

What Are the Components of a Quality Nutrition Program?

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February 12, 2012

Overview

- Administration on Aging
- Changing environment
- Proposed components of a quality nutrition program
- Training & technical assistance
- Resources

Administration on Aging

- **Vision**
In order to serve a growing senior population, AoA envisions ensuring the continuation of a vibrant aging services network at State, Territory, local and Tribal levels through funding of lower-cost, non-medical services and supports that provide the means by which many more seniors can maintain their independence.
- **Mission**
The mission of AoA is to develop a comprehensive, coordinated and cost-effective system of home and community-based services that helps elderly individuals maintain their health and independence in their homes and communities.
- **Reflects American Values**
 - Supports independence.
 - Helps people maintain their health and well-being – better able to live with dignity in their homes, which is what Americans overwhelmingly prefer.
 - Helps protect the most vulnerable among us.
 - Avoids more costly institutional care.
 - Long history of non-partisan, local community & family support.

Older Americans Act Nutrition Program Purposes

http://www.aoa.gov/AoARoot/AoA_Programs/OAA/index.aspx

- The purposes of this part are to
 - **Reduce** hunger and food insecurity
 - **Promote** socialization of older individuals
 - **Promote** the health and well-being of older individuals and delay adverse health conditions through access to nutrition and other disease prevention and health promotion services



Nutrition Services

Sections 331, 336, 339

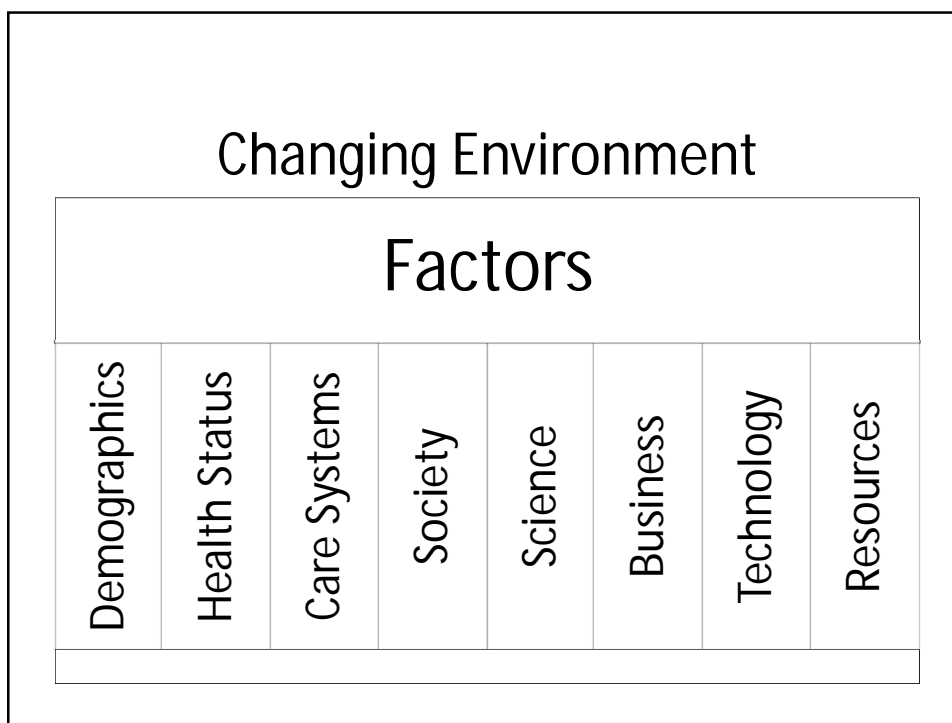
http://www.aoa.gov/AoARoot/AoA_Programs/OAA/index.aspx

- Services required to be provided
 - Meals, nutrition education, nutrition counseling
 - Evidence based practice
- Services that may be provided
 - Nutrition screening & assessment, as appropriate
- Services that may not be funded
 - Vitamin/mineral supplements
 - Dietary supplements



Broad Focus for the Older Adult

- Older individual
- Person, family centered
- Consumer directed, consumer choice
- Right services for the right person at the right time at the right cost
- If funded by the OAA, services are to meet the requirements of the OAA



Demographics

- More older people
- More older people, living longer
- More women than men
- More healthy older people
 - Baby boomers
 - Diverse expectations
- More frail older people
 - More homebound
 - More homebound, nursing home level of care
 - More potential for malnutrition
- More minorities, diverse racial/ethnic composition
 - Diverse expectations
 - In states that were previously more homogeneous
- More home and community based services, less facility based care

Profile of Older Americans, http://www.aoa.gov/AoARoot/Aging_Statistics/Profile/index.aspx;
 Key Indicators of Well Being, http://www.aoa.gov/AoARoot/Aging_Statistics/Profile/index.aspx

Health Status

- More young old
 - Healthy, active older adults, increased life expectancy, decreased functional impairment
 - Managing chronic conditions
 - More older adults who transition from hospitals, rehabilitative facilities, and nursing homes back to their own homes
- More old old
 - More older adults who are frail and impaired
 - More caregiver burden
 - More older adults who transition from hospitals, rehabilitative facilities, and nursing homes back to their own homes
 - More older adults living at home who are nursing home level of care

Profile of Older Americans, http://www.aoa.gov/AoARoot/Aging_Statistics/Profile/index.aspx:

Key Indicators of Well Being, http://www.aoa.gov/AoARoot/Aging_Statistics/Profile/index.aspx

AARP Public Policy Institute, Quick Health Facts, Profile of Older Americans, <http://www.aarp.org/research/ppi/>

Care Systems

- Health care
 - Medicare
 - Medical nutrition therapy
 - Chronic disease self management
 - Affordable Care Act, opportunities for the aging network increasing
 - Transition care
 - Health homes
 - State dual eligible demonstrations
 - Community First Choice Option
- Public health
 - Chronic disease self management
 - Immunizations
 - Health & nutrition education

Care Systems

- Home and community based care
 - Older Americans Act
 - Federal/State Medicaid waivers
- Long term services and supports
 - Older adults & individuals with disabilities
 - Caregiver services
 - Cash & Counseling
 - Money Follows the Person
 - Managed long term services & supports accelerating
 - Long term care insurance
- Facility based care
 - Assisted living
 - Board and care homes
 - Rehabilitation facilities
 - Nursing homes

