



Group Dining Meal Choice = Increased Client Participation, Satisfaction & Retention



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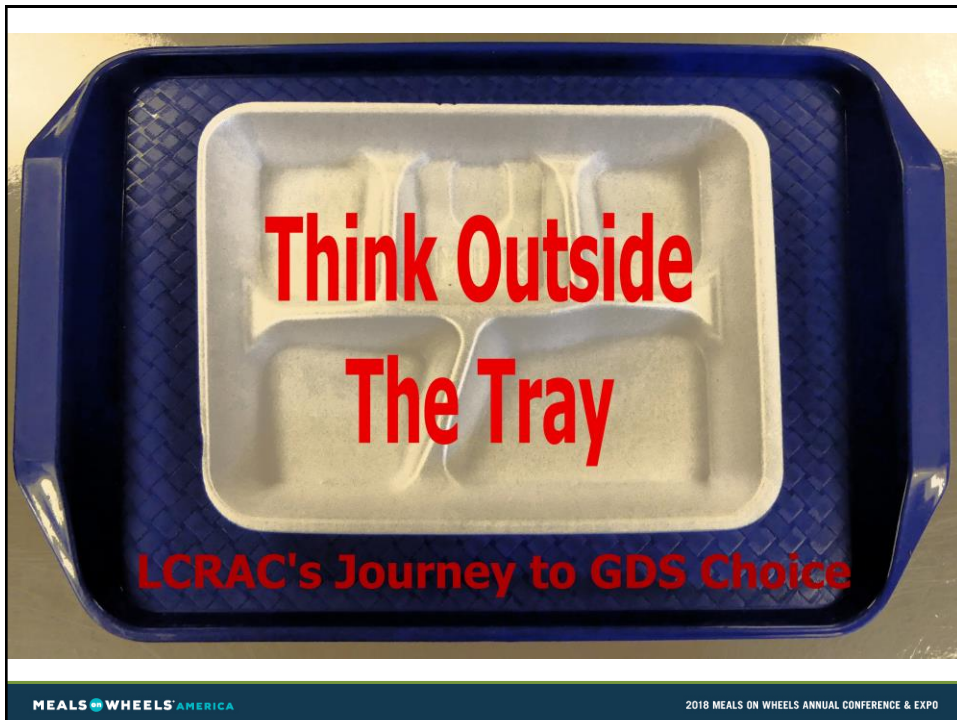
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Lexington County Recreation & Aging Commission Provides:

- Group dining, hot & frozen home delivered meals, and activities from 7 senior centers (2 small urban and 5 rural)
- Transportation
- Homemaker
- Medical escort
- Fitness & evidence based programs
- Elder abuse prevention
- Special events
- Travel opportunities, senior games, community projects

- Funding includes:
 - Older Americans Act
 - South Carolina State Funds
 - Medicaid Waiver
 - Private Pay
 - Millage
 - Other grants
 - Fundraising
 - Churches, etc.





Meal Program Crisis in 2009

- After 30 years, we reached maximum capacity & could no longer increase meal service
- Kitchens too small to add more cambros, warming ovens, refrigerators
- Not enough staff to handle both HDM and GDS programming and to meet client needs
- Catering issues more difficult to manage with so many more meals

Evaluation Process

Searching for Opportunities

- Reviewed every aspect of entire CoA operations and talked with staff, volunteers, participants
- Looked at meal programs as a whole:
 - Staff, equipment, space, food, & processes
- Ran budget projections
- Explored methods to expand meal programs

******Must have no large increase in overall cost and minimal one-time investment in equipment******

Options Considered

- Two deliveries per day from caterer
 - Logistically difficult for LCRAC and caterer
 - Required significant increase in staff hours
- Building or purchasing our own kitchen
 - Large capital investment & staff expense
- Converting entire meal program to frozen meals
 - Slight increase in meal cost
 - Use existing staff, equipment & one-time investment in chest freezers, and 2 vans

We Went From Dipping Catered to Serving Frozen



And All We Wash Are The Trays!

