or client’s emergency contact) know the name of the visitor before the first scheduled visit.

Compliance 6.4. The program ensures that visitors converse with their clients and regularly bring items such as crafts, games, books, etc., into the home and/or provide limited services such as letter writing, sewing or escort.

Standard 7: Monitoring Client Safety

Visitors monitor clients’ safety and welfare.

Compliance 7.1. Visitors document and report their clients' unmet needs, health problems and other problem situations to their supervisor.

Compliance 7.2. The supervisor follows up as necessary on all reported problems (for example, case management referral; additional services; phone calls to family members; benefits/entitlement assistance).

Compliance 7.3. Client emergencies and other urgent situations are reported and handled immediately.

Staff Appropriateness and Continuity

Standard 8: Staffing

Staffing is appropriate to and adequate for the service.

Compliance 8.1. The number of full and/or part-time personnel (including volunteers) providing this service is sufficient to meet contracted service level.

Compliance 8.2. Volunteers. Volunteers who provide the service:

- Are consistently available.
- Unless known to the program, have been screened and interviewed to establish reliability and interest by the staff person with oversight responsibility for the service.
- Unless known to the program, have provided at least two references.
- Have a visiting schedule on file.
- Have been assigned a supervisor.

Compliance 8.3. The service is overseen by a staff person who has at minimum a BSW degree, or a Bachelor's degree and one year experience in social services provision, or an AA degree and two years social service experience or four years of direct social service experience.

Standard 9: Training and Supervision

The program trains and supervises visitors.

Compliance 9.1. All new Visitors receive documented orientation on topics pertinent to the service they will be providing. Examples include but are not limited to: roles and responsibilities; relationship-building; limit-setting; services and activities that can be performed by the visitor; situations that should be reported to staff; how to "read" clues to a client's needs; confidentiality; response to urgent situations; record keeping.

Compliance 9.2. Visitors have contact with their supervisors at least monthly to discuss their assigned clients.

Standard 10: Information Sharing

The program facilitates information sharing among visitors.

Compliance 10.1. There are demonstrable procedures and communication channels for communicating information about the client to her/his visitors.

- Procedures protect the client's confidentiality while maximizing the ability of each visitor to be helpful.

Service Levels and Reported Units

Standard 11: Budgeted Units

The program provides the number of budgeted units annually.

Compliance 11.1. The program provides the number of units specified in its contract.

Standard 12: Definition of Unit

The correct unit definition is used in documenting service provided to the client.

Compliance 12.1. Units are counted only for completed visit contacts with clients whose need for in-home support is documented in NYC Aging's client data system and who have a visiting schedule. Completed collateral contact with a family member/emergency contact or other concerned individual regarding the client's safety/welfare may be claimed as a unit of case assistance.

Note: One-time or occasional visits by center members (e.g., sunshine, or other goodwill clubs) do not count as Friendly Visiting contacts unless an Intake has already been conducted and the visit(s) is(are) scheduled, or unless the visit results in an Intake and a schedule for visiting.

- Units may be counted for members who are temporarily homebound or hospitalized as long as they result in an Intake and regular schedule.

Compliance 12.2. Units reported as friendly visiting are not also reported as another service – e.g., education/recreation, escort service, etc.

Recordkeeping

Standard 13: Recordkeeping

The program maintains required records.

Compliance 13.1. Client records include:

- Intake information (eligibility for in-home support) in client data system.
- Client's visiting schedule, including estimated timeframe for service provision.
- Date of Service Start.
- Friendly Visiting contacts provided.
- Date(s) of service re-evaluation and documentation of continued need.
- Date of Service termination if client is no longer receiving the service and reason for termination.
- Case notes documenting contacts with program, reports on client needs from visitors, etc.

Compliance 13.2. Visitor records include:

- Name, address, contact information and family and emergency contact(s).
- Record of screening interview and references (particularly for volunteers)
- Record of supervisory contacts

Health Promotion

Scope of Services and Standards of Operation

Introduction

Health Promotion Services are provided in a group setting to promote physical and mental health, aid in the prevention of conditions that negatively impact health and facilitate older adult's ability to manage their own health. They help participants improve or maintain their quality of life and increase their awareness and understanding of healthy lifestyles. Programming can be offered directly by the program (using staff, volunteers or consultants) or through linkages with community partners.

Unit of Service: *One Unit = each participant or attendee of a group session, class, or event. Each group session, class or event is at least 45 minutes in duration.*

Health Promotion services include but are not limited to:

- Physical fitness. Examples include but are not limited to group exercise classes, walking clubs, virtual bowling, dance and movement classes. *One Unit = each participant or attendee of a group session, class, or event.*
- Health management programs. Examples include but are not limited to: blood pressure monitoring; weight management and other support groups; brain exercise/memory enhancement workshops; smoking cessation programs; routine screenings which may include (not limited to) hypertension, glaucoma, cholesterol, vision, hearing, diabetes, bone density, depression and nutrition screening to detect health and mental health problems; flu shots; medications review and management to prevent incorrect medication usage; educational workshops and presentations.

Note: The following are generally prohibited: Diagnostic tests that involve sedatives; invasive procedures that penetrate or break the skin or enter an internal body cavity; medication prescriptions; eye glass prescriptions (See "Invasive Procedures" in the Reference Section for exceptions to this policy.) One Unit = each participant or attendee of a group session, class, or event.

- Evidence-based Health Promotion Programs. The program is expected to provide the number of qualifying evidence-based programs required by NYC Aging. (See "Evidence-based Health Promotion Programming" in the Reference Section for more information.) *One Unit = each participant or attendee of a group session, class, or event. (Virtual delivery of evidence-based programs must follow the programs' guidance and may be subject to prior approval from NYC Aging.)*

Procedures and Methods

Standard 1: Programming

The program provides a robust mix of evidence-based and non-evidence based physical fitness and mental/physical health management sessions to promote participants' health.

Compliance 1.1. Center Programming. Each week the center offers the number of weekly sessions as contracted.

- Sessions include fitness activities and physical/mental health management programs.
- Sessions include the number of EB-1 activities required by NYC Aging.

Compliance 1.2. Additional programming includes:

- Sessions/activities offered in collaboration with health care, academic, or other institutions in the community/City.

- Opportunities for center members to participate in off-site activities that promote health (e.g. gyms, libraries, recreation facilities);
- Enhancements to its nutrition program through linkages/opportunities for members to participate in communal gardening, food co-ops, farmer's markets, etc.
- Activities targeted to health conditions prevalent among participants, as ascertained by the program through surveys or other types of investigation.
- Sessions/activities that encourage collaboration with or participation by neighborhood older adult centers, for example by opening activities to members of neighborhood centers and providing transportation to and from its site; offering joint activities with neighborhood older adult centers; providing sessions at the neighborhood centers.

Compliance 1.3. The center's fitness program is guided by NYC Aging's "Creating an Effective Senior Center Fitness Program: A Guidebook" and EB-1 programs listed on the NCOA website at: <https://ncoa.org/evidence-based-programs>.

Standard 2: Service Agreements

The program has signed Agreements with organizations that provide health screening or vaccination services to participants.

Compliance 2.1. Article 28 or 31 providers. If the provider of screening services is an Article 28 or Article 31 provider (see Reference Section) with a Certificate naming the program as an "extension site" the signed agreement stipulates:

- That the parties are independent contractors with respect to the services to be performed. Each of the parties will be responsible for its own acts and omissions.
- That neither party to the agreement will assume any liability or obligation of the other.
- That the medical service provider will maintain insurance coverage sufficient to cover all liabilities that may be incurred during the term of the agreement.
- That the medical service provider will hold harmless the City of New York, the Department for the Aging and the NYC Aging-funded program against all claims, actions or proceedings arising from the performance of the agreement.

Compliance 2.2. Non-Article 28 or 31 providers (external). If the provider of screening services is not an Article 28 or Article 31 provider with a Certificate naming the program as an "extension site", the provider and the program have a signed Health Screening or Vaccination Agreement (NYC Aging Form). Key provisions of the Agreement include:

- Services are provided free of charge.
- Participants will be informed (either in writing or through lecture) about the nature of the problem(s) the test detects, meaning of results, need to follow-up with their physician if problems are detected, preventive measures where applicable and other pertinent data.
- Participants will be informed individually of their test results when any problem has been detected. Participants may voluntarily elect to reveal to the screening organization their names and addresses to facilitate receiving screening reports in the privacy of their homes. Test results may also be mailed in sealed envelope to each individual in care of the program.
- Participants in need of follow-up will be referred to their own physician or presented with a list of at least three locally qualified providers of the needed services. The list may include the name of the screening organization.
- Medicare, Medicaid or personal insurance information may be requested only for administration of vaccinations.

Standard 3: Disclaimer for Health Screening Participants

Health screening participants sign Disclaimer Forms utilizing the NYC Aging approved forms.

Compliance 3.1. Disclaimers. Each participant in a health screening or vaccination activity conducted by a health services provider signs a Consent and Disclaimer Form (see Forms) holding harmless the program and the City from all claims or actions resulting from the performance of health screening activities. Participants may sign once for a series of the same screening.

Standard 4: Participant Confidentiality

Participant confidentiality is maintained.

Compliance 4.1. The program does not disclose participants' Medicare/Medicaid or personal insurance identification numbers and/or social security numbers to any persons or organizations making presentations or providing screening services.

- Participants are advised that if they are asked for insurance information by the provider performing the screening or activity, they may provide the minimum information necessary to allow the provider to be paid (e.g., name, address, date of birth and Medicare number). They should not be asked for telephone numbers or other personal information.

Compliance 4.2. Providers of screening/examination service comply with all applicable provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

Standard 5: Service Provision

Service provision is non-commercial, non-coercive and free of charge.