Society

- Expectation that people will be able to live at home
- Informal care
 - Family caregivers
 - Care by neighbors/friends, paid and unpaid
- Access, service provision
 - Urban, suburban, rural, frontier issues
 - Planning for long term care needs
 - Aging and disability resource centers
 - Public/private sources of service provision
 - Private pay/private insurance



Society

- Increased demand for:
 - Services
 - Quality services
 - Appropriate services: cultural, religious, therapeutic
 - Choice, kind, time, location, duration
 - Home and community based services
- Diversity
 - Racial/ethnic
 - Functionality
 - Health
 - Age cohorts, different cohorts, different attitudes/expectations



Society

- Baby boomers
 - Health oriented
 - Spend more, consume more health services, visit doctor more
 - Due to increased life expectancy, viewed as “healthy”, but have higher rates of hypertension, diabetes, obesity, and high cholesterol than previous generations*
 - Work centric
 - Continue to work past regular retirement age
 - Women in the work force
 - Independent
 - Change oriented

*King, et al. Status of Baby Boomer's Health in U.S. Healthiest Generation?. JAMA Intern Med 2013

Science

- Nutrition knowledge
 - Dietary Reference Intakes Food & Nutrition Board, Institute of Medicine National Academy of Sciences
 - *Dietary Guidelines for Americans* U S Departments of Health & Human Services & Agriculture
 - Dietary Approaches to Stop Hypertension, National Heart Lung Blood Institute of the National Institutes of Health
 - Total Diet Approach Academy of Nutrition & Dietetics
- Health knowledge
 - National Institutes of Health
 - National Institute on Aging

Science

- Health promotion, disease prevention, disease management
 - Centers for Disease Control
 - Health finder
 - Health information
- Health data
 - Chronic condition data warehouse
 - Key Indicators of Well Being
 - Centers for Disease Control and Prevention,
 - Agency for Health Care Research and Quality
 - Trust for America's Health

Business

- For Profits
 - Expanding into non-traditional markets
 - Venture capitalists
 - Competing services
 - Restaurants, grocery stores, fitness options
- Not for Profits
 - Becoming more entrepreneurial, social entrepreneurship
 - Developing community partnerships/collaborations
 - Identifying both public/private funding streams



Technology

- Improved service & delivery models
 - Computer software, record keeping, reporting, costing, nutrient analysis
 - Routing/scheduling software
 - Websites, listservs
- Improved foodservice equipment
 - Kitchen equipment
 - Packaging materials, designed for home delivered meals
 - Delivery equipment, designed for home delivered meals

Technology

- Changes in the food supply chain
 - Emphasis on local, fresh
 - Origin of food, fresh produce available year round
- Changes in food products
 - Healthier, lower sodium, lower fat, higher fiber, more whole grains
 - Packaging of foods and meals
 - Shelf life & quality
- Health focused food
 - Functional foods
 - Supplements
 - Probiotics



Technology

Food Trends

- Demographically Directed
- Still Cooking
- The Appeal of Americana
- Foodie Focused
- Get Real

Food Trends

- The New Nutrients
- Specialty Treats
- Three Squares
- Prescriptive Eating
- Home Rituals

Top 10 Food Trends, Institute of Food Technology, April 2011, Volume 65, No.4

Resources

- Decreasing public funding
 - NASUAD & AARP Public Policy Institute: *On the Verge: Transformation of Long Term Services & Supports* February, 2012
 - NASUAD & AARP Public Policy Institute: 2012 State & Disabilities Survey, January, 2013, Decreasing state funding
 - Decreasing federal funding
 - Changes in Medicaid Waivers
- Competition for limited public funding
- Trend towards social entrepreneurship
- Human resources, volunteerism changes, aging volunteers, but new opportunities
- Need to develop efficiency, community partnerships, alternative funding, more volunteer efforts
- Public/private sources demanding performance data

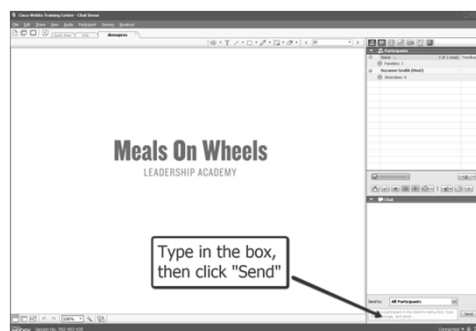
Questions

Are there any questions?

Please type your questions in the webinar "Chat" box.

Make sure "Send to" says "All Participants"

Then click "Send"



Proposed Components of a Quality Nutrition Program

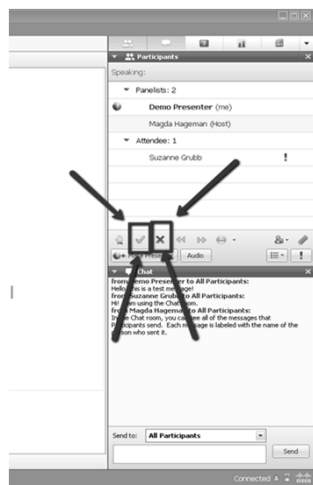


Planning

Technical Assistance Support Center

- Strategic planning: where are you going & how are you getting there
- Major Activities for Strategic Planning
 - Strategic analysis
 - Strategic direction
 - Action planning
- Models of Strategic Planning
 - Vision-based or goals-based
 - Issues-based
 - Alignment model
 - Scenario planning
 - Self-organizing planning
 - Real time planning

Audience Response



Does your organization have a strategic plan?

