

Kupuna Wellness Center Congregate Dining Program Handbook

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PROGRAM OVERVIEW

Lanakila Meals on Wheels is a branch of **Lanakila Pacific**, a 501(c)(3) nonprofit organization dedicated to building independence for individuals with physical, cognitive, social, and age-related challenges. Established in 1971, **Lanakila Meals on Wheels** supports seniors and individuals with disabilities to live on their own with dignity by providing our signature meals and other services.

Lanakila Meals on Wheels' Congregate Dining Program provides an ongoing way to continue to learn, socialize, and engage with other seniors in an in-person gathering space. The **Kupuna Wellness Centers** offer a wide variety of health, social, cultural topics and activities that make it fun to learn and connect with others. You may participate in the program in various locations established in the community.

As part of program participation, **Kupuna Wellness Center** participants will also receive **Lanakila Meals on Wheels** signature meal service.

GOALS

1. Maintain independence by staying active and engaged through ongoing education and socialization while receiving healthy meals.
2. Provide participants with the opportunities to:
 - a. access resources and services (health, wellness, public benefits, etc.)
 - b. connect with and maintain social networks (family, caregivers, community)
 - c. engage in recreational activities (music, movies, games)
 - d. enhance education on various topics (nutrition education, arts and culture, financial literacy, safety, and more)

PROGRAM REQUIREMENTS

1. Must be 60-years or older and complete an intake and assessment to enroll. Regular participation is required to maintain enrollment status.

Lanakila Meals on Wheels will maintain participant records including class attendance, your name, address, and other data to communicate with you, provide services, and provide to the City and County of Honolulu for funding and evaluation purposes. If your personal information changes, please notify **Lanakila Meals on Wheels staff**.
2. Regularly participate in in-person facilitated activities as scheduled and available. Regularly as defined as weekly participation, two consecutive months of non-participation will result in termination of enrollment status.

3. Receive **Lanakila Meals on Wheels** signature meals service. Meals are intended to be consumed at congregate meal sites; no takeout service will be available. To guarantee meal service, participants must communicate with program staff in advance.

PARTICIPATION INFORMATION

Attendance Tracking

Program participants are required to sign in and out at congregate sites. For any offsite excursions, advanced registration is required.

Location and Schedule

You are registered to attend program at the following congregate site(s):

Day of the Week	Site Location	Program Hours
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

LANAKILA MEALS ON WHEELS SIGNATURE MEAL SERVICE

All **Lanakila Meals on Wheels**' meals are certified USDA compliant by Registered Dietitians and created by local chefs to ensure our food is both nutritionally balanced and delicious. Each complete meal typically consists of an entrée, starch, vegetable, fruit, wheat bread, enriched margarine spread, and milk, all together providing at least one-third of an individual's daily recommended dietary allowance.

Meals

All meals are fully cooked and ready to eat and are served as is.

Cancellations

When someone is not available to receive food as scheduled, **Lanakila Meals on Wheels** still incurs a cost to produce the meals while volunteers and staff have expended efforts to ensure its timely delivery. **Please provide advance notice if you are unable to attend program and receive meal service as previously indicated.**

Lanakila Meals on Wheels Business Hours are: Monday – Friday: 7:30am – 4:00pm

Lanakila Meals on Wheels Main Office Phone: (808) 356-8519

VOLUNTARY DONATIONS & GIFT GIVING

The **Kupuna Wellness Center** is provided at no cost to individuals 60-years and older. You may voluntarily make a program donation to help offset the cost of **Lanakila Meals on Wheels'** program and services. All donations will be kept confidential and your ability to receive services will not be affected whether you choose to donate or not.

Donations can be made on our website www.lanakilamealsonwheels.org or mail-in a check and/or money order to:

**Lanakila Meals on Wheels
1809 Bachelot Street, Honolulu, HI 96817**

Staff are not allowed to accept gifts and tips. Any monetary gift such as cash, check, gift card or digital transfer will be accepted as a donation to Lanakila Meals on Wheels and go towards the cost of operating the program and services. We recognize that participants may want to show their appreciation. A token of aloha, like a thank you card, a lei, or homemade items are acceptable.

CODE OF CONDUCT

Lanakila Meals on Wheels strives to provide an inclusive, friendly environment in which all participants will feel safe, welcomed, accepted, and able to enjoy themselves with others in their community. For the safety and well-being of all participants, volunteers, and staff the following policies will be observed.