Compliance 5.1. The program does not sell, allow to be sold, or endorse, either verbally or in writing, any product or health care service/provider.

- Center staff are not permitted to accept any gifts or gratuities from presenters.

Compliance 5.2. Discretion is exercised in choosing which groups or vendors are permitted to make presentations at the center. Education for the benefit of older adult consumers is the reason for scheduling any presentation. Permission is refused to organizations that appear to be seeking to exploit a captive older adult audience.

Compliance 5.3. When presentations on new insurance options and health/safety or other products are scheduled to assist older adult in making informed decisions, the program encourages competitors to present on their services/products as well.

Compliance 5.4. Participants who wish to participate in a screening service but do not wish to give their Medicare numbers or other identifying information to the screening provider receive the same service as older adults who divulge the requested information.

Service Levels

Standard 6: Contracted Units

The program provides the number of contracted annual service units.

Compliance 6.1. The program provides the number of units specified in its contract.

Standard 7: Unit Definition

The program uses the correct unit definition in documenting the provision of services.

Compliance 7.1. The unit of service for health promotion is each participant (unduplicated) or attendee of a group session, class or event.

Examples:

- 14 enrollees of a 12-week evidence-based program attended all 12 sessions = 168 units
- 100 participants receive flu shots at an Older Adult Center = 100 units
- A health fair for older adults where 150 receive vision screening = 150 units
- A weekly walking program with 5 participants a week = 260 units (52 weeks x 5)
- One diabetes screening event that screened 72 older adults = 72 units
- Screened medications for 90 participants at a medication review event led by local pharmacists = 90 units
- 25 participants attended a “Know Your Numbers” presentation = 25 units

Health Promotion Staff Appropriateness and Continuity

Standard 8: Staff Qualifications

Persons who provide health promotion services have appropriate qualifications.

Compliance 8.1. Health promotion services (education, fitness activities, support groups, screenings, blood pressure monitoring, medications review, etc.) are provided only by persons in the following categories:

- Staff or paid consultants (resumes indicating suitable qualifications are on file, and, where applicable, licensure or certification, references and contracts).
- NYC Aging-trained volunteers.
- Student nurses, medical technicians or others in a New York State approved health sciences training program that supervises activities performed by their trainees.
- Employees of health care organizations that designate the program as a site where they provide community service.
- Professional health care consultants who provide free community service to the program (resumes listing qualifications are on file, including licensure where applicable).
- Employees of government agencies in the performance of their public health responsibilities.
- Employees of organizations or institutions with which NYC Aging has an agreement.

Standard 9: Supervision

All providers of health promotion services are appropriately supervised.

Compliance 9.1. The program’s health promotion services are overseen by the program director or a person who has at minimum a BSW degree, or a Bachelor’s degree and one year experience in health or social service provision,

or an AA degree and two years health or social service experience, or four years of direct health or social service experience.

Compliance 9.2. Persons providing screening/testing or other health-related procedures are directly supervised by center staff or by staff of the institution they represent.

Physical Environment

Standard 10: Physical Environment

Services are provided only in an appropriate setting.

Compliance 10.1. Health screening tests are conducted in spaces that:

- Are sanitary.
- Ensure privacy.
- Can accommodate the scope of the activity – e.g., screeners, participants, equipment and a waiting area if necessary.

Compliance 10.2. Defibrillator:

- The Program has a properly functioning Automated External Defibrillator (AED) on site.
- The AED(s) is/are correctly assembled and properly functioning at all times.
- The program has the necessary up to date supplies and equipment on site. This includes:
 - AED pads and batteries that are current (not past expiration date)
 - A Fast Response Kit with refreshed supplies
- The program monitors the AED(s) and maintains a weekly log indicating the date the device was checked.
- The program has trained staff certified to operate an AED on site at all times that older adults are present.
- Signage
 - There is signage near the main entrance to the center that clearly indicates where the AED is stored and maintained.
 - Signs are posted near the AED with the names of the staff members certified to operate the AED and their contact information.
 - A copy of Site-specific and Maintenance Plan (AED NYC Aging Manual) is available on site.

Documentation

Standard 11: Documentation

The program maintains required documentation.

Compliance 11.1. Health Screening Documentation:

- Signed Agreements with providers of screening services who are not employed by the provider.
- Signed Disclaimer Forms.
- Record of persons referred to a health care provider as the result of screening test administered by a staff person or an outside agency, including confirmation that counseling and referral of participants with abnormal or problematic results occurred.

Reference

Invasive Procedures

An invasive procedure is one that penetrates the skin or enters an internal body cavity. The following are exceptions to NYC Aging's prohibition against invasive procedures:

- Puncture of a finger by an RN, medical technician or other qualified health professional to obtain a sample for blood glucose and other diagnostic tests.
- Administration of flu, pneumonia, COVID or Shingles vaccines by the Department of Health or qualified health care providers or registered pharmacists.
- Other procedures when:
 - The provider has prior written approval from NYC Aging to provide the services.
 - The center is listed as an “extension site” on the certificate of an Article 28 or Article 31 medical provider (See Service Definitions);
 - The provider has received a permit from the New York State Department of Health to run a one-time “health fair”;
 - The provider has registered with the NY State Department of Health as a “limited testing site.”

Examples of non-invasive procedures include: checking blood pressure; hearing and vision checks; mammograms; mental health screening; glaucoma screening; bone density screening; skin cancer screening; body fat analysis; foot examinations.

Disclaimer Form

A Disclaimer Form holds the program and the City harmless from all claims or actions resulting from the performance of a health screening activity by a non-City agency. Every participant in a health screening activity must sign a Disclaimer Form specific to each screening or series of screenings (e.g., Keep on Track blood pressure monitoring involves a series of screenings).

Extension Site of an Article 28 and Article 31 Provider

Medical institutions or clinics licensed by the State of New York to provide services may operate “extension sites” at NYC Aging-funded programs. The program site must be incorporated into and named in the clinic's Article 28 or Article 31 Certificate, which specifies the “extension sites” where the institution or clinic is licensed to provide services.

Extension program operated as Article 31 sites are monitored and regulated by the New York State Office of Mental Health. Article 28 sites are monitored and regulated by the New York State Department of Health.

Health Screening or Vaccination Agreement

The Health Screening or Vaccination Agreement (NYC Aging form) is required of health screening services providers that do not have an Article 31 or Article 28 Certificate covering the NYC Aging-funded program where screening services will be performed.

Evidence-Based Health Programming (EB Programming)

These programs, approved by the Administration on Community Living, are based on scientifically designed research, where there is extensive data analysis and testing in the field to ensure efficacy and ease of replication in various settings. EB programming translates these tested program models and interventions into practical, effective community programs that can provide proven health benefits to participants. For a list of approved EB programs, click on: www.ncoa.org/resources/highest-tier-evidence-based-health-promotion-disease-prevention-programs.

Information and Referral

Scope of Services and Standards of Operation

Introduction

Information and Referral service is the provision of information to older adults and/or their representatives to enable them to locate and obtain needed services, benefits, entitlements and other resources on their own. Referral to appropriate agencies/organizations is part of the service. This service is provided one-on-one. It is delivered in person, by telephone, e-mail or mail, or via video or conferencing services (e.g., Teams or Web-Ex). It does not include assisted referral on behalf of the client or follow-up on a referral, which are Case Assistance activities. Unit of Service: A unit of Information and Referral service is a contact.

Standard 1: Service Provision

The program provides accurate, complete and current information about public services, benefit/entitlements and other resources for older persons.

Compliance 1.1. The program provides information on:

- Eligibility and application requirements for common benefits and entitlements for older adults (e.g., Medicare, Medicaid, SSI, HEAP, SNAP, Reduced Fare).
- Community resources, services and opportunities, including but not limited to NYC Aging-funded service providers, mental health resources, local hospitals and health clinics, transportation resources, providers of legal services for older adults, local social security office, and sources for tax preparation assistance.
- Services available through houses of worship, fraternal organizations, culture-specific social services providers, etc.

Compliance 1.2. The program responds to requests for information in a timely manner. If information provider is not available, the inquirer is given a reasonable time frame within which he/she will be contacted with the appropriate information.

Standard 2: Current and Comprehensive Resources

The program maintains and utilizes current and comprehensive information resources.

Compliance 2.1. The program provides complete, current, and accurate information.

- The program's information on eligibility and application requirements for benefits and entitlements available to older adults is current and comprehensive. Paper resource files may be used, as well as on-line tools such as ACCESSNYC and Benefits Check-UP.
- The program information about resources and services available in its service area is current and comprehensive. It includes but is not limited to resources for: social security and other government program assistance; elder abuse; transportation needs; caregiver services; mental health needs; immigrant services; low or no-cost health maintenance programs; tax preparation assistance; immigrant assistance; food pantries; visiting and telephone reassurance needs; social adult day care; legal services for older persons; training and employment programs; volunteer opportunities; continuing education programs for older adults.
- The program's information on each resource includes the provider organization's name (including common name or acronym, if applicable), address, offices, telephone number, days and hours of operation, eligibility requirements, fees, etc.

Standard 3: Clear Provision of Information

The program provides information in a manner that enables inquirers to obtain the services/resources they need.

Compliance 3.1. Staff/volunteers who provide information and referral:

- Help the inquirer clarify the type of information s/he needs if the person is unsure.
- Provide available language assistance for inquirers, when needed.
- Provide sufficient information (eligibility requirements, name of provider, hours of operation, telephone number or address) and confirm that the inquirer is able to act on his/her own.

Level of Service

Standard 4: Budgeted Units

The program provides its budgeted annual units.

Compliance 4.1. The program provides the number of units specified in its contract.