If YES: Click the **Green Check**

If NO: Click the **Red X**

(buttons are located on the right side of your screen)



Planning

Technical Assistance Support Center

- Business Planning
 - E.g., David Lavinsky*
 - 4 questions of 10 critical questions for a business plan
 - 1 line description of what you do
 - What is your financial model?
 - What is your action plan for success?
 - Why is your organization uniquely qualified?
 - Other critical questions

* (See: <http://www.growthink.com/about-us>)

Operations

Services

- Meals
- Nutrition education
- Nutrition counseling
- Nutrition screening & assessment
- Activities that enhance social connectedness
- Active learning



Services

- Active civic engagement opportunities
- Physical activity programs
- Health promotion/disease prevention programs
- Chronic disease self management programs
- Caregiver/family support
- In home services



Operations

- Methods of production/delivery - Meals
 - Small self production, non-profit
 - Large self production, satellite to other locations, non-profit
 - Contracts with for profit caterers
 - Contracts for other meal products such as frozen meals
- Methods of development/delivery – Nutrition education/counseling, medical nutrition therapy
- Steps necessary to provide to provide the product (meal, nutrition education, etc.) and services
- Capacity, expertise, human resources
 - Use of registered dietitian in all program aspects

Operations

Define Your Product Based on Customer Wants/Needs

- Meets standards, especially for healthy eating
- Choice in menu, including cultural & dietary choices
- Attractive presentation of food
- Knowledgeable & friendly staff
- Variety of supportive programs, services and activities
- Pleasant, welcoming, supportive environment
- Participant input
- Volunteer opportunities
- Congregate-Adequate transportation & parking
- Evidence based nutrition education/counseling

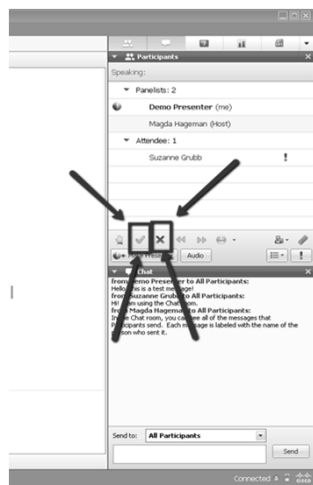
Operations

Meals to meet cultural/ethnic/religious needs

- Hispanic (Caribbean, Mexican, Central American, South American, etc.)
- Asian (Indian, Chinese, Japanese, Korean, Hmong, Vietnamese, etc.)
- Pacific Islander (Hawaiian, Samoan, etc.)
- African American (regional differences)
- Eastern European (Russian, Ukranian, Slovenian, etc.)
- Kosher, Halal
- States: AZ, CA, FL, MA, MI, MN, NJ, NY, OH, TX, WA, WI
- Resource: [Senior Nutrition Programs Promising Practices for Diverse Communities](#)



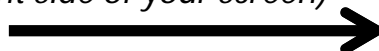
Audience Response



Does your program offer menus to meet cultural/ethnic diversity?

If YES: Click the **Green Check**
If NO: Click the **Red X**

(buttons are located on the right side of your screen)



Collaboration/Coordination/Coalition/Integration

- Leverage
 - Influence, control
- Collaborate
 - Work together, cooperate, partner
- Coordinate
 - Organize, manage, match-up
- Coalition
 - Alliance, merger, partnership, association
- Integrate
 - Incorporate, combine, put together
- How do we leverage, collaborate, coordinate, and integrate nutrition services as seamlessly as possible into a comprehensive and coordinated home and community based service system?

Collaboration/Coordination/Coalition/Integration Parallel Systems Influence Service Provision

Older Americans Act Service System	<ul style="list-style-type: none"> • State Units on Aging, Area Agencies on Aging, Local Nutrition Service Providers • Part of a comprehensive & coordinated home and community based service system
Home & Community Based Service System	<ul style="list-style-type: none"> • Medicaid Waiver Programs, Managed Care Organizations • State/county funded systems & services
Public Health System	<ul style="list-style-type: none"> • State/county/city health departments • Chronic disease self management programs, BRFS • Food safety & sanitation, nutrition & health education
Health Care System	<ul style="list-style-type: none"> • Direct Health Care system, physicians, hospitals, nursing homes, rehabilitation centers, • Transition care, Medical Nutrition Therapy
Food Assistance System, Programs Funded by USDA	<ul style="list-style-type: none"> • SNAP, SNAP-ED, TEFAP, CSFP, CACFP, SFMNP • Food stamps, food banks/pantries, soup kitchens, community gardens
Private Pay Systems	<ul style="list-style-type: none"> • Fee for Service based on fair market value • Insurance companies, managed care companies • Private case management
Private Industry	<ul style="list-style-type: none"> • Restaurants, carryout, fast food, healthy fast food • Frozen /other packaged meals, grocery stores, home delivery by post

Collaboration/Coordination/Coalition/Integration Chef Charles Club

- Nutrition education collaboration
 - Partners: Departments of Public Health, Elder Affairs, Human Services, and area agencies on aging
 - Offered at sites where 50% of participants are at or below 185% of poverty
- Funded by Supplemental Nutrition Assistance Program of USDA
- Monthly newsletter and instructor's guide
 - Fruit and vegetable intake
 - Low-fat milk and calcium rich foods
 - Physical activity
 - Food safety
 - Healthy, low-cost recipes and snack ideas



<http://www.idph.state.ia.us/INN/ChefCharles.aspx>

Collaboration/Coordination/Coalition/Integration

Action for Boston Community Development, Inc. (ABCD)

- Benefits enrollment, nutrition education, financial management collaboration
- Partners: ABCD, MA Department of Elder Affairs, Brandeis University, AARP Foundation
- Elder Services – Food Dollars Program
- Objectives
 - Promote healthy eating
 - Reduce food insecurity, improve financial literacy & enrollment in food assistance programs
 - Targeting African Americans & Latino elders
- Built on community partnerships
- Report, January, 2013

<http://www.bostonabcd.org/services.aspx>



Business Capacity & Acumen

- Culture change
- Partnerships
- Costing, pricing, fair market value, packaging of services
- Negotiating
- Scaling (cash flow, capital)
- Accepting, managing risk
- Marketing, communicating
- Applies to public/private funding

Business Capacity & Acumen

Culture Change Accommodating Consumer Choice

- Time
- Service location or place
- Restaurant voucher programs
- Café style service
- Menu, more than 1 menu
- Food item choice
- More than 1 meal/day
- Fee for service/private pay options
- Customer service emphasis

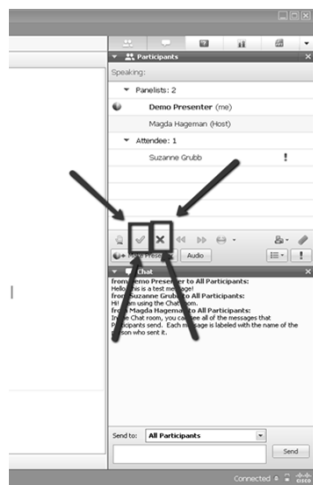
Business Capacity & Acumen

Tarrant County TX Meals on Wheels

- In 39 years served 15,935,712 meals in Tarrant County
- Offers **choice of meals & services**
 - Choice of home delivered meal, **2 meal choices**
 - **Breakfast & lunch**
 - Case management
 - HomeMeds, in-home medication management program
 - Healthy Aging & Independent Living (HAIL) Program
 - One on one in-home nutrition & health counseling, targeting diabetes, in conjunction with a university and student interns

<http://mealsonwheels.org/mow/default.aspx>

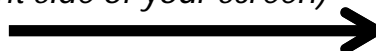
Audience Response



Does your programs offer a choice of menus or food items daily?