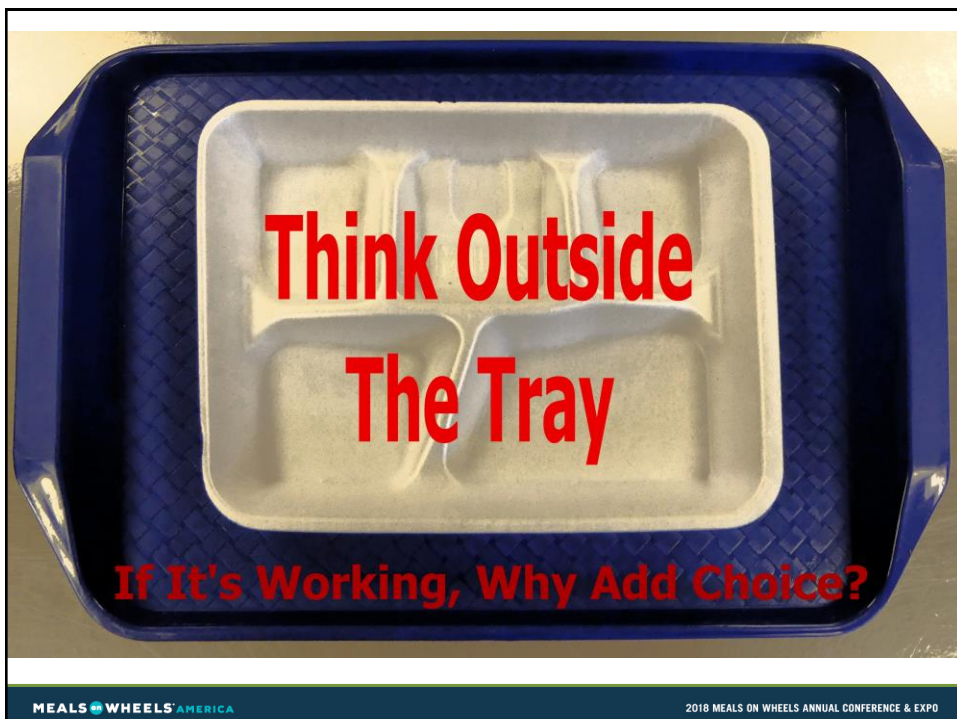


Everything else
goes in the trash



Benefits of Frozen Meals

- Improved flexibility, food quality and food safety
- Portion control handled at production facility
- Less staff intensive = staff time for programming
- Only heat meals needed each day = less food waste
- Total HDM & GDS cost for staff, food, activities, etc. stayed within budget
- Expanded both HDM and GDS programs



What Changed?

Funding sources and requirements are changing

- ACL, VA, Medicaid, Medicare, insurance companies, etc. want clients to have a choice of providers and a choice of services from the selected provider
- Private pay clients want choices
- Baby boomers want choices
- Choice = being competitive
- Being competitive = funded clients/market share



People Like Choosing

Research shows choice enhances:

- Dignity
- Well-being
- Autonomy
- Identity - “See who I am”
- Shared decision making - “Involve me”
- Sense of Community - “Connect with me”
- Quality of life



Meal Site Issues Offering Choice Can Help Solve

- Meals haven't changed much in years
- Declining participation
- Trash cans/bags full of food people didn't eat
- No-shows cost thousands a year in reserved, but un-eaten and un-reimbursed meals



Why We Started Meal Choice With Group Dining Services

- Re-evaluation showed that GDS would be easier to begin with than HDM. (Adding HDM choice in spring 2019)
- Able to involve clients in planning and implementing from the beginning
- Errors/changes easier to handle at site level
- Immediate client feedback



Creating Inclusion

- Educated staff, board, etc. about the need for choice
- Checked feasibility with dietician and meal provider
- Received approval from State dietician and AAA
- Discussion and written client survey: “Do you want to be able to choose between 2 meals every day?”