Compliance 4.2. The program uses the correct unit definition in documenting service provision. A unit of Information and Referral service is a contact.

Note also: Units may not be reported for group presentations or for providing information about an Older Adult Center's hour of operation or schedule of activities.

Information and Referral Staffing

Standard 5: Staffing Levels and Qualifications

Information providers have the skills to conduct the service.

Compliance 5.1. Persons who provide Information and Referral service demonstrate the following:

- Communication skills – e.g., ability to direct the interview and provide clarification when appropriate to help the inquirer communicate his/her information need; ability to determine whether client needs language assistance.
- Knowledge of resources/opportunities available to older adults in their service area.
- Knowledge of entitlement and benefit programs for older adults.
- Ability to use resource files and/or online information and applications (e.g., ACCESS NYC).

Standard 6: Supervision

Information providers receive on-going supervision.

Compliance 6.1. Each information provider receives supervision that includes documented orientation, worker log review, and annual meetings on service standards and available resources.

Documentation

Standard 7: Documentation of Services Provided

The program correctly documents service provision.

Compliance 7.1. The program correctly documents the provision of Information and Referral service in NYC Aging's client data system.

Compliance 7.2. The program maintains monthly logs specifying the date of service, information about the inquirer (phone, address, etc.), the type of information/referral provided, the type of contact, i.e., in person, phone, e-mail, and time spent providing service to each inquirer.

Nutrition Education

Scope of Services and Standards of Operation

Introduction

Nutrition Education is provided through organized and scheduled activities which involve older persons in courses, workshops, other learning activities and satisfying use of free time.

Standard 1: Nutrition Education

The program provides Nutrition Education as contracted.

Compliance 1.1. The center offers the number of annual nutrition education sessions as contracted on topics such as planning nutritious meals, maximizing the use of food dollars, being a wise purchaser, reading food labels, etc. At least six nutrition education sessions must be offered annually.

- Nutrition education sessions may be offered in a classroom format, or as demonstrations, presentations, showing of films, field trips, etc. These presentations must be interactive. Virtual delivery of nutrition education must follow the programs' guidance and may be subject to prior approval from NYC Aging.)
- Nutrition Education (in-person or hybrid) must allow for participants to interact with the presenter and ask questions during the session.
- For each nutrition education presentation, the program keeps on file the sign in sheet, the outline of the presentation, the handout provided, and a copy of the RD card and credentials of the presenter or the person overseeing the presentation.
- Nutrition Education presentations are conducted by or under the direction of a Registered Dietitian. NYC Aging may grant approval for sessions conducted by presenters with nutrition or health degrees who do not meet the above criteria. Requests should be sent to the program's NYC Aging Nutritionist at least two weeks before scheduled session and should include an outline of the proposed presentation and the credentials of the presenter.

Compliance 1.2. Nutrition Education Staffing. Persons providing nutrition education are Registered Dietitians, or nutrition students supervised by a Registered Dietitian. Other licensed or credentialed professionals with knowledge of nutrition may be approved by NYC Aging to provide nutrition education as appropriate to the subject.

Compliance 1.3. Units of Service. The program provides its contracted level of nutrition education units and a minimum of six sessions per year.

Compliance 1.4. Unit Definition The unit of service for nutrition education is one session.

Standard 2: Nutrition Education Documentation

Compliance 2.1. The program maintains the following Nutrition Education documentation:

- Documentation of each nutrition education session, including an outline and a copy of the handout provided.
- Record of attendance at nutrition education sessions.
- Credential of the presenter or person overseeing the presentation.
- Record that NYC Aging Nutrition approved the session, if conducted by a non-Registered Dietitian.

Shopping Assistance

Scope of Services and Standards of Operation

Introduction

Shopping Assistance/Chore Service provides help with shopping needs and/or household chores to older persons who can be safely maintained in their homes with fewer than four hours a week of this service, alone or in combination with other services. Shopping Assistance/Chore Service Unit: each contact with a client for the purpose of providing the service.

Eligibility

Standard 1: Eligibility

The program serves eligible older persons who need shopping assistance and/or chore service.

Compliance 1.1. The program provides the service to persons who meet the following criteria:

- 60 years of age or older.
- Limited ability to leave home due to frailty, disability, or other health issues.
- Few or no informal supports (isolated or at risk for social isolation).

Compliance 1.2. If the program is an *Older Adult Center*, it does outreach to non-center members.

- The program can demonstrate referrals from the community - for example, from social service agencies, hospitals, case management agencies, neighbors, friends and families.
- The program conducts outreach specifically for this service if it is not reaching its target population.

Standard 2: Type of Client

The program provides the service only to clients with documented need for in-home assistance.

Compliance 2.1. A worker conducts an in-person or telephone interview with the client to screen for eligibility and to obtain Intake information.

Compliance 2.2. The worker:

- Determines that the client is eligible for in-home support (limited ability to leave home due to frailty, disability or other health issues and unavailability of informal supports to assist with needs). *Note: The program may accept referrals from hospitals, case management agencies or other social service agencies as indicating client meets eligibility criteria. Clients who do not meet eligibility criteria are assisted with referral needs to the extent possible.*
- Gives or sends the client a copy of the program's complaint procedure.

Compliance 2.3. The worker opens a case record on each client found to be appropriate for shopping assistance or chore service by completing an In-Home Eligibility Intake in NYC Aging's client data system. *Note: The worker may need to first register the client in the system if the client has not been previously registered.*

Compliance 2.4. If the client needs additional services, the program refers the client to a provider within two weeks and follows up to confirm linkage has been made.

Service Provision

Standard 3: Service Provision

The program provides shopping assistance and/or chore services as contracted.

Compliance 3.1. The program provides shopping assistance and/or chore service in its contract or current budget, and in accordance with the following activities.

Compliance 3.2. If providing chore service, the program provides assistance with the following activities, as needed by the client:

- Laundry, light cleaning, dusting, dishwashing, vacuuming and other household tasks.
- Light yard work.
- Running errands.

Compliance 3.3. If providing shopping assistance:

- The program has a written policy on whether shoppers shop for or with clients, or both.
- The program provides shoppers with carfare if needed for the shopping trip. The program does not pay shoppers' travel costs to and from work.

Compliance 3.4. If providing shopping assistance, the program provides assistance with the following activities, as needed by the client (and as pertinent to whether shopping for or with the client):

- Making or reviewing shopping list (items needed) with the client before going to the store.
- Collecting money, check or food stamps from the client in order to make purchase (in accordance with program's policies).
- Shopping with the client (or for the client) for food, medicines or other necessities (program may limit grocery shopping to one store).
- Paying for purchases with the client's money.
- Returning items bought, change, and receipts to the client.
- Reviewing purchased items with the client.
- Assisting with unpacking and putting items away, if necessary.
- Accompanying the older person on the shopping trip.
- Helping to select items while shopping.
- Carrying packages.
- Helping the older person dress in outerwear such as coat, sweater or hat for the trip.
- Helping the older person lock and unlock his/her residence.

Standard 4: Service Schedule

The program develops a service schedule with the client with an effective end date.

Compliance 4.1. The worker establishes a service schedule with the client and specifies the time period during which the service will be provided (effective end date). Note: The time period cannot be longer than one year without re-evaluation.

- Schedule and time period for service provision are documented in the client's record.

Standard 5: Re-evaluating Client Need

The program re-evaluates the client's need for the service at the effective end date of the service schedule.

Compliance 5.1. The client's need for the service is re-evaluated at the conclusion of the time period specified on the service schedule (effective end date)

Compliance 5.2. Continued need is documented, and a new effective end date established, or the service is terminated if need no longer exists.

Standard 6: Safety and Follow-up

Workers monitor clients' safety and welfare.

Compliance 6.1. Workers document and report their clients' unmet needs, health problems and other problem situations to their supervisor.

Compliance 6.2. The supervisor follows up as necessary on all reported problems (for example, referral to a case management agency for additional services; entitlements/benefits assistance; phone calls to family members).

Compliance 6.3. Client emergencies and other urgent situations are reported and handled immediately.

Level of Service

Standard 7: Budgeted Units

The program provides the number of budgeted units annually.

Compliance 7.1. The program provides the number of units specified in its contract.

Standard 8: Unit Definitions

The correct unit definition is used in documenting service provided to the client.

Compliance 8.1. Units are counted only for completed shopping and/or chore contacts with clients whose need for in-home support is documented in NYC Aging's client data system and who have a service schedule.

- Completed collateral contact with a family member/emergency contact or other concerned individual regarding the client's safety/welfare may also be counted as a unit.

Note: A one-time visit by a center member (e.g., members of sunshine or other goodwill clubs) to assist a fellow center member who is temporarily unable to shop or do chores does not count as a unit. Occasional visits do not count unless the client's eligibility for the service (in-home support need due to limited ability to shop or do chores, informal supports are not available to provide the service as needed, and a service schedule is noted in the client's record).

Compliance 8.2. Units reported as shopping assistance/chore are not also reported as another service – e.g., housekeeping/chore, escort service, etc.

Shopping Assistance Staffing

Standard 9: Staffing Levels and Qualifications

Staffing is appropriate to and adequate for the service.

Compliance 9.1. The number of full and/or part-time personnel (including volunteers) providing this service is sufficient to meet contracted service level.

Compliance 9.2. Volunteers. Volunteers who provide the service:

- Are consistently available.
- Unless known to the program, have been screened and interviewed to establish reliability and interest by the staff person with oversight responsibility for the service.
- Unless known to the program, have provided at least two references.
- Have a visiting schedule on file.
- Have been assigned a supervisor.

Compliance 9.3. The service is overseen by a staff person who has at minimum a BSW degree, or a Bachelor's degree and one year experience in social services provision or an AA degree and two years social service experience or four years of direct social service experience.