If YES: Click the **Green Check**
If NO: Click the **Red X**

(buttons are located on the right side of your screen)



Business Capacity & Acumen

Create a Valued Product

Consumers Value Program Participation

	Home Delivered	Congregate
Able to eat healthier foods	83%	78%
Meal enabled living at home	92%	60%

AoA Survey of OAA Participants, December, 2011, <http://www.agidnet.org>

Business Capacity & Acumen

Components of a Business Plan

- An Executive Summary
 - Including the objectives of the plan, the mission of the organization and, important keys to success
- A Company Summary
 - Including your company history and ownership information
- A Service(s) Description
 - Including a competitive comparison and your proposed sales literature

Business Capacity & Acumen

Developing a Business Plan - Communication

- A good business plan:
 - Sets a course, builds a bridge
 - Shows how you are going to get from here to there
 - Answers your stakeholders & critics questions
 - Educates
 - Your Community
 - Your Staff
 - Your Clients and Stakeholders
 - Your Funders
 - Answers the tough questions
 - Shows data to support the success of the plan

Little, R.. Making a Profit in a Non-Profit World, 2008., Senior Services, Kalamazoo, MI

Business Capacity & Acumen

Determine Your Market - Communication

- Who are your participants/clients/consumers
 - Only those targeted by the OAA OR
 - All older adults in the community regardless of income who need your services
- What is your “niche”
 - What do you do that is different, unique, desirable?
- Who are your stakeholders?

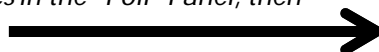
Littke, R.. Making a Profit in a Non-Profit World, 2008., Senior Services, Kalamazoo, MI

Audience Response

Who does your program currently target for service? *(Check all that apply)*

- Populations under 60
- All populations over 60
- Over 60 + High nutritional risk
- OAA targeted populations
(minority, low income, rural)
- Others
(If “others,” please describe in the Chatroom)

Please choose your responses in the “Poll” Panel, then click the “Submit” button.



Funding/Resource Streams

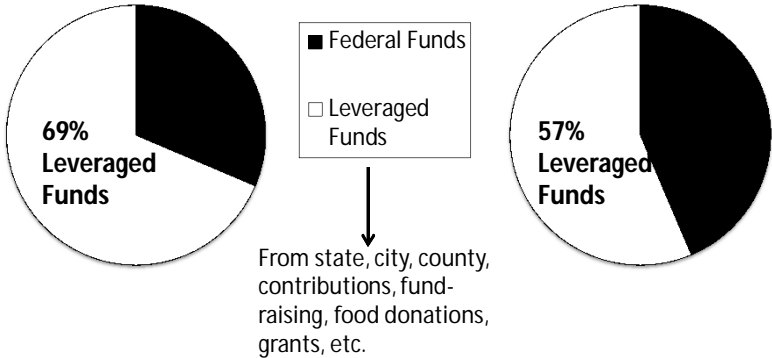
- Public
- Private

Funding Resource Streams

OAA Nutrition Program Leveraged Funding

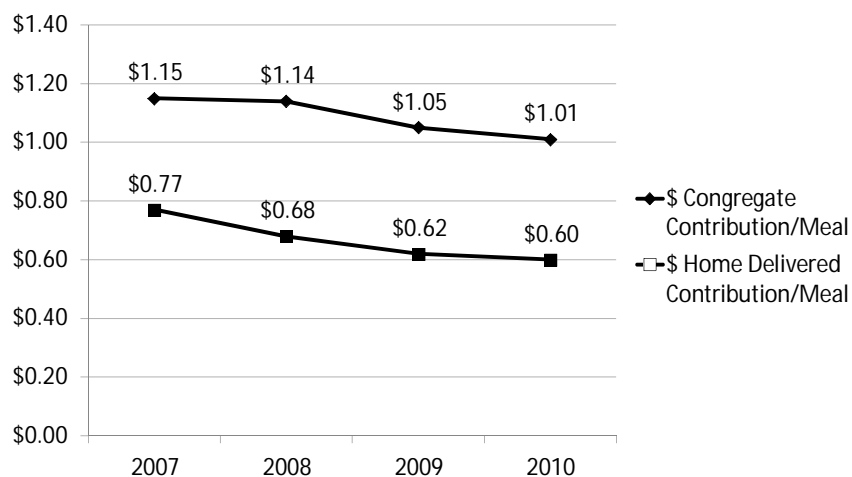
Home Delivered Meals

Congregate Meals



State Program Reports http://www.aoa.gov/AoARoot/Program_Results/SPR/Index.aspx

Funding/Resource Streams OAA Nutrition Program Contributions/Meal



State Program Reports http://www.aoa.gov/AoARoot/Program_Results/SPR/Index.aspx

Funding Resource Streams OAA Nutrition Program Expenditure Trends

Year	Expenditure/Meal		Expenditure/Participant	
	Congregate \$	HD \$	Congregate \$	HD \$
2010	6.64	5.34	376.00	895.00
2009	6.75	5.30	383.00	902.00
2008	6.96	5.14	379.00	830.00
2007	6.61	5.13	369.00	791.00

Since 2007, in general, congregated and home delivered meal expenditures have increased, but not consistent year to year.

Since 2007, total expenditure per participant has increased.

