

Meals On Wheels

LEADERSHIP ACADEMY

Making Informed Decisions to Build Capacity and Sustainability in Your Program

Presenters

Ashley C. McCumber, CEO of Meals On Wheels of San Francisco
and Audrey McCool, EdD, RD, LD, FAND

Facilitator

Magda Hageman-Apol

The webinar will begin at 3:30 p.m. Eastern Standard Time

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Program Outcomes

After participating in this program, you will:

- ✓ Appreciate the need for conducting program assessments
- ✓ Differentiate between internal and external program assessment
- ✓ Describe the assessment process
- ✓ Consider known benchmarking characteristics in program assessment evaluations
- ✓ Identify trends occurring within HDM meals today

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Quote for the Day

“Stay in the solution and your problems will die of neglect.”

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Overview of Meals On Wheels SF

Nourish the Whole Person

- Delivery of 14 Meals Per Week to Each Client (Hot / Chill / Frozen)
- Well Being/Safety Check by Delivery Drivers
- Nutrition Education and Counseling
- Social Work and Case Management
- Support for Client Needs (Safety Focus /Quality of Life)
- Volunteers To Assist Clients

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Overview of MOWSF cont.

- **\$10 million Budget**
- **57% Privately Funded / 43% Government**
- **3,400 Unduplicated Clients Annually**
- **Deliver 1.4 Million Meals Annually**
- **78 Full Time Employees / 25+ Subcontracting Employees**
- **Engage About 4,000 Volunteers Annually**

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Our Clients

- **67% live alone**
- **52% are women and 48% are men**
- **Age** 45% age 60 – 74 / 26% age 75 – 84 / 24% age 85+
- **Ethnicity** - Caucasian - 42% / African American - 29%
— Hispanic - 12% / Asian/Pacific Islander - 14% / Other - 3%
- **67% on modified diets**
- **96% of consider themselves low income and 75% live on SSI which is \$850 or less per month**

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Current State

- Since 2007 we have more than doubled in service in SF – 623K meals in 2007 – 1.4 million today
- We've expanded our volunteer services by 400%
- Ramped up our fundraising substantially
- Doubled the Social Work Team
- Created Efficiencies to Help Us Meet Demand

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MOWSF - Four Pillars of Success

- **Wait Time Not More Than 30 Days for Service; Emergency Need will Receive Services within 2-5 days.**
- **Quality Nutrition**
- **High Quality Relationships – Drivers / Social Workers / Volunteers**
- **Client Needs Beyond Nutrition, especially ensuring clients' safety in their homes.**

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Current State

in·flec·tion point

- a point of a curve at which a change in the direction of curvature occurs.
- (in business) a time of significant change in a situation; a turning point.

The time of transition of company's competitive position that requires the company change the current path and adapt to the new situation or risk declining profits.

