

# Healthy Aging and Independent Living Project-Diabetes and Nutrition Screening and Counseling

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## Brief Description:

Meals On Wheels, Inc. of Tarrant County has received funding from the United Way of Tarrant County, which is the designated Area Agency on Aging for Tarrant County, to provide in-home diabetes and nutrition screening and in-depth counseling by Registered/Licensed Dietitians. Follow up of counseling is provided by Nutrition students directed by Registered Dietitians at pre-determined intervals. The goal of this project is to reduce emergency room visits and hospitalizations of the clients/patients the project has served.

*Attached is a sample PowerPoint presentation for year one of the project made to the Fort Worth Dietetic Association and can be modified and adjusted for a short presentation or into a poster for a poster session.*

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*This submission was selected as part of a national challenge issued to leaders in all communities seeking new "best practices" and "best possibilities" for the future of nutrition and aging.*

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The rise in the elderly population is well-documented and is approaching unprecedented numbers. Chronic disease, limited transportation and fixed income are some of the issues that many seniors face. A study called Elderly Community Residents' Reactions to the Nursing Home: An Analysis of Nursing Home-Related Beliefs found that many seniors' fear of being placed in a nursing home is greater than their fear of death. Simply put, people prefer to remain independent and in their homes.

In order to maintain health and independence, and to properly manage chronic disease, people need education, regular doctor visits, medication and proper nutrition. Limited transportation and low income are large barriers to access of these much-needed services. As healthcare costs increase and budgets decrease it becomes more and more important to find ways to address the needs of this often over-looked demographic in ways that are efficient, cost-effective, and impactful.

Healthy Aging and Independent Living (HAIL) is a project funded by United Way. It is designed to address the issues of disease management, transportation and low income that so many seniors live with. The ultimate goal of this project is to reduce emergency room visits and hospitalizations of the clients/patients the project has served. Potential HAIL clients are screened for nutrition and diabetes risk using previous evidence-based written tools of the Diabetes Detection Initiative and the DETERMINE nutrition screening tool. These are simple screening tools and do not require professional healthcare personnel to gather this information which reduces the cost of this function.

The Registered Dietitians at Meals On Wheels, Inc. of Tarrant County (MOWI) determine which clients are at risk utilizing the screening tools. Once clients are determined to be at risk they are contacted and an appointment is set up for the Registered Dietitian (RD) to make a home visit. This is an important part of the HAIL project because it directly addresses the issue of transportation for the client. In the home the RD collects medical history as well as the list of medications and supplements used by the clients. The RD also assesses the client's dietary intake as well as any potential barriers to intake such as dentition, GI issues, cognitive issues, etc. The RD provides information and training on nutrition-related chronic disease management, proper nutrition and food-safety practices, potential drug- nutrient interactions and potential dangers of supplements. As stated previously, many seniors have a fixed income and costly supplements can take a large portion of this. Also, while many people are aware of potential side effects or interactions of prescription medications, the potential dangers of non-prescription supplements are often overlooked. Paradoxically people take these substances to achieve a health benefit but appear to view them as innocuous substances with no potential for side effects when taken in large amounts or combined with other substances. Educating people on these issues as well as discussing dietary sources of micro- and macronutrients addresses the issues of safety and finances.

At the conclusion of the counseling/education session the RD works with the client to set a behavior goal. This goal is client-centered, meaning clients choose the goal themselves. The RD guides the conversation, educates, and helps the client identify possible solutions to barriers in behavior change. When the client sets the goal, he or she is much more likely to make a behavior change because the control is placed in his or her hands and there is a vested interest in achieving the goal.

After the initial home assessment clients receive mailed education materials specific to their needs, a follow-up visit from the RD and/or follow-up phone calls. The goals of

following up include reinforcing education, encouraging positive behavior change and addressing any additional needs the client may have. Follow-up visits are done by the RD and calls are made by dietetic/nutrition students.

HAIL benefits seniors, their families and communities, students and the healthcare system as a whole. It is a sustainable program that can utilize community organizations for referral and screening purposes, RDs for education and medical nutrition therapy and nutrition students for additional education and follow-up. So far results have been very promising and significant. An independent evaluator of the project found that last year this project reduced total hospitalizations of clients served by 42% (or 420 of the 1000 clients served); reduced preventable hospitalizations by 70% (or 700 of the 1000 clients served); and reduced emergency room visits by 23% (or 230 of the 1000 clients served).

Recently, MOWI received a report from the Texas Department of State Health Services that reported Tarrant County's profile for adult potentially preventable hospitalizations. This report identified ten preventable disease states, the number of admissions based on the disease state, the zip codes of those admitted with the disease states, average length of stay for each disease state, and the average cost of the hospitalization for each disease state. Using four of the ten disease states we find most often in the MOWI population (Congestive Heart Failure, Dehydration, Hypertension, and Diabetes-Long Term Complications), we were able to determine an average cost of hospitalization at \$27,414. If you extrapolate this figure with the reduction of hospitalizations of 42% or 420 clients found by the independent evaluator, this project potentially saved taxpayers, \$11,513,880 with a project investment from the United Way of Tarrant County of \$150,000.