State Program Reports, http://www.aoa.gov/AoARoot/Program_Results/SPR/Index.aspx

Funding/Resource Streams Revenue Sources

Public/Government

- Older Americans Act
 - Title III (C1, C2, NSIP), V, VI
 - Potential decreases
 - Congressional appropriations
- Older Americans Act match
- Other federal
 - Social services or community service block grants
- State
 - Funding, programs vary by state
- County/City
- Medicaid Waiver
 - From fee for service to managed care
- Grants

Private

- Participant contributions
- Fund raising
- Third party payments & insurance
- Private pay
- Payment for other services such as catering
- Payment for other programs, USDA child nutrition programs
- Grants from organizations such as United Way, or private foundations

Funding/Resource Streams Public Pay & Private Pay

- All clients are offered services on a “Donation Only” basis
- All clients have full pay option explained
 - Other stakeholders can be involved
- All clients are informed about limited (donation only) services
- Other stakeholders often want to help pay for additional services

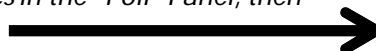
Littke, R.. Making a Profit in a Non-Profit World, 2008., Senior Services, Kalamazoo, MI

Audience Response

Which of the following funding streams does your program currently access? (Check all that apply)

- a. OAA
- b. Medicaid Waiver fee for service
- c. Medicaid Waiver managed care
- d. State only funding
- e. City/county only funding
- f. Health insurance
- g. Private or self pay
- h. None of the above

Please choose your responses in the "Poll" Panel, then click the "Submit" button.



Funding/Resource Streams

Sources of Organizational Abundance – James Firman, NCOA

- Self Pay
- Increase client incomes to pay for services
- Health insurance & 3rd party pay
- Donations-Ask & you will receive
- Investing wisely in volunteers
- In-kind support

Funding & Sustainability, NCOA <http://www.ncoa.org/get-involved/funding-sustainability/>

Funding Resource Streams

Sources of Organizational Abundance – James Firman, NCOA

- Strategic partnerships with business
- Strategic alliances with other non-profits & government agencies
- Social entrepreneurship-creating a new business venture
- Community building & fundraising on the internet
- Foundations & government
- Advocacy

Funding & Sustainability, NCOA <http://www.ncoa.org/get-involved/funding-sustainability/>

Funding/Resource Streams

Social Entrepreneurism

- Three Cs
 - Core competencies
 - Capability
 - Constituencies
- Examine your assets
 - Tangible, intangible
- Identify your weaknesses
 - Partner with organizations that correspond to your weaknesses

Funding & Sustainability, NCOA <http://www.ncoa.org/get-involved/funding-sustainability/>

Funding Resource Streams

Lifecare Alliance-Columbus OH



- Social Entrepreneur – Private Non-Profit
- Programs
 - Nutrition: Meals on Wheels, Senior Dining Centers, Groceries to Go, Senior Farmers Market, Project Open Hand
 - Health & Wellness: Columbus Cancer Clinic, Wellness Centers
 - In Home Services: Help at Home, Visiting Nurse Association
 - IMPACT Safety, fee for service safety program for men, women, teens
 - Catch the Corporate Wellness Spirit, adult immunizations & travel vaccines, worksite wellness, 37 business sites
- Foodservice entrepreneurship
 - Carrie's Café – restaurant & wellness center, open to the public as well as Title III nutrition participants
 - Meals for Kids Program- afterschool care program meals for children
 - LA Catering- for profit catering company
 - Wedding menu, bar menu, lunch & learn menu, seasonal specials, preferred caterer for 15 venues

<http://www.lifecarealliance.org/>

Performance and Evaluation

- Performance
- Evaluation

Performance

- Definition
 - Form of Program Assessment
 - Ongoing monitoring & reporting of accomplishments
 - Progress toward an established goal
 - May be conducted by experts internal to the program
- Measures may address
 - Type/level of program activity
 - Direct products/services delivered (outputs)
 - Results of products/services (outcomes)
- Definition of “program”
 - Any activity, project, function, policy with an identifiable purpose or set of objectives

Performance Measurement & Evaluation: Definitions & Relationships.
GAO-05-739SP, May, 2005 <http://www.gao.gov/>

Evaluation

- Definition
 - Form of Program Assessment
 - Individual systematic studies conducted periodically to assess how well a program is working
 - Typically conducted by experts external to the program
- Examines achievement of program objectives in context of other aspects of program performance
- Purpose: learn benefits/how to improve program
- 4 types
 - Process (Implementation) Evaluation
 - Outcome Evaluation
 - Impact Evaluation
 - Cost-Benefit or Cost-Effectiveness Analysis

Performance Measurement & Evaluation: Definitions & Relationships.
GAO-05-739SP, May, 2005 <http://www.gao.gov/>

Performance and Evaluation

Different Focus & Different Use

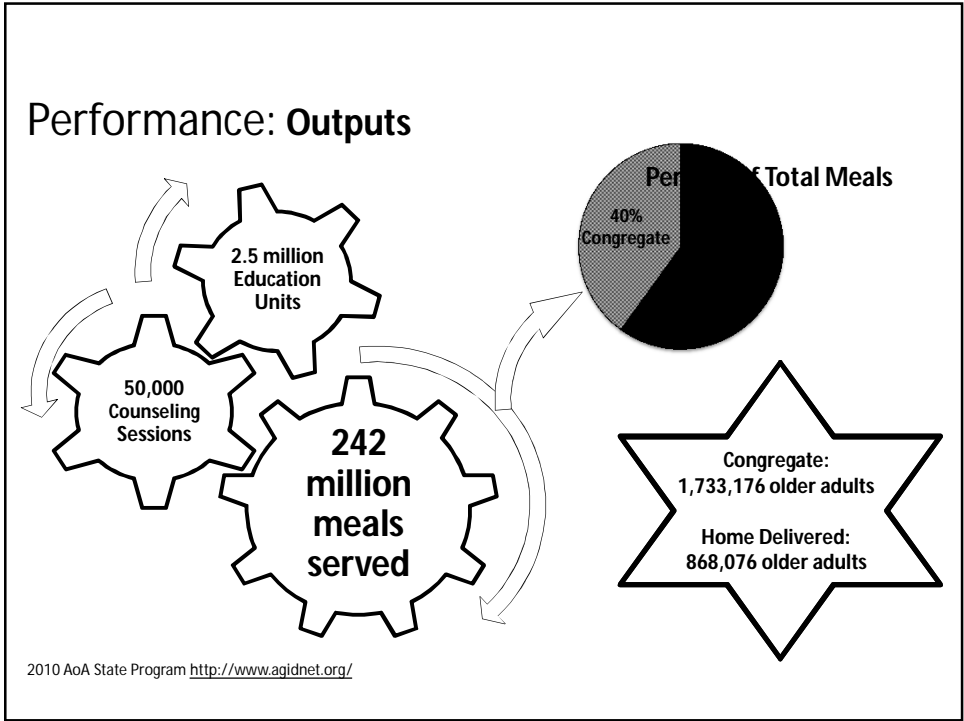
- Performance Measurement
 - Has the program achieved its objectives as expressed by measurable standards
 - Answers the questions: what, how

