*This document is not legal advice of the Administration for Community Living or its Nutrition and Aging Resource Center. Programs should work with their legal and/or contracts departments on any and all agreements.*

Sample Contract Language for Dietitian Services

This document provides examples of deliverables for Registered Dietitian Nutritionist (RDN) services that local nutrition providers can consider for inclusion in requests for proposals or within contracts to support Older Americans Act (OAA)-funded senior nutrition programs. RDNs may be independent consultants or employed by a consulting firm, local healthcare facility, or similar organizations. Food service contractors may offer additional RDN services, and these examples can be considered within those agreements.

The number and types of contract deliverables will determine the qualifications, including certifications, licenses, and background experience the RDN is required to have. For more information on RDN qualifications, view the RDN job descriptions on the Nutrition and Aging Resource Center (NARC) [Staffing and Training](https://acl.gov/senior-nutrition/staffing-and-training) webpage. For general OAA Title III-C program contracting resources, visit the NARC [Contracting](https://acl.gov/senior-nutrition/contracting) webpage.

# Menus and Menu-Related Services

## RDN Responsibilities

RDNs approving menus must be licensed in the state of [state name].

### Menus

* Approve and sign seasonal cycle menu packages. Each menu package will include:
	+ A signed [meal pattern or nutritional analysis] as listed in [attachment \_\_] that indicates meals conform with requirements established by [state unit on aging (SUA) name].
	+ [Number] seasonal cycle menus per year; each cycle will be [number] weeks in length.
	+ [Number] meal(s) per day written for [breakfast/lunch/dinner].
	+ Standardized recipes, production sheets, food product specifications, food allergen information, order guides, substitution lists, choice menu items, and meal cost analysis.
	+ Additional monthly holiday or themed menus.
* Write and approve special or therapeutic diets for inclusion in cycle menus.
* Menus will adhere to the [name of state policy] and the International Dysphagia Diet Standardization Initiative (IDDSI) definitions, as applicable.

\_\_\_ Regular diet

\_\_\_ Modified carbohydrate (e.g., diabetic)

\_\_\_ Heart-healthy diet

\_\_\_ Renal diet

\_\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

International Dysphagia Diet Levels

\_\_\_ Minced and moist (level 5)

\_\_\_ Soft and bite-sized (level 6)

\_\_\_ Pureed (level 4)

* Ensure menus have a [nutrient analysis or meal pattern] demonstrating compliance and sign off.
* Attend all menu review conferences, which will be held at least [number] [weeks or months] prior to the start of the new cycle.

### Menu-Related Services

* + Work with the agency to conduct and analyze consumer menu preference surveys from congregate and home-delivered meal participants no less than [frequency].
	+ Hold focus groups or interviews no less than [frequency] at each congregate meal site.
	+ Consider consumer menu preferences when designing menus.
	+ Train staff and volunteers on proper food holding and handling methods, portioning, and plating techniques.
* Verify that Nutrition Services Incentive Program (NSIP) funds are used solely for the purchase of domestically produced food. See [NSIP Domestically Produced Foods FAQ](https://acl.gov/sites/default/files/nutrition/NSIP.DomesticallyProducedFoodsFAQ.pdf) for guidance.
* Participate in monthly food production meetings to address issues related to the supply chain, production, and matters impacting food yields, quality, safety, and consumer satisfaction.
* Conduct monthly food safety and sanitation inspections and submit reports detailing best practices and items requiring follow-up by the agency.
* Conduct efficiency studies such as plate waste, time and motion, or recipe yield analysis and provide guidance to implement changes for improved cost control and consumer satisfaction, as requested by the agency.
	+ Review community options, make recommendations to the agency, and provide technical assistance to local restaurants, grocery store cafes, food trucks, and other food services to expand meal options and increase culturally appropriate offerings.
* Support the agency in developing a choice menu through quarterly consultations to incorporate second entrée options, additional side-dish options of seasonal fruits or vegetables, and culturally appropriate foods.

## Agency Responsibilities

* Provide recent invoices with food and beverage pricing to identify food products currently used, calculate meal cost, and to aid in verifying use of NSIP funds.
* Ensure a representative with knowledge of food and menu-related issues at each meal site attends menu review meetings.
* Ensure meal sites maintain daily, descriptive documentation of meal acceptance for use at production and menu review meetings with the RDN.
* Provide a map of the planning and service area to identify areas where partnerships with food services for new meal sites are desired.
* Maintain meal site and kitchen health inspection certificates and address issues that arise in health inspections in a timely manner.
* Provide meeting space and coordinate meetings and trainings led by the RDN.