Standard 10: Supervision

Staffing is appropriate to and adequate for the service.

Compliance 10.1. All new workers receive documented orientation on topics pertinent to the service they will be providing. Examples include but are not limited to: program policies; roles and responsibilities; relationship-building; limit-setting; money management; services and activities that can be performed by the worker; situations that should be reported to staff; how to "read" clues to a client's needs; confidentiality; response to urgent situations; record keeping.

Compliance 10.2. Staff have contact with their supervisors at least monthly to discuss their assigned clients.

Recordkeeping

Standard 11: Client and Staff Records

The program maintains required records.

Compliance 11.1. Client record

- Intake information (eligibility for in-home support) in client data system.
- Client's service schedule, including estimated time period in effect.
- Date of Service Start.
- Shopping or Chore contacts provided.
- Date(s) of service re-evaluation and documentation of continued need.
- Date of Service termination if client is no longer receiving the service and reason for termination.
- Case notes documenting contacts with program, reports on client needs from visitors, etc.

Compliance 11.2. Staff Records

- Name, address, contact information and family and emergency contact(s).
- Record of screening interview and references (particularly for volunteers).
- Record of supervisory contacts.

Telephone Reassurance

Scope of Services and Standards of Operation

Introduction

Telephone Reassurance is a scheduled calling service provided on a regular basis to older persons in their homes to (1) help reduce isolation, and (2) monitor the older person's safety, well-being and need for additional services. Telephone Reassurance is not a one-time service.

Unit of Service: Each contact with a client with documented need for this service.

Standard 1: Eligibility

The program serves eligible older persons who need telephone reassurance.

Compliance 1.1. The program provides the service to persons who meet the following criteria:

- 60 years of age or older.
- Limited ability to leave home due to frailty, disability or other health issues. Note: inability may be temporary, e.g., Older Adult Center member who meets the criteria.
- Few or no informal supports or opportunities for socialization (isolated or at risk for social isolation)

Standard 2: Adherence to Target Population and Target Areas

The program conducts outreach to the target population.

Compliance 2.1. If the program is an *Older Adult Center*, it does outreach to non-center members.

- The program can demonstrate referrals from the community - for example, from social service agencies, hospitals, case management agencies, neighbors, friends, and families.
- The program conducts outreach specifically for this service if it is not reaching its target population.

Procedures and Methods

Standard 3: Screening

The program provides the service only to clients with documented need for in-home assistance.

Compliance 3.1. A worker conducts a phone or in-person interview with the client to screen for eligibility and to obtain Intake information.

Compliance 3.2. The worker:

- Determines that the client is eligible for in-home support in the form of Telephone Reassurance (limited ability to leave home due to frailty, disability or other health issues, and risk of social isolation). Note: The program may accept referrals from hospitals, case management agencies and other social service agencies as indication that the client meets eligibility criteria).
- Collects information about the client's interests, concerns and needs to facilitate the client's interactions with the caller (documented in case notes).
- Gives/sends the client a copy of the program's complaint procedure.

Compliance 3.3. The worker opens a case record on each client who has been found to be appropriate for telephone reassurance by completed an In-Home Eligibility Intake in NYC Aging's client data system. *Note: The program may need to first register the client in the system if the client has not been previously registered.*

Compliance 3.4. If the client needs additional services, the program refers the client to a provider within two weeks and follows up to confirm linkage has been made.

Standard 4: Calling Schedule

The program develops a calling schedule with the client and an effective end date for service provision.

Compliance 4.1. The worker establishes a calling schedule with the client, but no less frequently than once every two weeks.

- The schedule specifies the end date of the time period (number of weeks or months) during which service will be needed. *Note: The time period cannot be longer than one year without re-evaluation.*
- The schedule specifies the assigned caller(s) and time of day when calls will be made.
- Schedule and time period for service provision are documented in the client's record.

Standard 5: Re-evaluation of Service Needs

The program re-evaluates the client's need for the service at the conclusion of the time period specified on the calling schedule.

Compliance 5.1. The client's need for the service is re-evaluated at the conclusion of the time period specified on the calling schedule.

Compliance 5.2. Continued need is documented, or the service is terminated if need no longer exists.

Standard 6: Service Delivery

Callers provide reassurance and support to their assigned clients.

Compliance 6.1. The program makes every effort to ensure callers and clients are compatible.

Compliance 6.2. The program provides each caller with information about the client's needs, circumstances and interests before service start.

Compliance 6.3. The program lets the client (or client's emergency contact) know the name of the caller before service starts.

Compliance 6.4. Callers inquire about and follow-up on client concerns and interests.

Standard 7: Monitoring Client Safety

Callers monitor clients' safety and welfare.

Compliance 7.1. Callers document their clients' reported needs, health problems or other problem situations for review with their supervisor(s).

Compliance 7.2. The supervisor follows up expeditiously on all reported problems (for example, case management referral; additional services need; phone calls to family members).

Compliance 7.3. Client emergencies and other urgent situations are reported and handled immediately.

Telephone Reassurance Staff Appropriateness and Continuity

Standard 8: Staffing

Staffing is appropriate to and adequate for the service.

Compliance 8.1. The program is sufficiently staffed (including volunteers) to provide contracted program levels.

Compliance 8.2. Volunteers. Volunteers who provide the service:

- Are consistently available.
- Unless known to the program, have been screened and interviewed to establish reliability and interest by the staff person with oversight responsibility for the service.
- Unless known to the program, have provided two references.
- Have a calling schedule on file.
- Have been assigned a supervisor.

Compliance 8.3. The service is overseen by a staff person who has at minimum a BSW degree, or a Bachelor's degree and one year experience in social services provision or an AA degree and two years social service experience or four years of direct social service experience.

Standard 9: Training and Supervision

The program trains and supervises callers.

Compliance 9.1. All new callers receive documented orientation on topics pertinent to the service they will be providing. Examples include but are not limited to: roles and responsibilities; relationship-building; limit-setting; services and activities that can be performed by the caller; response to urgent situations; record keeping.

Compliance 9.2. Callers have contact with their supervisors at least monthly to discuss their assigned clients.

Standard 10: Information Sharing

The program facilitates information sharing among callers.

Compliance 10.1. There are demonstrable procedures and communication channels for communicating information about the client to her/his callers.

- Procedures protect the client's confidentiality while maximizing the ability of each visitor to be helpful.

Service Levels and Reported Units

Standard 11: Budgeted Units

The program provides the number of budgeted units annually.

Compliance 11.1. The program provides the number of units specified in its contract.

Standard 12: Definition of Units

The program uses the correct unit definition in documenting service provided to the client.

Compliance 12.1. Units are counted only for:

- Completed telephone contacts with clients whose need for in-home support is documented in NYC Aging's client data system and who have a calling schedule.
- Exception: Units may also be counted for one-time/occasional contacts with Older Adult Center members whose absence has caused concern (e.g., frail usual attendee who needs monitoring; absence of more than one week by someone who attends regularly; member who is recovering from a serious illness). The program enters a "need for service" note in client's record in NYC Aging's client data system.
- Completed collateral contacts with a family member/emergency contact regarding client's safety/welfare may be counted as either case assistance or information.

Compliance 12.2. Units reported as telephone reassurance are not also reported as another service – e.g., education/recreation, case assistance, etc.

Recordkeeping

Standard 13: Budgeted Units

The program maintains required records.

Compliance 13.1. Client records include:

- Intake information (eligibility for in-home support) in client data system.
- Client's calling schedule, including estimated timeframe for service provision.
- Date of Service Start.
- Telephone Reassurance contacts provided.
- Date(s) of service re-evaluation and documentation of continued need.
- Date of Service termination if client is no longer receiving the service and reason for termination.
- Documentation of any contacts between client and supervisor/coordinator.

Compliance 13.2. Caller records include:

- Name, address, contact information and family and emergency contact(s).
- Record of screening interview and references (particularly for volunteers).
- Record of supervisory contacts.

Social Adult Day

Scope of Services and Standards of Operation

Introduction

The Social Adult Day Service program for the social model is a structured, comprehensive program providing functionally impaired individuals with socialization, supervision and monitoring, personal care and nutrition in a protective setting during any part of the day, but for less than a 24-hour period. Older Adult Centers that provide Social Adult Day Services must meet the New York State Office for the Aging (NYSOFA) Regulations 6654.20; the administrative code of the City of New York Local Law 9 of 2015 (Section 21, Chapter 2, Title 21).

Section 1. Scope of Services

Standard 1. Eligibility

Compliance 1.1. Individuals meet the following eligibility requirement:

- Is 60 years of age or older and has a functional impairment - needing the assistance of another person in at least one of the following activities of daily living: toileting (including incontinence care), mobility, transferring, eating; or
- Needs supervision due to cognitive and/or psycho-social impairment; and
- Will benefit from participation in the program.

Compliance 1.2. Participants are eligible for services only on days not covered by the participant's insurance.

Note: The program must discuss any concerns or questions about a participant's eligibility with NYC Aging.

Standard 2. Target Population

Preference will be given to older individuals with the greatest economic or social needs with particular attention to specifically identified targeted groups.

Compliance 2.1. The program targets persons who are:

- Minorities – persons of Black, Hispanic, Asian, Native American (American Indian), Alaska Native, Native Hawaiian or Other Pacific Islander origins. Persons who identify as 2 or More Races or who identify as other than White may be included.
- Low-Income – incomes at or below 150% of the Federal Poverty Level.
- Frail – Has one or more functional deficits in physical or mental functions.
- Vulnerable – Socially or linguistically isolated, or affected by other conditions including the following:
 - Limited English Proficiency (LEP);
 - Persons with disabilities;
 - At risk of institutionalization;
 - Lesbian, gay, bisexual, transgender (LGBT) older adults;
 - Low literacy;
 - Homebound; and,
 - Alzheimer's or other Dementia.