**For Us This is a Risk to Our Ability
to Meet Our Mission, Not Accumulation of Profit**

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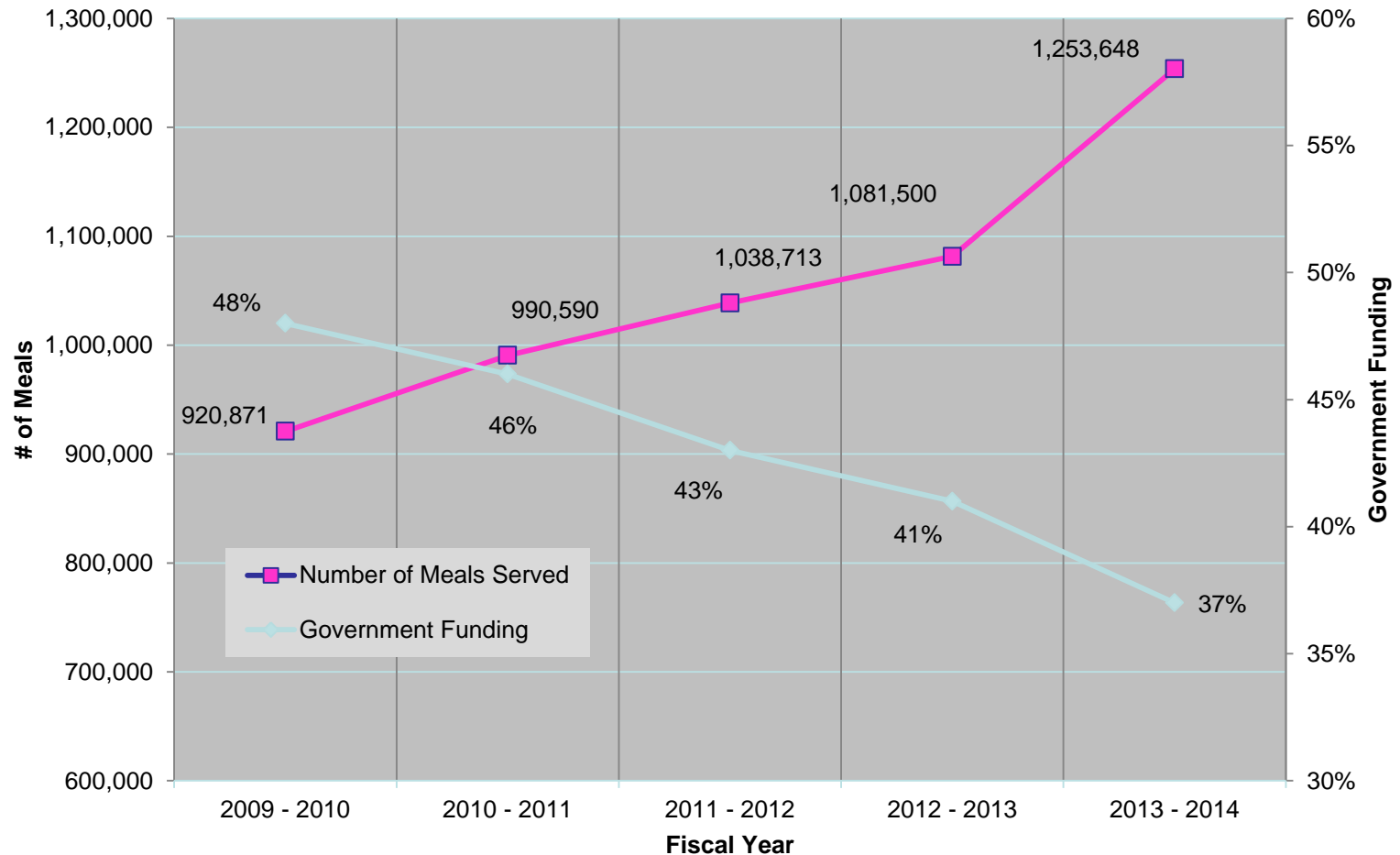
Why the Need for Change

- Government Funding Not Keeping Up – Recent Gains, but ...
- Fundraising Strong But Potentially Not Sustainable
- Boomer Wave Continues for Foreseeable Future and Clients Coming on Earlier – 11% growth each year for 3 years
- Need To Respond to Changes in Healthcare Landscape
- Taping into Reserves to Balance Growth
- Need a New Kitchen and Offices by 2019