# Nutrition Education

## RDN Responsibilities

* + Develop, implement, and evaluate a nutrition education plan that includes a minimum of [number] sessions per year for congregate meal consumers, and [number] sessions per year for home-delivered meal consumers in accordance with requirements set forth by [SUA, area agency on aging (AAA), local] policies.
	+ Nutrition education topics and approaches should be based on a community needs assessment that includes client intake data as well as consumer and service provider input.
	+ Source or develop food safety and nutrition education session materials that are appropriate in content and designed for the population served including: consideration for cultural sensitivity, regional food culture, low literacy, low vision, hearing impaired, and non-English speaking individuals.
	+ Ensure food safety and nutrition education session materials are varied in format (such as handouts, newsletters, displays, social media posts, and in-person or virtual presentations and demonstrations) to meet the needs of congregate and home-delivered meal consumers. Interactive nutrition education is preferred over printed materials for home-delivered meal clients.
	+ Provide training to site managers, volunteers, students, and paraprofessionals to deliver specific nutrition education sessions, including anticipated questions with answers.
* Provide in-service education and training to staff on completing the agency’s screening tool for malnutrition and hunger and appropriate referrals for additional nutrition services.
* Develop an evaluation component for nutrition education sessions that captures knowledge transfer and anticipated, or actual behavior change. Analyze results to improve nutrition education services and quantify outcomes.
* Provide monthly nutrition education session reports to Agency in the agreed-upon format by the [ \_\_\_of the month].

## Agency Responsibilities

* Coordinate, advertise, and provide meeting space for nutrition education sessions.
* Provide aggregated consumer responses to nutrition risk screening questions.
* Provide agency-approved reporting tools and consumer surveys.
* Provide an online platform for providing virtual nutrition education.
* Designate a point of contact to receive session data for entry into the state reporting system.

# Nutrition Counseling and Medical Nutrition Therapy

## RDN Responsibilities

### Nutrition Counseling

* Design and implement a dietitian screening and referral system for nutrition counseling services that fits the needs of the agency and ensures those most in need of nutrition counseling have an opportunity to receive the service from the agency or by referral.
* Provide nutrition counseling to eligible consumers at nutritional risk because of their health or nutritional history, dietary intake, medication use, or chronic illnesses, including individualized advice and guidance about options and methods for improving their nutritional status. Nutrition counseling will be performed by an RDN, licensed in accordance with [state] law. Nutrition counseling consists of one-on-one session(s) between an RDN and an eligible consumer.
	+ Nutrition counseling will be provided only to eligible consumers under the OAA. Nutrition counseling is available to consumers that are 60 years old or older and determined to be at high-nutrition-risk or have a medical condition that has the potential to put them at high nutritional risk.
* Attend scheduled nutrition counseling sessions. Sessions will be delivered at the consumer’s home, via the telephone, virtually, or at a location approved by the agency.
* The number of nutrition counseling sessions per consumer is based on their individual needs and available funding. The RDN must obtain approval for any consumer in need of more than [number] sessions.
* Maintain complete records of nutrition counseling documentation and consumer information according to agency policies and the Health Insurance Portability and Accountability Act (HIPAA) requirements.
* Inform consumers about the agency and its general services as appropriate. Forward any health service referrals or referrals to additional services to the agency with the consumer’s permission.
* Submit monthly reports by the [ \_\_ of the month] in the agreed-upon format, to include:
	+ An intake form for each consumer counseled during the month.
	+ A billing form that identifies the number and length of service units for each consumer.

### Medical Nutrition Therapy

If Medical Nutrition Therapy (MNT) services are desired (see [Medical Nutrition Therapy Works for Seniors](https://acl.gov/sites/default/files/nutrition/Senior-MNT-Toolkit-v5_FINAL121819_508%20%281%29.pdf)), in addition to the nutrition counseling requirements, the RDN will:

* Communicate progress notes to the primary care physician or case manager using HIPAA-compliant protocols.
* Submit appropriate medical billing codes and other required information for MNT in the agreed-upon format and schedule.
* Collect and report required consumer demographic characteristics and session information according to the guidelines of the referring organization and the agency.
* Work with the agency to complete billing for services to Medicare, Medicaid, or private insurance and respond to potential denials for payment, as needed.

## Agency Responsibilities

* Provide all congregate and home-delivered meal clients with information on the availability of nutrition counseling services for those deemed high-risk.
* Provide the RDN with nutrition counseling referrals, required documents, document retention requirements, and health-related consumer information as available.
* Schedule nutrition counseling sessions and complete reporting and billing for services.
* Conduct outreach and marketing efforts to educate providers and potential consumers about the availability of nutrition counseling or MNT.

# Resources

* [Nutrition Requirements of the Older Americans Act (OAA)](https://acl.gov/sites/default/files/nutrition/NutritionRequirementsOAA.pdf) — *Basics for Title III-C*
* [Nutrition Education: What Are the Requirements?](https://acl.gov/sites/default/files/nutrition/SNPNutritionEdRequirements_Dec2021.pdf) *— Resource for states and providers*
* [NSIP Domestically Produced Foods FAQ](https://acl.gov/sites/default/files/nutrition/NSIP.DomesticallyProducedFoodsFAQ.pdf) *— Guidance on ensuring funds are used in alignment with OAA requirements*
* [Nutrition Counseling for the AAA and LSP](https://acl.gov/sites/default/files/nutrition/NutritionCounselingAAAsandLSPs.pdf) — *A guide to nutrition counseling for AAAs and local service providers working with OAA Title III programs*
* [Medical Nutrition Therapy Works for Seniors](https://acl.gov/sites/default/files/nutrition/Senior-MNT-Toolkit-v5_FINAL121819_508%20%281%29.pdf) — *Resource guide for registered dietitians and senior nutrition program administrators*