Yes – 84% No – 5% I Don't Care – 11%

- Clients rated all meals as a group activity at each center for dietician to use to create choice menu

LCRAC's Group Dining Choice Program Began April 2017

- Clients choose between two meals each day
- Both meals have the same condiments (Milk, juice/fruit, dessert, bread/muffin)
- Meals are heated on-site and served hot out of the oven



- 30 different meals
- 6-week/6-month rotating menu created by dietician
- Each meal used twice



One Day's Menu Choices



Milk, Whole Wheat Bread, Margarine, Apple Juice,
Blueberry Bar

BBQ Chicken Drumsticks, Black
Beans & Corn, Brussels Sprouts

Pizzaiola Pork, Asparagus,
Carrots

Resources Needed

- Frozen meal provider with a dietician who will work with you to create menu
- Food distributor to receive & hold meals, provide condiments, serving supplies, etc., & deliver all items to you
- Chest freezer(s) or walk-in freezer
- Way to heat or retherm frozen meals



Food Heating Options



Cres Cor
Cook & Hold
2 Ovens, 48 meals
per oven, cooking
time = 2 hours



Hot Logic for
Business—24 meals
Each slot cooks &
holds 1 meal,
cooking time =
2 hours



Commercial
Convection Oven,
natural gas, 45 meals
per unit, requires
hood, cooking time =
30 minutes

LCRAC Rethinks Meals With

7 Senior Centers serving over 51,700 group dining choice meals annually, heat meals with:



- 1 Cres Cor Cook and Hold ovens at 3 centers
- 2 Hot Logic 24-slot ovens at 2 centers
- 1 Commercial convection oven at 2 centers

**Think Outside
The Tray**

LCRAC's Results

Our Results: GDS Choice

Latest Client Survey

- 89% like choosing their meals = **Satisfaction**
- 86.5% report eating more food due to having a choice = **Increased Nutritional Intake**
- 35.7% attend their senior center more often = **Retention and Participation**

The same number of clients plus choice = 3,126 more meals eaten/visits to senior center annually

Our Results: Frozen Meals

- Both HDM & GDS participants report eating 75% to 100% of the meals vs. 50% or less of the previous meals, significantly increasing nutrient intake
- Wasted meals due to GDS seniors making reservations and not attending reduced resulting in an annual savings of over \$20,000
- Problems with shortages, temperatures, ??? in the food, or other food issues seldom occur

Our Results: Staff Time

- With no food dipping and limited packing, staff time in the kitchen is reduced by over 50%
- Staff is devoting more time to quality programming



Our Results: Resource Control

- Greater control of our food and program costs resulted in a more stable budget
- Increased HDM and GDS services.
 - *Incurring slightly higher food costs is less expensive than adding staff hours to increased service*
- Easier volunteer recruitment & retention with more in-center positions and fewer HDM needs
- A limited investment in equipment allowed us to maximize existing space and staff

Our Greatest Benefits

Flexibility, creativity, and control allowing us to focus on what is most important!



**Think Outside
The Tray**

Begin Your Journey to Choice

What Choices Do You Offer Now

- List non-meal choices you offer clients now
 - Programs & activities
 - Trips
 - Volunteer tasks
 - Other choices
- How do you make those choices happen
- What processes can you transfer to meal choice



Meal Choice: Look at Everything, Talk to Everyone

- Evaluate your programs as a whole
 - What are your resources/strengths?
 - Staff, space, equipment, volunteers, clients, ideas, community support
 - Besides money, what are your challenges?
- What are your hidden opportunities?
- Brainstorm ideas with everyone
 - Consider them all, even the crazy ones

- What options are available within your program?
 - Daily, weekly, or monthly choice
 - Choice of meats, vegetables or other item
 - Two serving times with different meals (breakfast & lunch)
 - Choice of basic meal with same condiments
 - Arrange with a local restaurant to provide an appropriate, affordable meal monthly and take your seniors out
- What do your clients want – ASK for ideas
- Get your AAA and caterer/meal provider involved

Create a Plan & Stay Flexible

- Put a detailed plan down on paper
 - Have it reviewed by others
 - Set a realistic start date & timeline
- Start on time
- Consider program to be an on-going work in-progress
 - Get feedback from everyone and adapt
- Share and give/get support from your peers



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