Standard 3. Admission and Discharge

Admission and discharge procedures for participants are clear and appropriate.

Compliance 3.1. The program admits individuals only after completing an assessment of their functional capacities and impairments.

Compliance 3.2. If the referral is from a NYC Aging-funded caregiver or case management program and the participant has a Compass assessment or other NYC Aging authorized tools on file, this can be accepted as documentation of qualification. (See Standard 17 on Documentation.)

Compliance 3.3. The program obtains a signed NYC Aging Release of Information within ten days of initial assessment, and annually thereafter.

Compliance 3.4. The program shares participant information only with consent, and only (1) when pertinent to service provision, or (2) when requested by authorized agency personnel and/or government representatives in connection with program monitoring.

Compliance 3.5. The program may designate a trial period to determine whether the potential participant is suitable for the program/meets the program's criteria for admission and to allow new participants time to adjust to the program. The designated trial period may not exceed five program days.

Compliance 3.6. The program serves only individuals whose adult day needs can be met and managed by the program.

Compliance 3.7. The program discharges, and if appropriate, assists in making other arrangements for participants who can no longer be safely or adequately served by the program.

Compliance 3.8. The program documents specific reason for discharge in the case notes.

Compliance 3.9. The program has a process for participants to appeal decisions regarding discharge or discontinuation of services and informs participants of their right to appeal. The program informs the participant and/or caregiver that requests for appeal must be submitted to program director for review and discussion.

Standard 4. Service Plan, Care Plan, and Goals

All NYC Aging-funded participants must have current Service Plan, Care Plan, and Goals.

Compliance 4.1. Initial Service Plan, Care Plan, and Goals. The program develops initial Plans and Goals are no later than 30 days after the participant is admitted to the program.

Compliance 4.2. Participants consent to their Service Plan, Care Plan, and Goals. Individualized SADS Plans and Goals are discussed with participants and/or caregivers, and their input solicited where possible.

Compliance 4.3. Case Monitoring, Service Plan, Care Plan, and Goals Form. Utilizing the NYC Aging client data system to document care plan, level of care service plan, and goals, the program specifies:

- The personal care services that will be provided by the program based on assessed needs,
- Expected participant outcomes,
- Planned interventions to promote outcome achievement, and
- Planned number of days/week.

Compliance 4.4. Re-evaluation. Social Adult Day Care Plan and Goals are re-evaluated and updated every six months, at minimum. Updated care plans, service plans, and goals are maintained in NYC Aging's client data system. Reasons for changes in plans and goals are documented in the case notes.

- Compensate for existing or developing impairments in capacities.

Standard 5. Participant Status

Participant status is regularly monitored.

Compliance 5.1. Significant changes in participant status or condition (e.g., changes in functional or mental ability, social and environmental support, housing situation or health status) are documented in case notes.

Compliance 5.2. When changes in a participant's status or condition require new interventions by program staff, the SADS Service Plan is updated to reflect the new needs.

Compliance 5.3. The program has an established system for regularly scheduled communication among staff/volunteers to ensure that all staff have up-to-date information about participants' status.

Standard 6. Types of Programming

The program provides a variety of activities for participants consistent with the needs of participants.

Compliance 6.1. The program offers planned and organized group/individual and person-centered activities.

Compliance 6.2. The activities offered emphasize the client's strengths and abilities.

Compliance 6.3. The program encourages each individual to participate at his/her optimal level of functioning and to progress accordingly at his/her own pace. Participants are encouraged to take part in activities but may choose not to do so.

Compliance 6.4. Participants are encouraged to interact with others during group activities, and to respect themselves and others.

Required Services

Standard 7. Socialization

The program provides socialization as a core service component, consistent with the needs of the participants.

Compliance 7.1. The program provides opportunities for socialization if the participant is socially ready.

Standard 8. Supervision and Monitoring

The program provides supervision and monitoring as a core service component, consistent with the needs of the participants.

Compliance 8.1. Service staff and/or volunteers are observant of each participant's whereabouts, activities, and current needs while in attendance at the program.

Compliance 8.2. Service staff and/or volunteers provide ongoing direction, verbal or visual cueing, reassurance, encouragement, and assistance to each participant, as needed.

Compliance 8.3. Service staff intervene when participants cannot communicate their personal needs, are disruptive, or are at risk for wandering or danger to self or others.

Standard 9. Personal Care

The program provides cueing and personal care assistance as a core service component.

Compliance 9.1. The program provides supervision, cueing and some personal care assistance for all of the following ADLs: toileting, mobility, transfer and eating.

- When necessary, participants are reminded about medication.

Compliance 9.2. The program offers NYC Aging-funded participants additional optional service components as outlined in their contract. Additional optional service components may include, but are not limited to, the following:

- Maximal assistance with toileting, mobility, transfer, and eating;
- Some or total assistance with dressing, bathing, or grooming;
- Routine skin care;
- Changing simple dressings;
- Using supplies and/or adaptive equipment.

Standard 10. Nutrition

Nutrition is a core service component of the SADC program.

Compliance 10.1. At least one nutritious meal is provided to NYC Aging-funded participants during the program day. Additional meals are provided depending on the program hours and the length of the program day.

Compliance 10.2. All meals served meet 1/3 dietary reference intakes (DRI) (and are consistent with the standards for a NYC Aging congregate meal. Meals provided by the program are consistent with the standards set forth in the NYSOFA regulations, New York City Food Standards and the Dietary Guidelines for Americans unless meals are brought by the participant, or the program participates in the USDA Child and Adult Care Food Program.

Compliance 10.3. If meals are purchased from another source, the Social Adult Day Service follows all NYC Aging standards regarding receipt of catered meals. The program monitors:

- Arrival of food at the agreed upon time.
- Agreed upon number/quantity of food items.
- Safe and appropriate meal packaging.
- Arrival of food at required temperatures. (Food is quickly reheated if not at required temperature, caterer is notified, and notification is documented.)
- Matching of food to approved menu.

Compliance 10.4. Nutritious snacks and liquids are offered to participants at appropriate times.

Standard 11. Transportation

Transportation is offered to all NYC Aging-funded participants as a core service component.

Compliance 11.1. Round-trip transportation is offered to all NYC Aging-funded participants. If a participant makes their own arrangements for transportation, this is documented in the participant's file.

Compliance 11.2. If group transportation is provided directly or is purchased from another provider, the SADS program ensures each vehicle has a suitable escort, (in addition to the driver) on board to assist participants.

Compliance 11.3. Each one-way trip within a borough does not exceed one hour, and each one-way interborough trip does not exceed 90 minutes.

Compliance 11.4. If the program provides transportation directly, drivers and vehicles meet all applicable safety standards.

Vehicle Safety and Maintenance

- Vehicles are equipped with working fire extinguishers.
- Each vehicle is equipped with a first aid kit.
- Seat belts are in good working order.
- Regular maintenance and safety checks are scheduled. Vehicles are also inspected regularly by the transportation coordinator or a qualified supervisor to identify safety, comfort and accessibility issues.
- Vehicles are inspected by a state certified vehicle inspection station annually.
- Vehicles are registered annually.
- Repairs are timely.
- Wheelchair lifts and other equipment on the vehicle are maintained in working condition.

Insurance

- The program maintains vehicle insurance from a company licensed or authorized to do business in the State of New York.
- Coverage protects against all liability for bodily injury, death, personal injury and property damage in an amount not less than one million dollars (\$1,000,000) per occurrence and two million dollars (\$2,000,000) in aggregate as well as physical damage collision and comprehensive coverage (\$250 deductible) required for all vehicles with less than 35,000 miles and/or less than three years old.)

Section 2. Staffing

Standard 12. Staff Qualification

Staff and volunteers are appropriately qualified.

Compliance 12.1. Each staff person and volunteer have a written job description that specifies duties, qualifications, and training to be provided.

Compliance 12.2. Staff members have the qualifications detailed in the New York Codes, Rules and Regulations (*See Attachment B*)

Compliance 12.3. All potential employees undergo a criminal background check.

Compliance 12.4. Reference checks are conducted for all potential employees and volunteers.

Compliance 12.5. Prior to assignment, all staff and volunteers who help with meals/snacks service, or assist participants one-on-one (e.g. with personal care, SADS Service Plan implementation, etc.) must present on an annual basis, a physician's written statement that they are free from any health impairment that is of potential risk to others, or that may interfere with the performance of their duties.

- Prior to assignment, and no less than every two years thereafter for negative findings, each staff person or volunteer who handles food or assists participants one-on-one has a PPD (Mantoux) skin test for tuberculosis. If there is a positive finding, the staff must provide a letter of clearance from his/her doctor.

- Food preparation staff meet any additional health requirements listed in NYC Aging's Older Adult Center Meal Program Standards.
- When workers or volunteers are assigned under the auspices of another organization, it is sufficient to have on file an agreement signed by both parties that the outside organization assumes responsibility for meeting these requirements.

Compliance 12.6. Director. Each program has a paid director with the skills, knowledge, and experience necessary to ensure that activities and services are provided appropriately and in accordance with participants' needs. The Director meets the specific qualifications described in the New York Codes, Rules and Regulations. (See NYCRR Title 9 Subtitle Y Chapter II Section 6654.20)

Compliance 12.7. Driver. Drivers hired by the program meet all the following requirements.

Qualifications:

- Three years of licensed driving experience (documented on application form).
- No convictions for driving while intoxicated or driving while impaired by drugs during the past two years.
- No more than one moving violation within the past two years.