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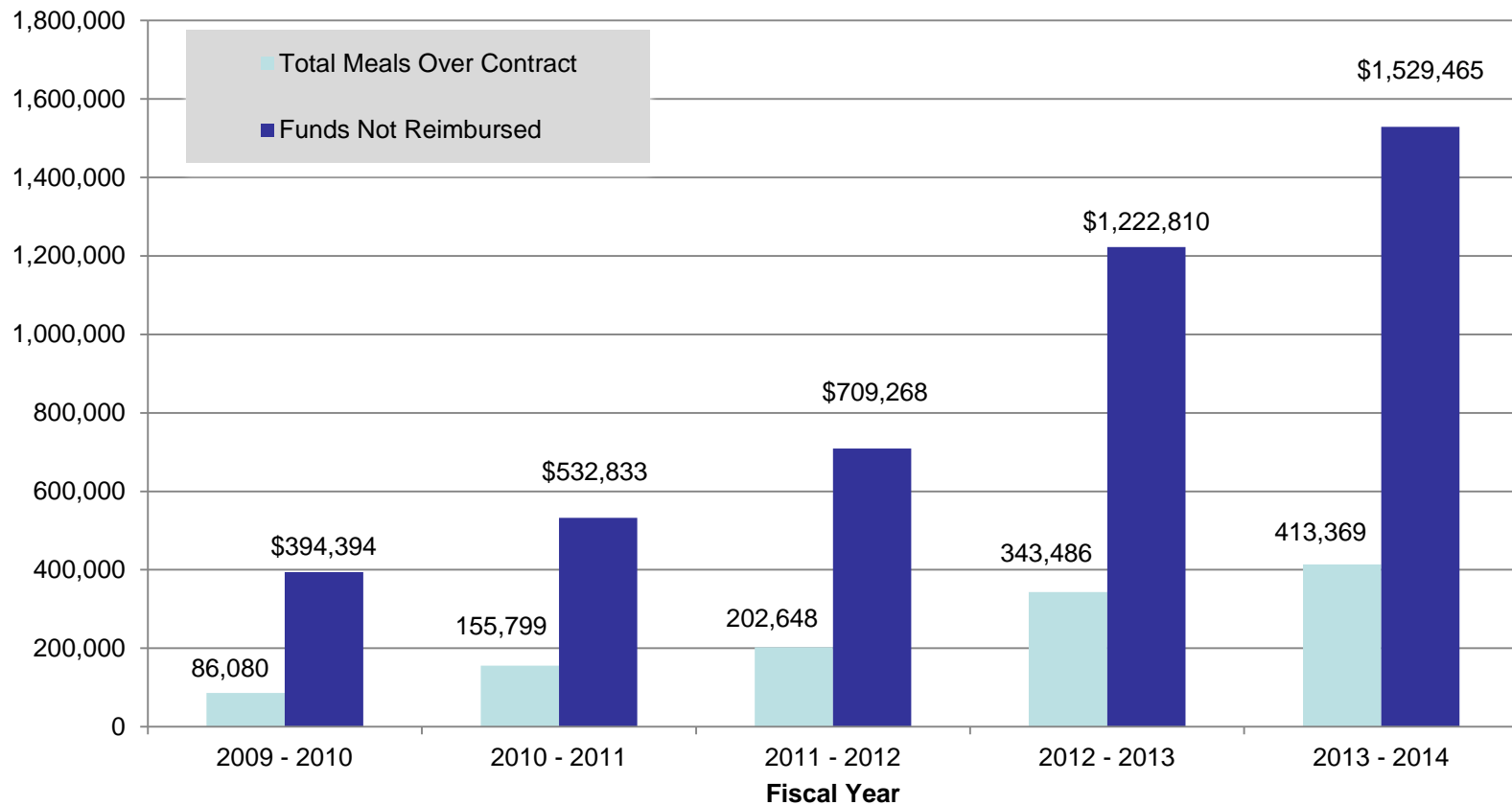
GOVERNMENT FUNDING TREND / AS % OF OVERALL FUNDING



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GAP IN FUNDING MEALS



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Need For Assessment

- Needed Independent Review and Benchmark to Demonstrate to Board the Need for Change and Continued Growth
- Should We Continue or Current Kitchen and Food Strategy?
- Are We Competitive with Other Providers?
- When Do We Hit the Wall on Current Kitchen Production?
- Where's the Greatest Potential for Diversification of Revenue?

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Steps Taken in Assessment/Benchmarking

- **Called Meals On Wheels America for Recommendation for Consultant (June of 2013)**
- **Dedicated Resources to Consultant (FY'14 Budget)**
- **Engaged Dr. Audrey McCool (August 2013)**
- **5 month Process**
- **Full Presentation to the Board (January 2014)**
- **Board Retreat in May 2014**

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Additional Projects and Considerations

- **Deloitte Pro-Bono Consulting Team Provides a 24-month IT Roadmap / Plan (March 2014)**
 - Streamline IT Solutions and Eliminate Duplication
 - Go Paperless
 - Be Data Driven – Prove Value / Make Better Investments
 - Be More Efficient
- **Potential Formation of a MSO for San Francisco to Compete for Healthcare Contracts**

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Why Do Program Assessment

- Determine where you are now – What's actually happening in your organization
- Identify how your organization is doing relative to other, similar organizations
- Identify existing/potential problems within your organization
- Identify existing/potential strengths within your organization
- Identify if your organization's mission/goals/objectives are being met
 - If not – why not??