- Program Evaluation
 - Broader range of information & context
 - Examines aspects of program operations or factors in program environment that contribute/impede success
 - Estimates what might occur without the program
 - Compares effectiveness of alternative programs with the same objective
 - Provides an in-depth examination of the program performance & context to improve results
 - Answers the question why

Performance Measurement & Evaluation: Definitions & Relationships. GAO-05-739SP. May, 2005
<http://www.gao.gov/>

Performance

- Outputs
- Standards
- Quality
- Monitoring
- Outcomes



Performance Standards

OAA Sections 339, 601

- 2010 *Dietary Guidelines for Americans*
- Dietary Reference Intakes
- Food Safety Code

Dietary Guidelines for Americans 2010

Dietary Reference Intakes

Food Code
U.S. Public Health Service
FDA
2009

Performance: **Quality**

Participant assessment of meal & services

Question	Congregate%	Home-delivered%
Rating of meal good to excellent	92	88
Satisfied with food taste Always/usually	80	75
Satisfied with variety of food Always/usually	82	77
Rate the program overall Excellent/very good	71	65
Recommend to a friend	95	96

National Survey of OAA Programs, 2011, Administration on Aging <http://www.agidnet.org/>

Performance: **Quality**

Participant Assessment of Meal Changes in Past 12 Months

Characteristic	% Congregate	% Home Delivered
Noticed change	25	23
Food quantity decrease	27	29
Food quality decrease	22	23
Meal service less often	1	1
Fewer meals served	1	0
Fewer food choices	12	10
More cold/frozen meals	3	2

National Survey of OAA Programs, 2011, Administration on Aging <http://www.agidnet.org/>

Performance: **Monitoring** Principles of Menu Planning

Aesthetic appeal:

- Enhance taste
- Strive for balance
- Emphasize variety
- Add contrast:
texture & temperature
- Think about color
- Consider eye appeal



Performance: **Monitoring** Preferences

- Culture, ethnicity, traditions
- Religion, holidays, celebrations
- Family
- Region of the country
- Health
- Age, generational cohort
- Gender



Performance: **Monitoring Standards, Appeal Monitoring**

Aesthetic Appeal

- Taste
- Balance
- Variety
- Contrast: temperature, texture
- Color
- Eye appeal

Nutrient Content

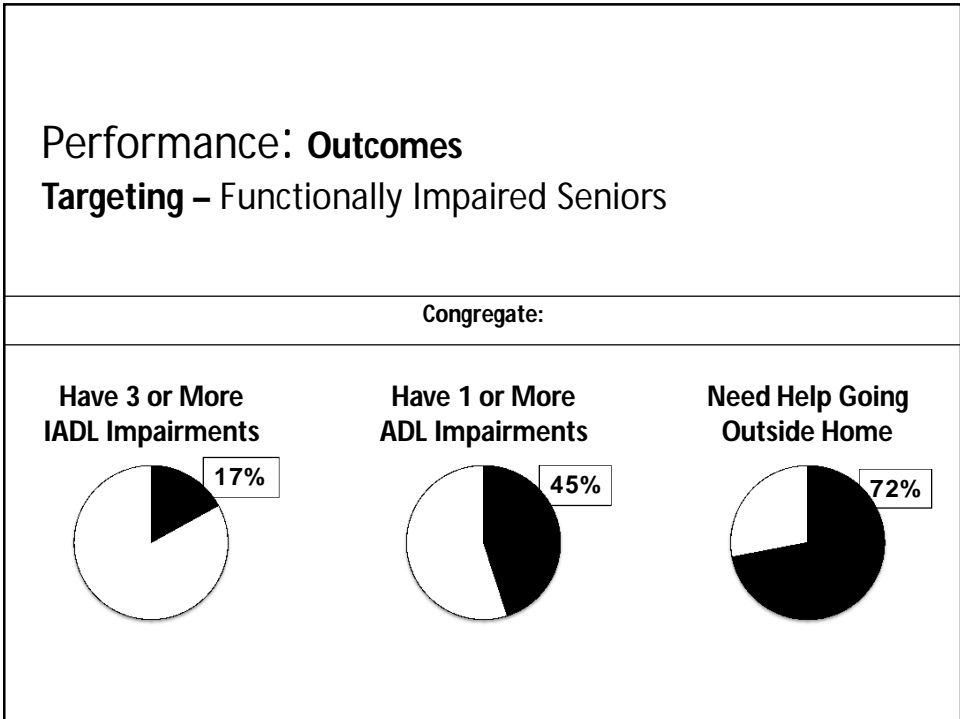
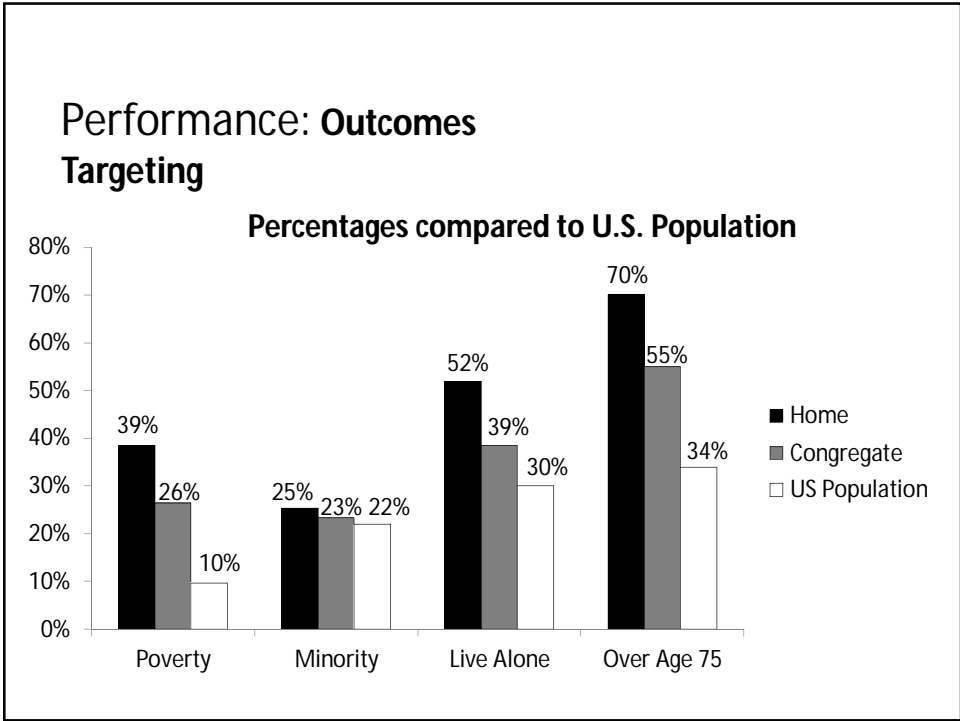
- Fruits & vegetables
- Lean protein
- Whole grains
- Low-fat dairy
- Lower fat preparation
- Lower sodium foods
- Lower added sugars