Driver's license requirements:

- Class D or Class E: Small van (18,000 pounds or less/adult seating capacity up to 14 including driver).
- Commercial Driver's license C with a passenger endorsement: Van (26,000 pounds or less/adult seating capacity of 15 or more).
- Commercial Driver's License B with a passenger endorsement: Bus (26,001 pounds or more/adult seating capacity of 15 or more).

Standard 13. Staff Training

Staff and volunteers are appropriately oriented and trained.

Compliance 13.1. Orientation. All new service staff, including volunteers, drivers, food service staff, and transportation escorts, complete a brief introduction to the following topics, at minimum:

- Orientation to the aging Process
- Orientation to Personal Care Skills
- Body Mechanics
- Behavior Management
- Any topics listed in the NYSOFA SADS regulations.

Compliance 13.2. 20-Hours Training. All new service staff who work directly with participants complete twenty hours of group, individual and/or on-the-job training for new staff, including orientation.

Compliance 13.3. Written Training Plan for Staff. The program has a written training plan for each new staff, which includes the orientation, initial 20 hours training, and annual six- hour in-service training.

Compliance 13.4. Written Plan for Orientation and 20-Hours Training. For orientation and the 20-hours training, the written plan includes an outline of training topics, a description of how the training will be provided (e.g. individual in-service, group), the names of persons or organizations who will provide the training, and dates of training, if possible.

Compliance 13.5. 20-Hours Training Requirements. 20-hours training are:

- Completed within three months of hire.

- Directed by a registered licensed nurse, social worker, and/or other appropriately US licensed or certified professional with at least a bachelor's degree or four years professional experience in an area related to the topic that they are teaching;
- Documented in individual personnel files (date of training, person providing the training, specific content of training, sign-in sheet, or other proof of attendance).

Compliance 13.6. 20-Hours Training Content. The 20-hours training covers:

- How to promote socialization
- Supervision and monitoring
- Personal Care Skills, taught by a registered nurse (at least 8 of the 20 hours)
- The family and family relationships
- Mental illness and behavioral health
- Cardiopulmonary Resuscitation (CPR)
- Any additional elements as needed based on program needs.

Compliance 13.7. Six-Hour In-Service Training. All staff receive six hours of in-service training annually to develop, review, or expand skills or knowledge (date of in-service training, content, and documentation of attendance are maintained in personnel files).

Compliance 13.8. Periodic On-The-Job Training. All service staff, including volunteers, receive periodic on-the job training, as considered necessary by the program director or supervisor.

Compliance 13.9. Volunteers. Volunteers who have only limited contact with participants (e.g. provide assistance to an instructor or group leader only; perform all tasks under direct supervision; volunteer only one day a week for a short period of time; volunteer for one activity only) receive training appropriate to the tasks they perform. Such training is to be determined by the program director and indicated in their job descriptions.

Compliance 13.10. Transportation escorts. Transportation escorts (who may be volunteers) receive training on how to assist with mobility. They are not required to have full personal care training.

Compliance 13.11. Drivers. Drivers should receive training appropriate to the tasks they perform. They are not required to have full personal care training.

Compliance 13.12. Food Service Staff. Food service staff receive any additional training required (see *NYC Aging Older Adult Center Meals Standards*), and are required to have the necessary certifications as per Article 81 of the NYC Health Code: Food Preparation and Food Establishments.

Standard 14. Staffing Ratio

The program has an adequate number of qualified staff to provide all core service components.

Compliance 14.1. The program maintains a Direct Service Staff to Participant ratio of at least 1:7. In dementia specific programs, the ratio is 1:5. (Note: *This ratio includes only staff that directly supervise participants during program activities. It does not include volunteers, or participant's home care workers. It does not include drivers unless they assist with supervision and socialization at the program site.*)

Compliance 14.2. Programs which share physical space with other non-adult day service programs (e.g., senior centers) have their own staff, with hours that are committed to the Social Adult Day Service program.

Section 3: Administration

Standard 15. Policies and Procedures

The program's policies and procedures are in writing.

Compliance 15.1. Written program policies and procedures are available, covering at a minimum:

- Participant eligibility.
- Program description – program philosophy, days and hours open, types of service available.
- Target population/admission procedures.
- Service planning procedures.
- System for inter-staff communication management.
- System for communication with referring agencies.
- Program expectations of caregivers/family.
- Admission and Discharge policies.
- Staffing plan, including paid and volunteer staff.
- Medications policy.
- Confidentiality and privacy policies and procedures.
- Incident reporting. (See Attachment A)
- Emergency management. (See Standard 21)
- Grievance procedures and appeals process.
- Back-up transportation procedures.
- Participants' Rights.
- Client Release/Service Agreement.

Compliance 15.2. The program's admissions and discharge policies detail its capacity to meet the needs of participants who need some or total assistance with any of the following ADLs: dressing; bathing; grooming; prompting regarding medication/routine skin care; changing simple dressings; using supplies and adaptive and assistive equipment.

Compliance 15.3. The program treats all information as confidential and does not disclose or release information except as authorized by participant, Federal or State laws and regulations, or pursuant to court order. (Upon request, the program releases client information not included in client data system to funding source for case review.)

Compliance 15.4. The Program conducts an annual self-evaluation of its administrative, fiscal, and program operations, including feedback from participants and caregivers using the NYSOFA SADS Self-Monitoring Tool. (See tool at: <https://aging.ny.gov/system/files/documents/2019/11/guide-sads-self-monitoring-.pdf>) The evaluation is due by the end of the third quarter of each fiscal year.

Compliance 15.5. The Program maintains a copy of the NYSOFA SADS Self-Monitoring Tool on file for review by NYC Aging.

Compliance 15.6. The program provides opportunities for regular input from participants and demonstrates that feedback is considered.

Compliance 15.7. At least annually, the program conducts a client satisfaction survey and submits results of survey to NYC Aging.

Standard 16. Documentation and Recordkeeping

The program maintains administrative and financial records on file.

Compliance 16.1. Daily attendance records are maintained for each NYC Aging-funded participant, indicating the number of hours in attendance.

- The program utilizes the NYC Aging Social Adult Day Services Program Attendance record to record attendance.
- The funding source for service days is indicated on the participant attendance record.

Compliance 16.2. A unit of Social Adult Day Service is counted for each hour the participant attends the length of the contracted program day. Social Adult Day Service unit is 1 unit = 1 hour.

- Transportation time is not included in the length of the program day.

Compliance 16.3. SADS services, such as meals provided by a senior center, are not to be reported under the SADS contract. Transportation, and activities provided to NYC Aging-funded participants are not to be reported as service units under any other contract.

Compliance 16.4. The number of units is consistent with the scope of the contract.

Compliance 16.5. If meals are provided on site, relevant documentation regarding worker health, safety, and menu planning is on file for the program. See NYC Aging Congregate Lunch Standards.

Compliance 16.6. If meals are purchased from another provider, relevant documentation, including a NYC Aging Catering Agreement, is on file. See NYC Aging Congregate Lunch Standards.

Compliance 16.7. Each participant's electronic file includes the following:

- The most recent Referral Form or Assessment Form from the Case Management Agency/ Caregiver Program dated within the last 12 months, if applicable.
- The most recent SADS Service Plan (dated within the last 12 months).
- Case notes which document any significant changes in participant status.
- Intake and Assessments.
- Incident reports. (See Attachment A)
- Monitoring documents.
- Summary of participant activities.
- MLTC Care Plan and other insurance coverage details, including days for which services for NYC Aging-funded participants are authorized (if applicable).

Compliance 16.8. Personnel Files. Each personnel file includes the following:

- Job description.
- Orientation. (See Standard 17)
- Training and proof of attendance (e.g. sign-in sheet). (See Standard 17)
- Physician's statement dated within the past year, if required.
- Results of PPD (Mantoux) test, if required. (See Compliance 16.4)
- Any additional documentation required, such as background checks, references, etc.

Standard 17. Fees

The program charges fees under the appropriate circumstances.

Compliance 17.1. The program charges NYC Aging-funded participants fees under the following circumstances only:

- The participant wishes to attend the program for a greater number of hours than designated in the program's contract. The program may charge fees for additional hours of attendance.
- Ancillary service not included in the NYC Aging SADS services, e.g. bathing, grooming, additional meals.

Standard 18. Office of the Ombudsperson (Ombuds Office)

The program adheres to standards and requirements set forth by the Ombuds Office, in accordance with the provisions of Local Law 9 of 2015 as summarized below. (<https://www1.nyc.gov/assets/NYC Aging/downloads/pdf/community/2015SADCLocalLaw9.pdf>)

Compliance 18.1. Social Adult Day Service Registration. The program must be registered with NYC Aging Ombuds Office. (<https://www1.nyc.gov/site/NYC Aging/community-partners/social-adult-day-care.page>)

- Registration includes the registrant's name, address, corporate structure and ownership, and any other information required by NYC Aging;
- Registration is filed online through the NYC Aging Ombuds Office Registration Portal; and
- Changes to registration information must be submitted to the Ombuds Office via the online Registration Portal no later than the effective date of such change.

Compliance 18.2. Signage. The Program prominently posts a sign onsite, which includes contact information for the Ombudsperson, and a statement that any individual may contact the Ombudsperson with a comment or complaint, regarding any Social Adult Day Service within New York City. (See Attachment C)

Compliance 18.3. Responding to investigations. The program provides a written response to violation issued by the Ombuds Office stating how the violation will be addressed. (See rules at: https://rules.cityofnewyork.us/sites/default/files/adopted_rules_pdf/social_adult_day_care_-_final_rule-12_30_19_-_legal_10482634.pdf)

Standard 19. Participants' Rights

Compliance 19.1. The Program protects and promotes the participants' rights. (See NYCRR Title 9 Subtitle Y Chapter II Section 6654.20)

Compliance 19.2. The Program provides a copy of the "Participants' Rights and an explanation of rights to the participants and/or caregivers at the time of admission.