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Why Do Program Assessment

- Identify potential opportunities for cost savings within the organization's operations
- Identify unmet needs for services within your community
- Identify potential opportunities for new revenue sources
- Justify the need for your organization to exist within your community

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Internal Assessment

ADVANTAGES:

- Can be done at any time
- Should reflect the organization's mission, vision, goals, and objectives
- Can be limited to and focused on a particular area of concern
- Less costly than an external assessment

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Internal Assessment

DISADVANTAGES:

- May be biased from internal “politics”
- May be done to justify predetermined action
- May not “see the forest for the trees”
- Easy to never get around to completing
- May be discounted by the Board of Directors as a basis for decisions/action

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External Assessment

ADVANTAGES:

- Time frame planned for – so actually gets completed
- Outside review may identify problems/solutions not recognized by staff
- Reduces the possibility of a biased assessment
- Outside opinion often helpful in presenting problems/solutions to the Board of Directors
- Brings outside expertise into the organization
- Helps eliminate internal politics and/or friction among the staff

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External Assessment

DISADVANTAGES:

- Can be expensive – need to weigh cost/benefit of outside reviewer
- External reviewer may not understand the purpose (mission/vision/goals/objectives) of the organization
- May not be able to have assessment done in needed time frame
- Outside reviewer may not have appropriate experience/qualifications

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Assessment Process

- **Identify concerns that are indicating the need for assessment**
 - Discuss need for assessment with:
 - Staff (generally senior staff)
 - Board
- **Determine the purpose of the assessment**
- **Be specific in what you want the assessment process to accomplish**
 - May be focused on one particular area
 - Be prepared to find that the one focal area may lead to the need to assess related areas
 - May be broad-based
 - Multiple program areas
 - The program as a whole

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Common Program Concerns

NEW CHALLENGES:

- Changing client demographics and expectations – the aging of the Baby Boomers
- Changes in family patterns
- Increasing marketplace competition
- Need to generate “profit” from new “lines of business” to have resources for programs
- Rapid increase in demand for services – especially home delivered meals
 - Need to find new ways to increase service capacity
 - Need for new revenue sources – no increases in government funding

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Common Program Concerns

NEW CHALLENGES:

- Increasingly frail client population
- Clients who are physically challenged
- Increased disparity between fixed incomes and cost of basic necessities
- Need to provide more than 1 meal/day
- Increasing proportion of total population that is over age 60 – and over age 80
- Increasing client diversity
- Decline in interest in congregate meals

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Assessment Process

- Understand the organization's vision and mission and the goals the organization hopes to achieve.
- Gather information from multiple sources. For example:
 - Organization chart and position descriptions
 - Policies and procedures
 - Contracts with outside organizations
 - Sample menus
 - Sample recipes
 - Historical records
- Conduct interviews with staff
- Observe the organization's operations

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Compare Current Operations to Those of Other Organization's

- **Consider trends occurring**
 - Within the surrounding community
 - Within Older Americans' Meal Programs
- **Consider any benchmarking standards, where available**
- **Lack of benchmarking standards for Older Americans' Meal Programs**
 - MOW of San Francisco's Board wanted benchmarking standards
 - Benchmarking study done relative to large home delivered meal (HDM) programs

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Benchmarking Characteristics

- Lunch is still the predominate meal home delivered meal (HDM) programs serve their clients
- Most programs are delivering traditional hot meals to at least some of their clients, but many are no longer serving hot meals to all their clients
- Meals are generally delivered daily, Monday – Friday, with additional meals delivered at the end of the week for clients' weekend meals
- Programs generally provide modified diets for their clients
 - Most frequently provided modifications are diabetic, low sodium, and dental soft

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Benchmarking Characteristics