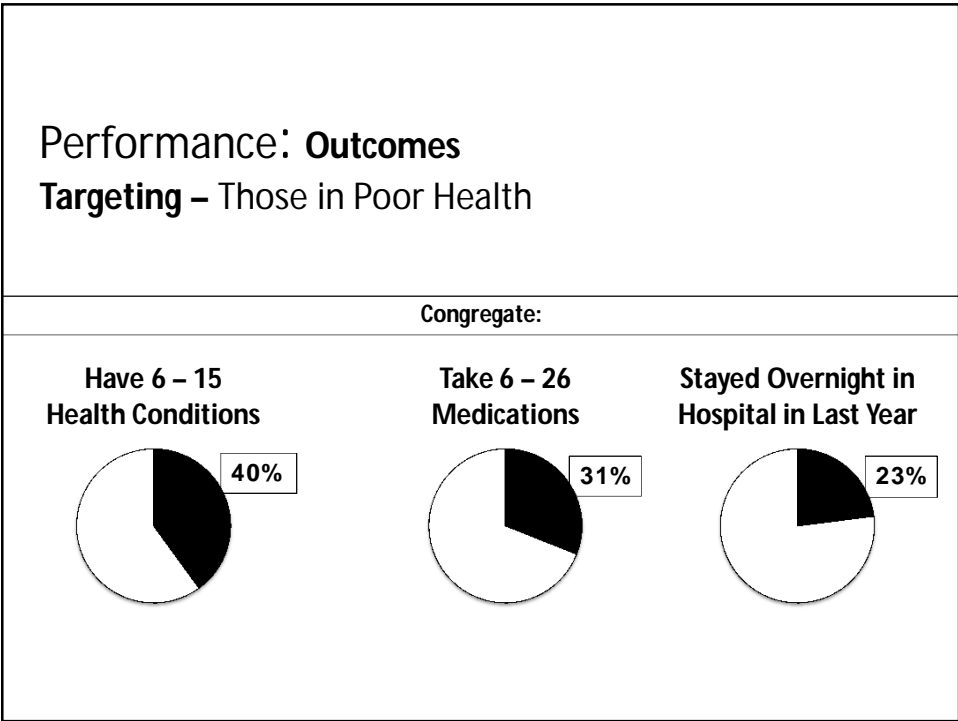
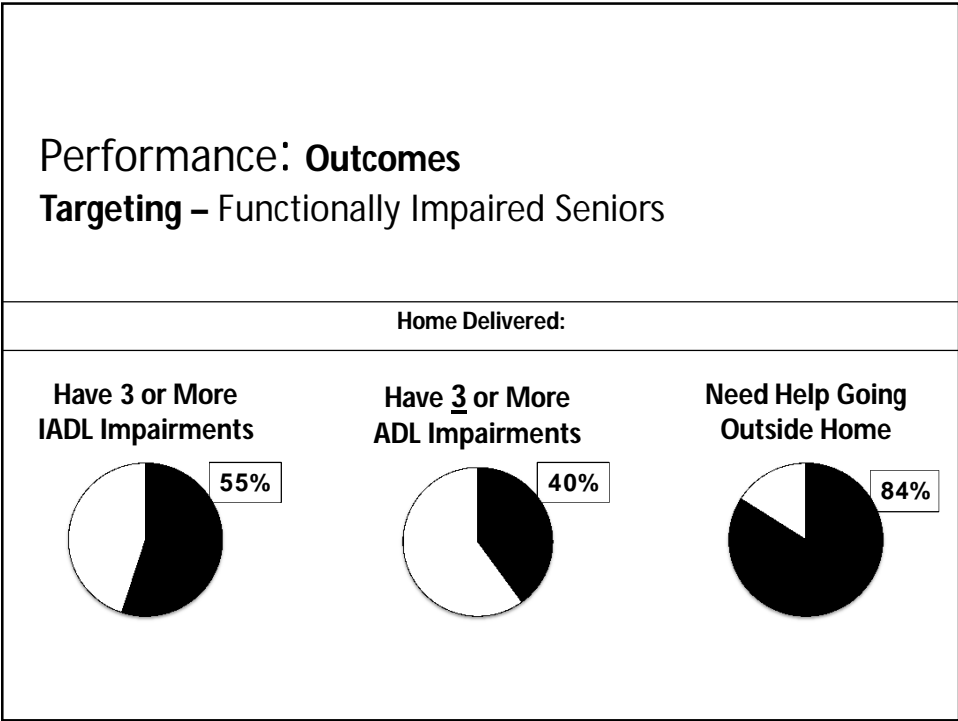
Performance: **Outcomes Targeting for Nutrition Services**

- Greatest social need
- Greatest economic need
- Low income
- Low income minorities
- Rural
- Limited English proficiency
- Risk of institutionalization



OAA Sections 102, 305, 306, 331, 336, 339, CFR 1321.69
http://www.aoa.gov/AoARoot/AoA_Programs/OAA/index.aspx

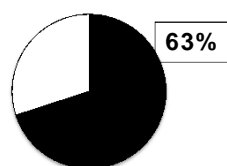




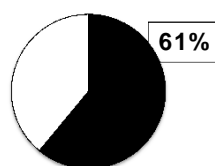
Performance: **Outcomes**
Targeting – Those in Poor Health

Home Delivered:

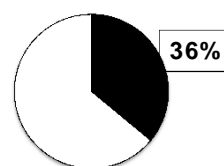
Have 6 – 15
Health Conditions



Take 6 – 26
Medications



Stayed Overnight in
Hospital in Last Year



Performance Outcomes:
Targeting – At Risk Participants

Characteristic	% Congregate Meals Participants	% Home Delivered Meals Participants
Poverty	26	39
Receive Food Stamps	7	15
Single meal provides ½ or more of total food for the day	51	61
Don't have enough \$ or food stamps to buy food	11	8
Take 5+ Medications	31	61
Choose between food & medications	9	18
Choose between food, rent & utilities	6	12