Compliance 19.3. The Program post participants' rights as well as contact information for NYC Aging in a public place clearly visible to participants, families and program staff.

Compliance 19.4. The Participants' Rights are posted in the languages most frequently spoken by seniors in the community and provided to participants in their preferred language.

Section 4. Physical Environment and Safety

Standard 20. Physical Environment

The Social Adult Day Service program is conducted in a safe and appropriate environment.

Compliance 20.1. The program site complies with the Americans with Disabilities Act of 1990 and all subsequent amendments.

Compliance 20.2. If the program shares space with other programs/services, there is space dedicated to SADS participants. Staff and participants clearly understand the location and size of the dedicated space.

Compliance 20.3. The program's site is welcoming, clean, and appropriate for participants.

Standard 21. Incident and Accident Recording and Reporting

The program has written procedures for incident and accident recording and reporting.

Compliance 21.1. The program uses NYC Aging's Incident/Accident Report Form to record and report incidents and accidents. (See Attachment A)

Compliance 21.2. The Program submits an Incident/Accident Report Form to NYC Aging no later than three business days from the date of the accident or incident.

Compliance 21.3. Upon request, the program provides additional details about information in the report.

Older Adult Center Virtual Activities

Scope of Services and Standards of Operation

Introduction

Older Adult Center (OAC) Programming can be offered virtually or hybrid (virtual and in-person). Programs must adhere to NYC Aging's requirements for virtual or hybrid programming.

Scope

Standard 1: Virtual and Hybrid Programming Provision

The program provides virtual or a combination of virtual and in-person (hybrid) programming, as allowable by NYC Aging.

Compliance 1.1. The program does not replace in-person programming with virtual programming.

Compliance 1.2. Virtual and Hybrid activities are interactive and must allow for all members participating either in-person or virtually to ask questions of the leader and/or participate in discussions.

Compliance 1.3. Fully virtual programs are allowed only when the OAC site is not open:

- Before or after closing hours or on weekends.
- Due to weather conditions or facility issues.

Compliance 1.4. Hybrid programs (virtual and in-person attendees) are allowed at all times.

- Each hybrid group activity has a leader (staff, volunteer, sub-contractor) that teaches or leads the activity in-person at the site where members are in-person and on camera.

Standard 2: Planned Activities

Activities are planned, structured, and organized.

Compliance 2.1. Each activity has a planned beginning and ending time.

Compliance 2.2. Each group activity is at least 45 minutes in duration.

Compliance 2.3. A current calendar or schedule is posted, at least one day before the activity is scheduled to occur that clearly shows:

- Each activity and the name of the activity;
- Whether the activity will be held in-person, virtually, or through a hybrid of both; and
- How members can access the hybrid or virtual session.

Compliance 2.4. Each hybrid group activity must have a leader (staff, volunteer, or consultant) that teaches or leads the activity in person at the site where members are participating in-person.

Compliance 2.5. Each fully virtual group activity must have a leader (staff, volunteer, or sub-contractor) that teaches or leads the activity and is also virtual.

Compliance 2.6. Instructors/leaders are appropriately qualified for the activity they are leading.

Compliance 2.7. If a virtual or hybrid program must be cancelled, every effort must be made to replace the event with a substitute, or to notify attendees of the cancellation.

Compliance 2.8. All virtual or hybrid sessions must have an attendance of at least five individuals.

Compliance 2.9. All participants, participating virtually in an exercise program must have their cameras on and be visible to ensure their safety.

Compliance 2.10. Virtual exercise programs must be limited to 12 participants to ensure their safety.

Compliance 2.11. A staff member joins all fully virtual activities to ensure the program is running properly and to ensure attendance is taken.

Standard 3: Participation

Virtual or hybrid activities are open to any member who wishes to participate.

Compliance 3.1. Eligible persons may participate in any activity on the program's schedule within the limits of space (e.g., room limitation, virtual space), or specific proficiency requirements.

Standard 4: Publicizing Activities

The program publicizes its hybrid and virtual activities in the community.

Compliance 4.1. The center's promotional activities in the community include information about the types of virtual and hybrid activities it offers.

Staffing

Standard 5: Staffing Levels and Qualifications

Instructors/leaders are appropriately qualified.

Compliance 5.1. Instructors/leaders are appropriately qualified for the activity they are leading.

Level of Service

Standard 6: Unit Definitions

The program uses the correct unit definition in reporting the level of service.

Compliance 6.1. Units are reported only for scheduled sessions that are planned, structured and organized.

Compliance 6.2. Activities reported are not also reported as another service – for example, activities are not reported as both education/recreation and health promotion.

Compliance 6.3. The site producing the event (i.e., paying for the leader, broadcasting the event) can claim the units for the session. (See Standard 7.1, Direct Offering)

Compliance 6.4. If other sites are offering facilitation at their site, they too can claim a unit (See Standard 7.2, Direct Facilitation)

Compliance 6.5. The center referring clients to a virtual event, may claim an Information/Referral unit for the referral.

Documentation

Standard 7: Documenting Units of Service

Compliance. 7.1. Direct offering. The site delivering/hosting the event virtually claims a unit of service.

Compliance. 7.2. Direct facilitation. If other programs provide facilitation at their site where the event is being broadcast, they too can claim a unit of service for delivering that event:

- o Facilitation must be substantive, i.e., meaningful, and considerable, adding value on its own and interactive as necessary to enhance the value and overall success of the broadcast for participating members.
- o Each participating site counts only the members who are attending at their site.
- o Content may be pre-recorded if coupled with live substantive facilitation, as well as interaction as necessary.
- o Note: One sponsor may decide to rotate the delivery of the event from one site to another. In this case, the site delivering the event on any particular day will claim for the event, and as noted above, other sites may claim the event if they are providing substantive facilitation at their site for members attending the session at that site. If a particular site is not providing substantive facilitation at their site, then see Compliance 7.3 immediately below.

Compliance. 7.3. Broadcast live or pre-recorded/no facilitation. In this instance, the participating site can claim a unit of Information & Referral for the work it did to educate each member about the broadcast opportunity and to refer them to the broadcast room/area but cannot claim a unit of service for delivering an event.

Compliance. 7.4. Validating Units. The program provides validation of units claimed with:

- o Screenshot of the event or the event registration report that captures participants in lieu of sign-in sheet (for example, Zoom report).
- o Sign in sheet and screenshot, if hybrid, in-person component.

Note: If the programming is funded by a federal or other grant, it may be necessary to adjust one or more of the above requirements to accommodate the specific terms of the grant.

Emergency Preparedness and Response

Standard 1. Emergency Procedures

The program has a written emergency preparedness plan covering both citywide emergencies (e.g., a black out, hurricane, public health emergency) and program emergencies (e.g., facility emergency, staff shortage, or vehicle in need of repair).

Compliance 1.1. The program has a Continuity of Operations Plan (COOP) as part of their written emergency preparedness plan detailing how it would continue to provide critical services to clients in the event of an emergency.

Compliance 1.2. The program has Emergency Response Protocols outlining contact lists for critical staff, communication protocols, an emergency transportation plan, and lists of critical assets, volunteers, vulnerable clients, and mandated emergency supplies. NYC Aging will provide a planning template to the program to ensure that all required elements are included. The protocol contains hazard-specific response procedures for the following incidents:

- Coastal Storms/Flooding
- Blackouts
- Winter Weather
- Heat Waves
- Communicable Disease Outbreaks/Pandemics
- Building Collapse
- Active Shooter
- Mass Transportation Disruption
- No-notice Events (unanticipated events, such as terror attacks or earthquakes, where warning systems are not available)

Compliance 1.3. The program has a fully functional and operational Automated External Defibrillator (AED) and CPR/AED trained staff during all hours of operation. AEDs are maintained and staff have current training certificates.

Compliance 1.4. The program has an emergency contact list and, at a minimum, updates it every three months.

Compliance 1.5. The program conducts an emergency exercise (e.g., a Table Top exercise) at least once annually.

Compliance 1.6. The program coordinates with NYC Aging's Office of Emergency Preparedness and Response (OEPR), which offers trainings, meetings, and public/private partnerships to help service providers be better prepared for emergencies.

Compliance 1.7. In the event of a communicable disease outbreak, the program makes modifications to service delivery methods to ensure continuity of vital services to older adults in consultation with the Department. The program works with NYC Aging to identify the need for, and to obtain, adequate personal protective equipment (PPE) that is appropriate to the tasks being performed.

Compliance 1.8. The program provides requested information (including phone numbers, data, reports, etc.) to NYC Aging related to an ongoing emergency situation preferably by the Close of Business but no later than 10:00 a.m. EST the following morning.

Standard 2. Cooling Center Operation

The program functions as a City-designated Cooling Center. (NYC Aging may grant temporary exemptions to some programs in limited cases when there are circumstances that prevent a center from operating as a designated cooling site, such as religious functions, facility utilization for an alternate City program, temporary AC failure/service disruption, or construction activities impairing attendance/congregating.)

Compliance 2.1. In the event of a heat wave, the program functions as a City-designated Cooling Center, which necessitates the provision of the following services:

- Providing air-conditioned comfort and drinking water during a heat emergency to any person seeking respite from the heat;
- Before the summer, and again before opening during a heat emergency, ensuring that the air conditioning system is fully functional and informs NYC Aging if this is not the case;
- Providing staff familiar with facility operations on site;
- Answering the telephone during stated hours of operation with a message providing information regarding the facility's use as a Cooling Center;
- Providing reasonable accommodations for people with disabilities and others with access and functional needs;
- Providing designated staff to operate on extended hours, weekends, and holidays;
- Providing designated staff with access to necessary technology and tools to report requested information, such as census numbers, to partner agencies in a timely manner and at least once per day when operating as a Cooling Center;
- Submitting daily Center attendance via the Budget Online System (BOS) during Cooling Center activations;
- Displaying Cooling Center signage outside at street level for the general public;
- Updating social media platforms, website, and voicemail to reflect the operational status for each heat activation; and
- Participating in pre-season training and preparedness activities in collaboration with NYC Aging's OEPR and New York City Emergency Management (NYCEM).