- Most programs have a food production kitchen in their facilities
- Most programs operate their own kitchens
- If they do not operate their own kitchens, programs have a long-term relationship with the contractor operating their kitchen
- Programs often do not distinguish between their food cost per meal and their total meal cost
- Programs are not consistently calculating either food cost per meal or total meal cost

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Benchmarking Characteristics

- Although clients are encouraged to contribute toward the cost of their meals, many are unable to do so, and the average client meal contribution ranges from \$.50 - \$1.50 per meal
- Client contributions and private donations, while often low in amount, are the most frequently reported sources of program funds
- The largest proportion of funding for most programs comes from government sources, especially from federal program sources
- There are no established labor productivity standards for HDM programs

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Benchmarking Characteristics

- **Volunteers are essential to most HDM programs**
 - Jobs that volunteers fill include delivery of meals, support of fund raising events, clerical work, and help with portioning and packing of meals for delivery
- **Many programs offer additional services to their clients**
 - Examples of such services are: nutrition education, nutritional status assessment, nutrition risk screening, nutrition counseling, and food assistance information
- **Many programs offer meals to disabled clients under age 60**
- **Some programs are doing outcomes measurement, but the outcomes being measured and the measurement parameters were not specified**

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Trends Within Large HDM Programs

- Programs are increasingly offering a second meal to some/all clients
 - Clients are becoming increasingly frail and less able to shop for food and/or to prepare meals for themselves
 - Clients are facing increased economic need as family caregiver support has been in decline
 - One meal is inadequate for meeting older person's basic nutritional needs
- Programs are moving away from delivering hot meals and are increasingly providing frozen and/or chilled meals to clients
 - Meal quality is higher with chilled and frozen meals
 - Meal delivery costs can be reduced when hot meals are not served

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Trends Within Large HDM Programs

- Programs are providing meals for 7 days per week, although only a limited number do meal delivery 7 days per week.
- Programs are starting to provide an increased array of modified diets
 - Additional diets increasingly being provided are renal, gluten free, low fat, and vegetarian
- Programs are starting to offer cultural and/or ethnic meal choices, predominately Hispanic and Kosher meals

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Trends Within Large HDM Programs

- Programs are starting to recognize the importance of outcome measurements for sustainment of funding support
 - Programs are unsure about how to define appropriate outcome measures, data collection procedures to insure valid data collection, and data analysis
- Programs are starting to recognize the need for partnerships and/or collaborative relationships with other types of organizations
- New programs that may be new revenue sources are being considered, but not without concern for problems/pitfalls associated with such efforts

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Assessment Process

Final Stages:

- Analyze all collected information
- Consider organization
vision/mission/goals/objectives relative to
collected organization information
- Prepare report to include discussion of
assessment process and recommendations
relative to the purpose of the assessment
- Present report to organization administration

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Assessment Process

Final Stages, Continued:

- Discuss the recommendations and the rationale for the recommendations with organization administration
- Present report to the organization's senior management and possibly to the board
- Organization incorporates recommendations into strategic planning, as appropriate and/or works to implement recommendations, as appropriate

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MOWSF - Results and Actions

- Eye Opener for Board of MOWSF
- Board Adopts 5 Year Window for Kitchen/Building Solution
- Food Strategy Under Review, but Likely Modest Changes Until New Building
- Board Commitment to Invest in Business Acumen and Staffing – Hired First CFO
- Comprehensive and Ongoing Review of Operations and Assumptions
- Investments in IT / More Data Driven – Received Grant to Transform Client Data from Brin Foundation
- Started Search for New Home in SF
- Hired a Kitchen Feasibility and Design Consultant

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Upcoming Webinars

Getting Your Volunteers Out of the Box

Presenter: Mary Beth Harrington

When: February 19, 2015

Time: 3:30 PM to 4:30 PM EST

Fee: \$25

Competency: Organizational Planning

Concentration: Volunteer Management

Credits: 1

How to Do Social Media for Your Nonprofit in 15 Minutes a Day!

Presenter: Mazarine Treyz

When: March 10, 2015

Time: 3:30 PM to 4:30 PM EST

Fee: \$25

Competency: Relationship Building

Concentration: Communications

Credits: 1