

**NC DIVISION OF AGING AND ADULT SERVICES AND  
NC AREA AGENCIES ON AGING  
NUTRITION SERVICES ASSESSMENT TOOL**

**Attachment A:  
Congregate Nutrition Site Review**

Attachment A must be on file for each nutrition site and available for review by the AAA during the assessment process.

Name of Nutrition Site:

		Yes	No
1	The site is located to be accessible to people eligible for services and targeted by the Older Americans Act.	<input type="checkbox"/>	<input type="checkbox"/>
2	The site is an attractive facility where all eligible persons feel free to visit and where their cultural and ethnic background will not be offended.	<input type="checkbox"/>	<input type="checkbox"/>
3	The site has at least 12-14 square feet per person excluding halls, bathrooms, and kitchen areas.	<input type="checkbox"/>	<input type="checkbox"/>
4	The site has an adequate number of sturdy tables for the number of individuals on the attendance roll and chairs appropriate for older adults.	<input type="checkbox"/>	<input type="checkbox"/>
5	The site has at least one table surrounded by adequate aisle space (3 ft. 8 in.) to allow for persons with canes, walkers, crutches, or wheelchairs to move with ease. When necessary, this table shall be of sufficient height (2 ft. 8 in.) to permit persons in fixed-arm wheelchairs to dine comfortably.	<input type="checkbox"/>	<input type="checkbox"/>
6	The site has at least 2 exits which are unlocked during hours of operation.	<input type="checkbox"/>	<input type="checkbox"/>
7	Emergency and evacuation plans are posted.	<input type="checkbox"/>	<input type="checkbox"/>
8	Visible, usable fire extinguishers are in place, and instructions for use are posted.	<input type="checkbox"/>	<input type="checkbox"/>
9	The site is heated during colder months to at least 72 degrees Fahrenheit while participants are present.	<input type="checkbox"/>	<input type="checkbox"/>
10	The approved menus are posted in both the congregate serving area and the meal preparation area of the site.	<input type="checkbox"/>	<input type="checkbox"/>
11	A calendar of activities and programs is posted at the beginning of each month.	<input type="checkbox"/>	<input type="checkbox"/>
12	A current permit from the Health Department is posted.	<input type="checkbox"/>	<input type="checkbox"/>
13	The site has a system for voluntary, confidential donations by participants.	<input type="checkbox"/>	<input type="checkbox"/>
14	Parking is available.	<input type="checkbox"/>	<input type="checkbox"/>
15	The site has a safe and appropriate place to mount and dismount from vans or other group transportation vehicles.	<input type="checkbox"/>	<input type="checkbox"/>

Name of provider staff who completed form:

Title:

Date form completed:

Signature: \_\_\_\_\_