Innovative Programming

NYC Aging requires Older Adult Center programs to provide services that are diverse in nature and that will attract and benefit a broad range of older adults, while closely aligning with the needs of the community. Innovative programming must have an emphasis on **collaborations and partnerships** with neighborhood and community resources, increased **marketing and community engagement**, **transportation access**, and **virtual programming** to reach those unable or reluctant to travel to physical sites.

Standard 1. Increased Marketing and Community Engagement

Compliance 1.1. The program creates and implements new or modified strategies and practices that increase engagement with unserved and underserved older adults living in the surrounding community, including such as LGBTQ, disabled, Limited English Proficiency speakers, and/or minority persons.

Compliance 1.3. The program demonstrates that its community outreach is coupled with the offer of and/referral to needed resources.

Compliance 1.2. The program uses a wide range of marketing strategies, from more traditional methods to newer media outlets, to create awareness of its services and communicate with traditionally underserved or unserved communities such as LGBTQ, disabled, Limited English Proficiency speakers, and/or minority person.

Standard 2. Collaboration and Partnerships

Compliance 2.1. The program demonstrates that it has fostered relationships with various stakeholders, including but not limited to, community organizations and public private businesses.

Compliance 2.2. The program's partnerships and collaborations improve or streamlines service delivery to needed services, especially other NYC Aging-funded services such as case management, home meals delivery, home care, elder justice, and/or caregiver programs.

Standard 3. Virtual Programming

Compliance 3.1. The program creates, conducts, and offers creative virtual (and/or hybrid) programming such as, but not limited to, intergenerational programming, socialization, and enrichment groups, and wellness models.

Compliance 3.2 The program documents units for virtual programming appropriately in NYC Aging's client data system.

Compliance 3.3. The program regularly shares data about upcoming virtual events utilizing the NYC Aging approved method for sharing.

Standard 4. Service and Transportation Access

Compliance 4.1. The program provides or facilitates the utilization of a transportation method (such as, but not limited to, ride sharing/ handicap accessible/car service) for participants in hard-to-reach communities, to the

program's site. For more information, please see the NYC Aging website: https://www1.nyc.gov/site/NYCAging/news-reports/guide_to_community_and_neighborhood_resources.page.

OAC Advisory Council

Standard 1. OAC Advisory Council

Compliance 1.2. Advisory Council. The program has a functioning participant Advisory Council elected by the OAC membership, with written by-laws and clear communication channels with program management and NYC Aging. *Note: Older Adult Centers with a single-purpose Board of Directors are exempt from this requirement if at least 51% of Board members are center participants.*

- The Advisory Council has written by-laws.
- Advisory Council members are center participants elected through regularly scheduled elections open to the entire membership. Advisory Council Officers (i.e., President, Treasurer etc.) may be elected by the Advisory Council membership rather than the *Older Adult Center* membership.
- The Council has a publicized meeting schedule.
- The center director or her/his delegate attends meetings.
- There are clear channels of communication from the Advisory Council to center management and the sponsoring organization.

NYC Aging strongly recommends that prior to an Advisory Council election, the Older Adult Center holds an orientation for the center membership to discuss the election process and roles and responsibilities of Advisory Council members and officers, as a way to encourage participation in the process from older adults who have not previously participated.

NYC Aging strongly recommends that the Center Sponsor and the Advisory Council jointly develop a written agreement detailing how Advisory Council fundraising accounts will operate (i.e., who has access, who signs the checks, what the money can be used for, how it is tracked, how often the Director provides the Advisory Council with a report on the account, etc.). NYC Aging does not have oversight over fundraising accounts because it is not public funding but does recommend developing an agreement in order to avoid conflict.

Attachment A: Incident/Accident Report Form



INCIDENT/ACCIDENT REPORT FORM

For use by programs under contract with the NYC Department for the Aging.

Incident Report Forms must be completed and sent to your NYC Aging Program Officer, Contract Manager and/or Director within 24 business hours from the date of the incident/accident. Any requested information not available at the time of submission of this report must be submitted in writing as soon as it is available.

DATE: _____

SERVICE PROVIDER/PROGRAM: _____ ID# _____

Bureau/Program Area:

Community Services: ☐ HDML ☐ NORC ☐ Nutrition ☐ Older Adult Center ☐ Transportation

Social Services: ☐ Caregiver ☐ Case Management ☐ Friendly Visiting
☐ GRC/MAP ☐ Homecare ☐ SADS

Active Aging: ☐ Employment ☐ Foster Grandparents ☐ HIICAP
☐ Senior Employment/Reserve ☐ Silver Stars

Office of Elder Justice: ☐ Bill Payer ☐ Elderly Crime Victims Resource Center (ECVRC)
☐ Geriatric Mental Health ☐ HIICAP ☐ Home Sharing
☐ Tenancy & Eviction Support Services

☐ Other _____

EXECUTIVE DIRECTOR: _____

PROGRAM DIRECTOR: _____

PROGRAM ADDRESS: _____

PHONE: _____

Date of Incident	Time of Incident	Address/Location of Incident	Name/status of person(s) involved (Client, Staff, Volunteer, Other)

TYPE OF INJURY/PROPERTY DAMAGE/INCIDENT (check all that apply and describe on next page.)

- | | |
|--|--|
| <input type="checkbox"/> Physical Injury | <input type="checkbox"/> Property damage/vandalism |
| <input type="checkbox"/> Slip/trip/fall (outside/inside) | <input type="checkbox"/> Property stolen |
| <input type="checkbox"/> Choking | <input type="checkbox"/> Auto accident |
| <input type="checkbox"/> Burn | <input type="checkbox"/> Auto vandalism |
| <input type="checkbox"/> Illness | <input type="checkbox"/> Hazardous Material Exposure |
| <input type="checkbox"/> Client/workplace violence | <input type="checkbox"/> Inappropriate Behavior |



INCIDENT/ACCIDENT REPORT FORM

For use by programs under contract with NYC Department for the Aging.

☐ Contagious disease exposure

☐ Intoxication

☐ Elder Abuse (physical, emotional, financial, sexual/harassment)

☐ Death

☐ Other _____

Was NYPD notified about this incident? ☐ Y ☐ N If Yes, pct./complaint # _____

If Yes, what was the outcome (Ex. did NYPD come to the scene? was police action taken?) _____

Was medical treatment required/provided on site? ☐ Y ☐ N Was 911/ambulance called? ☐ Y ☐ N

Did this incident result in a hospital stay? ☐ Y ☐ N # of days _____

Was participant dismissed/removed from the premises? ☐ Y ☐ N ☐ NA

Was participant suspended from the program? ☐ Y ☐ N ☐ NA If Yes, for how long? _____

Description of Incident /Accident and Program's Response (attach separate page if needed)

Statement of Injured Party/Witness(es) (attach separate pages if needed)

Name: _____

Signature Program Director/Supervisor: _____

REPORT PREPARED BY:

SIGNATURE _____ DATE _____

NAME (print) _____ TITLE _____

Attachment B: Adequate Staffing in Social Adult Day Services

New York State Office for the Aging

Standards set forth in New York State Office for the Aging Social Adult Day Care regulation NYCRR Title 9 Subtitle Y Chapter II Section 6654.20 requires a program to, at a minimum, have two staff present during program hours when participant(s) are present, one of which must be a paid staff. If non-paid staff are used to fill this requirement, they must meet the health assessment and training requirements of service staff.

The program shall have an adequate number of qualified staff, which may include non-paid staff, to perform all of the functions prescribed in the regulation and to ensure the health, safety, and welfare of participants. Many factors could be taken into consideration when determining "an adequate number of qualified staff".

- **Program design:** This would include criteria as stated in the policy and procedures (required) for participant eligibility, and admission and discharge. Specifically, identifying the needs of the participants for personal care (toileting, mobility, transfers and eating), nutrition, supervision and monitoring, and socialization. The levels of care of the participants and the attendance of participants per day that require higher levels of care should be reflected in the staffing plan policy and procedure (required).
- **Program hours:** Staffing plan (required) should reflect the hours of operation and the average participants in attendance during the various hours of operation and the staff duties at various times of the day. Even if there is only one participant present early in the morning or later in the day the program must have two staff present.
- **Environmental design:** The ability to provide secure, safe program space that is dementia capable and promotes independence for physically impaired adults (i.e., having a security system that prevents wandering out of the program area).
- **Program evaluation (required):** Regular review of participant incidents such as falls, wandering out of program space, incontinence, and behavioral outbursts. Review of staff training records. Feedback from participants and caregivers (required) as well as from staff regarding program satisfaction should be considered. Review of job descriptions and time studies can be used to evaluate staffing needs. Conducting quality assurance/internal controls to ensure that the program is meeting the state requirements.

Staff to participant ratios of 1:7 is generally recognized as being adequate for SADS programs serving the physically frail. In dementia specific programs, the ratio may be 1:5.

Attachment C: Adult Day Service Ombuds Signage



**Department for
the Aging**

Eric Adams Mayor

City of New York

Lorraine Cortés-Vázquez Commissioner

Department for the Aging

Social Adult Day Care Ombuds Office

If you have a comment, question, or
complaint about a social adult day care
program in
New York City,
please contact:

311

www.nyc.gov/aging

sadc-ombuds@aging.nyc.gov