AoA Survey of OAA Participants, December, 2011, <http://www.agidnet.org/>

Performance Outcomes: Perceived Benefits

Characteristic	% Congregate Participants	% Home Delivered Participants
Meal enabled living at home	60	92
Eat healthier foods as a result of the program	78	83
Eating meals improves health	78	87
Meals help feel better	85	90
See friends more often	83	NA
Recommend to a friend	96	96

National Survey of OAA Participants, December, 2011, <http://www.agidnet.org/>

Performance Outcomes: Using Data for Advocacy— Michigan Approach

- Profile of MI HDM clients
- Profile of funding pressures
- Participant assessment of services
- State funding contribution 17%
- State value
 - Leveraging funding sources
 - MI employment, programs averaged 27 FTE
 - Compared HDM expenses to other more expensive services to demonstrate value such as personal assistance, home care, home maker, chore
 - Volunteer hours contributed
 - Amount of food purchased from MI companies, specific targets to increase food purchased from MI companies
- State advocacy message: The aging network provides in-home support services and meals for \$4.72/person/day, the price of a premium cup of coffee. The MI HDM supports MI employment and agriculture.

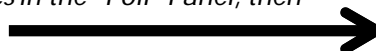
Overview: *The Value and Outcomes of Michigan's Home Delivered Meals for the Elderly Program Report*, Area Agency on Aging1-B Southfield, MI Senior Nutrition. Karen Jackson

Audience Response

What kind of outcome measures does your program use? (Check all that apply)

- a. Participant characteristics
- b. Participant assessment of services
- c. Documentation of health care utilization
- d. Documentation of efficiency
- e. Other
(Please describe in the chat)
- f. Not Applicable

Please choose your responses in the "Poll" Panel, then click the "Submit" button.



Performance Evaluation

Savings of Nursing Home Costs

- **Home delivered meals reduces nursing home use.**
- States that invest in community based service networks, particularly home delivered meals have proportionally fewer low-care nursing home residents.
- Increased investment in OAA services affects the general population and sustains them longer in the community.
- Follow up analysis lists states which invest the most and least
LTCFocus.org

Thomas, K & Mor, V. The Relationship between Older Americans Act Title III State Expenditures & Prevalence of Low-Care Nursing Home Residents. Health Services Research. 12.3.12 <http://onlinelibrary.wiley.com/doi/10.1111/1475-6773.12015/abstract>

Training & Technical Assistance

<http://nutritionandaging.org>

- “Momentum: Advancing into Future Readiness”
 - Register for the next in the webinar series:
<http://nutritionandaging.org/momentum>
- Online library
 - Nutrition, Food & Health
 - Professional Development
 - Resources & Tools
 - Public Policy
 - Provider Operations & Tools
- Topic guides
- Proceedings of Perspectives of Nutrition and Aging: A National Summit <http://nutritionandaging.org/summit>
 - Perspectives Challenge, Best & Promising Practices

Resources

To access the sources cited in this presentation, as well as additional supporting resources, please see the Topic Guide in the Online Library

[http://nutritionandaging.org/
guide-quality-program](http://nutritionandaging.org/guide-quality-program)

OAA Performance & Evaluation

- Administration for Community Living, Administration on Aging Budget <http://www.aoa.gov/AoARoot/About/Budget/index.aspx>
- Performance data sources <http://www.agidnet.org/>
- Evaluation tools, evaluation of the OAA Nutrition Program http://www.aoa.gov/AoARoot/Program_Results/Program_Evaluation.aspx
- OAA Performance Research Briefs http://www.aoa.gov/AoARoot/Program_Results/OAA_Performance.aspx

Summary

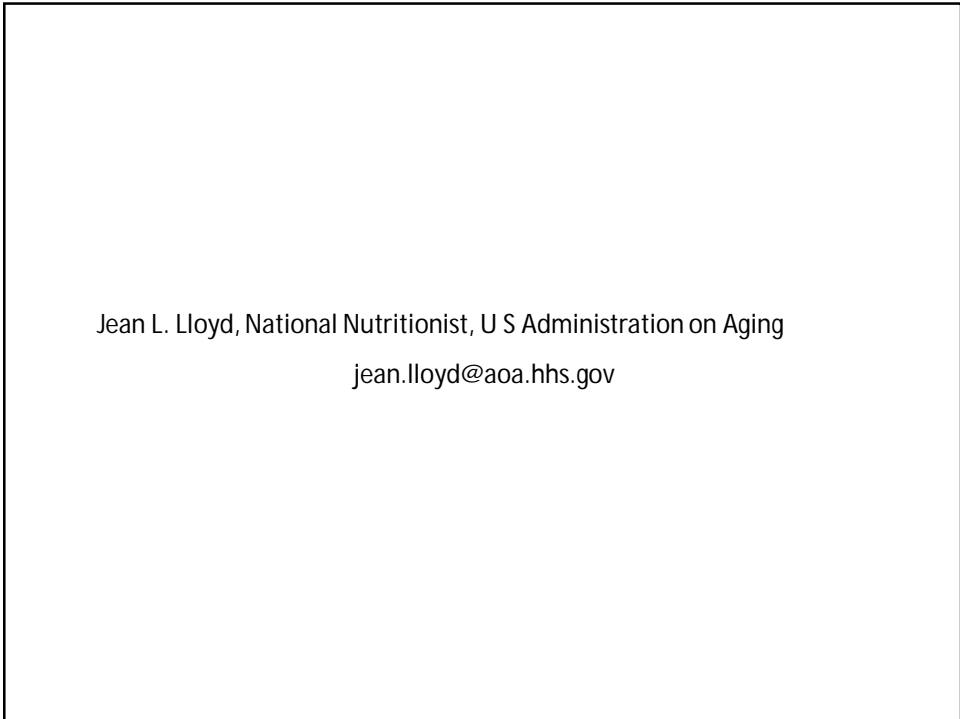
We face a time of increasing diversity in the people we serve, changing environments, and changing services.

Together, we can modernize service provision through quality service provision.

For more information about ACL

U.S. Department of Health and Human Services, Administration on Community Living, Washington DC 20201, www.aoa.gov





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