Participants in Lanakila Meals on Wheels Program shall:

1. Treat other participants, volunteers, and staff respectfully and courteously.
2. Follow all rules of the host-sites; and follow program staff directions when off-site.
3. When in-person, take care of the facility and any loaned property to maintain clean, good working order.

Behavior that Constitutes Violation of this Policy Includes:

1. Disruptive, obscene, hateful, racial, derogatory/abusive language, making threats or threatening behavior, or harassment of any kind to participants, volunteers, or staff.
2. Lack of personal cleanliness, proper hygiene and/or activities that negatively affect the health of others. Shirt and footwear are always required.
3. Use of alcohol or drugs is prohibited.
4. Defacing or destroying any property and/or removal of property without permission. Committing or attempting to commit any activity that would constitute a violation of any federal, state, or local criminal statute or ordinance.

Violations:

Participants who feel like they have been discriminated and/or harassed should report it before it becomes severe and pervasive. If participants have a complaint against a staff or volunteer, they are encouraged to address the complaint directly to the staff or may contact the program supervisor.

Depending on the severity of the violation, the offender may be issued a verbal or written warning during one-on-one counseling with staff. Serious violations will result in either a temporary suspension or permanent termination from the program. Staff will keep a record of the incident and inform the participant of any disciplinary action.

AUTHORIZATIONS

Release Information

I understand that my information will be kept confidential and will be used only to help me receive any benefits to which I may be entitled and for statistical, reporting, and accounting purposes. I hereby authorize the release of information that has been obtained about me for the above purposes.

Release Photos and Video for Public Relations Purposes

I hereby grant consent to **Lanakila Meals on Wheels, Lanakila Pacific**, and its Board members, officers, employees, and those acting on behalf of **Lanakila Meals on Wheels** and **Lanakila Pacific** unrestricted permission to use my name, photograph (video and still picture) and voice recordings in connection with any publicity, training material, television production, and internet (including company intranet and world wide web exposure.) indefinitely.

I release **Lanakila Meals on Wheels, Lanakila Pacific**, its Board members, officers, employees, contracted vendors, and those acting on its behalf from any liability, injury or damage or any other liability with respect to these activities described in this consent. I waive any right that I may have to inspect and approve the finished product or copies.

I further understand that no special compensation will be provided to me for the use of my image and that I may not be informed of the specific use of my image. I understand my image may be used from the date signed.

Release and Indemnity for Services

I acknowledge that my participation in the **Kupuna Wellness Center** is completely voluntary. I understand that with any program participation there are inherent risks involved. I understand it is my responsibility to determine whether I am able to participate in any program activities or services provided or whether I should discontinue my participation at any time. I understand that **Lanakila Meals on Wheels, Lanakila Pacific**, contracted vendors, and guest instructors assume no duty to me to ensure my ability to participate in any of the activities or services offered whether before, during or after such activity or service.

I understand the ability to provide program activities and services, including classes, sessions, and meals, is subject to availability and funding. I agree to not hold **Lanakila Meals on Wheels, Lanakila Pacific**, its employees, board members, volunteers, and affiliates liable for failure to deliver any and all program activities and services. I understand under no circumstances will **Lanakila Meals on Wheels, Lanakila Pacific**, its employees, board members, volunteers, and affiliates reimburse, substitute, or otherwise compensate participants for failure to deliver any and all program activities and services.

TERMINATION

I understand I may terminate services or my participation in the **Kupuna Wellness Center** at any time with or without cause. No compensation will be provided to me for program termination.

If you have any questions or feedback about the service, please let us know by calling (808) 356-8521 or emailing KupunaWellness@lanakilapacific.org.

PARTICIPANT STATEMENT OF UNDERSTANDING

I, *{Fill in the blank}*, acknowledge that I have read, understand, and agree to abide by the Lanakila Meals on Wheels' Kupuna U Program Handbook.

Those policies and procedures include:

- Program Overview
- Goals
- Program Requirements
- Participation Information
- Lanakila Signature Meals Service
- Voluntary Donations & Gift Giving
- Code of Conduct
- Authorizations (Releases)
- Termination
- Statement of Understanding

Print Participant Name

Participant Signature

Date

Witness Signature if Participant's Signature is a "X"

Date