

Restaurant-based Congregate Nutrition Sites and Restaurant Voucher Programs

*From National Resource Center on Nutrition, Physical Activity, and Aging:
http://nutrition.fiu.edu/creative_solutions/voucher_programs.asp*

Context: Why is participation in the congregate meals programs important?

Participation in the congregate meals programs enhances the daily nutrient intake, nutritional status, social interactions and functionality of older adults. Improvements in these key factors for good health and quality of life generates the necessary environment for older adults to age successfully. In addition, congregate-based programs increase opportunities for social interaction and access to a variety of activities and social services. (Refer to the Ask the Expert Topic: "Increasing Participation at Older Americans Act Title III Funded Congregate Meal Sites" for additional background information and references.)

What can our program do to increase participation?

In March 2001, an inquiry was made on the listserve for Gerontological Nutritionists (a dietetic practice group of the American Dietetic Association) soliciting information on restaurant-based Title IIIC congregate meal programs. Declining congregate participation has been a concern for many and there was interest in whether or not basing a site in a restaurant could help counter this trend.

There were eight responses from programs in California, Kansas, South Dakota, New York, Montana, Vermont and Illinois. Additional input was obtained from two programs in Washington State. From the feedback received, two separate types of service delivery emerged. The first is when the restaurant is used as the meal site instead of a more 'traditional' site such as a senior or community center, church, or senior housing. In these situations, program participants meet at the restaurant on a specific day and time and eat their meal with other senior participants. Often, a separate room is available for their use. Administrative functions such as signing in for meals, collecting donations, and registering for the program (including nutrition screening) are conducted at the restaurant. The services available in restaurant-based sites can vary as much as traditional sites. In some instances, there is a site manager, opportunities to volunteer, volunteers deliver meals to the homebound, nutrition education, and linkages to other services. In other cases, the contract with the nutrition provider stipulates that restaurant staff will perform the administrative functions and few other services are available.

Menus are planned by the restaurant with input from the provider and approved by a dietitian. All menus must meet the Older Americans Act (OAA) standards of one-third Recommended Dietary Allowances and compliance with the Dietary Guidelines. Cost and client preferences are other significant factors that influence menu development. Some programs certify a number of menus that are offered by the restaurant to be used for the senior meal. This approach provides a menu choice for participants. Other sites serve a single menu per day, a practice that is similar to more traditional programs. However, this approach allows the restaurant flexibility in menu planning to take advantage of specials. Some structure their daily special around the senior menu or vice versa.

In contrast to the programs described above, a second type of services delivery was described. In these voucher programs, vouchers are provided for individuals to redeem at specified restaurants or other facilities - a couple of programs provide vouchers for hospital cafeterias. There is no set meeting time and participants have greater flexibility in determining the time they choose to eat. Barring any limitations imposed by the facility (one hospital honors vouchers only at breakfast or dinner), individuals may eat at any time the facility is operating, including weekends and evenings. Set menus are available from which to choose. Menus must be approved by a dietitian and meet OAA standards. To obtain vouchers, older adults usually go to a central location such as a senior center where they provide required registration information and make their donation. Vouchers are then issued and usage tracked according to program protocol. Some programs require the restaurant to verify identification before honoring the voucher.

In reporting the benefits and challenges of these two types of programs, several common themes emerged and are outlined below.

Benefits:

- Overall, respondents stated the participation was high in restaurant-based programs.
- These programs are most successful in rural areas and/or with ethnic groups where there is a lack of traditional sites available to meet the need. Older adults definitely enjoy the amenities of eating in a restaurant. They appreciate choice in the menu; like food that is freshly prepared and not held for a long period of time, transported or reheated; there is a more welcoming ambiance that is less institutional; and the restaurant doesn't have the "stigma" of some senior centers.
- Some stated younger individuals and more male veterans attended when meals were served at a restaurant.
- Because the restaurant has staff to prepare and serve foods, some programs found it to be more cost effective in terms of labor- staff were better utilized.
- Older adults enjoy the attention from restaurant staff -one stated they were treated like 'kings and queens.'
- There is a perception of better value - some appreciated the larger meals and the leftovers they could take home.
- In smaller, rural communities, the program provides steady income for the restaurant that allows them to stay open for the rest of the community.
- Eating at the restaurant provides more intergenerational socialization opportunities - they may see friends or neighbors that normally wouldn't attend a congregate site.
- Voucher program participants valued the flexibility in meeting times - they could be used for meal times not offered at congregate sites (evenings, weekends).
- A couple of programs reported that attendance is growing at restaurants while declining at traditional sites.

Challenges:

- The program control over what is served can sometimes be difficult and fat content of the meals tends to be high.
- Adhering to the donation policy meets with some challenges.
- Meal cost is a little higher than traditional sites.

- The success is very dependent on the partnership with cafe/restaurant managers and owners.
- There may be some confusion about choices and individuals may demand more than what is on the menu - a clear contract needs to be established up front.
- In a voucher program, the focus is solely on the meal provided and does not give the same opportunities for socialization as a more traditional site.
- Access to other services and activities may be more limited.
Participants don't like being labeled as the "discount meal folks."
- In areas where there is both a traditional and voucher program, the vouchers compete with traditional congregate program.
- Transportation was cited several times as a barrier to service. However, this is a common problem for all nutrition programs, regardless of meal site location.
- For some, there is a concern that the voucher programs, in particular, may be less effective in serving the target population of older adults with greatest social and economic need.

From the information received, there seems to be great satisfaction with restaurant based meal sites, especially when they are operated on specific days and the group gathers as a whole. There were only two people who responded that actually moved a site from a traditional site to a restaurant. They reported that participation increased as a result. In a program that has experienced an overall decline in congregate participation, it would be interesting to determine whether there is a difference between the restaurant based sites and traditional sites in the rate of decline.

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