CONVENING PROCEEDINGS: NOURISHING PARTNERSHIPS

CREATING A SUSTAINABLE FUTURE FOR COMMUNITY NUTRITION AND AGING PROGRAMS

The National Resource Center on Nutrition & Aging

AUGUST 2019
The National Resource Center on Nutrition and Aging (NRCNA) is collaborating with the National Association of Nutrition and Aging Services Programs (NANASP) to plan for the future of congregate meals programs. Together, the NRCNA – hosted by Meals on Wheels America as part of a cooperative agreement with the Administration for Community Living (ACL) – and NANASP will complete a year-long supplemental grant project aimed at strengthening congregate nutrition programs to meet the rapidly growing demand for services.
Introduction

About NANASP
Founded in 1977, the National Association of Nutrition and Aging Services Programs (NANASP) is proud to be a leading organization advocating for community-based senior nutrition programs and staff. Our member programs represent a wide range of essential services providers who support the nutrition, health and life quality of seniors. With over 1,100 members from across the United States, we are national advocates for senior health and wellbeing who strengthen the policies and programs that nourish seniors. We accomplish this mission through a collective national voice and through local community action. For more information, go to nanasp.org.

About NRCNA
Hosted by Meals on Wheels America as part of a cooperative agreement with the Administration for Community Living, the National Resource Center on Nutrition & Aging (NRCNA) is designed to build the capacity of the aging services network to provide nutrition services for both current and future older adult populations integrated into a home-and community-based service system and provide training and technical assistance to the aging network regarding nutrition services. To learn more, visit nutritionandaging.org.
Executive Summary

As the older adult population grows and becomes increasingly diverse, congregate nutrition services face new challenges, including combating rising numbers of food-insecure older adults, increasing rates of chronic disease, funding and program planning issues, demographic shifts, improving cultural competency, regional issues, and general program perception issues.

In response, the National Association of Nutrition and Aging Services Programs (NANASP) and the National Resource Center on Nutrition and Aging (NRCNA) co-hosted a day-long convening in Alexandria, VA on March 28, 2019 to discuss best practices for congregate nutrition services today and identify steps that congregate nutrition programs can take going forward to seize opportunities for growth. During the convening, participants engaged with their peers in small group discussions through a series of breakout sessions (identifying root causes, diagramming assets, and discussing solutions and opportunities).

Through the root cause analysis, convening participants noted that one of the key issues facing the network is interpretation of the federal and state regulations and laws governing Older Americans Act programs. Convening participants also noted that another key issue is leadership, including a lack of continuity in leadership across the aging network and concerns about the perceived lack of training resources for these new leaders.
During the asset mapping exercise, participants in small groups were asked to identify their program’s current partners, competitors, barriers, opportunities/assets, and funders, and then each small group put together a composite diagram. Interestingly, some of the current partners identified by some groups were also seen as competitors by some participants, including local restaurants and government programs. Common program barriers cited by participants included space limitations, regulatory barriers, large service areas, unfavorable community perceptions, and limited business acumen. Similar to the aforementioned partner/competitor overlap, there was some overlap in content between barriers perceived and opportunities and assets envisioned.

In the solutions and opportunities breakout session exercise, participants were asked to discuss in small groups the root cause issues raised in the context of their asset maps in an attempt to discern whether some of the opportunities, partners, and other assets identified might work to address these issues. Some of the common “winning” strategies included adapting meal site design and function to meet the needs of local communities, increasing funding revenues, rebranding programs, implementation of advanced technology, and further leveraging partnerships.

In a final breakout session, convening participants discussed implementation of the strategies discussed throughout the day, both in their own local programs and as an aging network overall.

Ultimately, participants overall reported feeling encouraged and emboldened to take steps in their own communities and with the aging network at large to ensure the sustainability of congregate nutrition services.
Introduction to the Congregate Nutrition Program

Congregate nutrition services, also known as the congregate meals program, is the largest program in the Older Americans Act (OAA). It provides group meals for over 1.5 million older adults at senior centers, churches, and other facilities.¹

The OAA originally became law on July 14, 1965, establishing the Administration on Aging within the Department of Health and Human Services. It also created the aging services network, which currently includes 56 State Units on Aging (SUAs), 622 Area Agencies on Aging (AAAs), 270 Title VI Native American aging programs and more than 29,000 service provider organizations.²,³,⁴

In 1972, the OAA added a Nutrition Services Program for older adults. Today, Title III© of the OAA provides Americans over the age of 60 with healthy meals, nutrition education and nutrition counseling, and socialization.

The Administration on Aging, now within the Administration for Community Living (ACL), partially funds the Nutrition Services Program. In FY 2019, the overall program received $906.7 million in total funding, with $495.3 million specifically allotted to congregate nutrition services.⁵ The Nutrition Services Program is also fiscally supported by state and local governments, foundations, direct payment for services, fundraising and participant contributions.⁶

As the older adult population grows and becomes increasingly diverse, congregate nutrition services face new challenges, including combating rising numbers of food-insecure older adults, increasing rates of chronic disease, funding and program planning issues, demographic shifts, improving cultural competency, regional issues, and general program perception issues.
A National Convening

Since challenges are on the rise for congregate nutrition programs nationwide, the National Association of Nutrition and Aging Services Programs (NANASP) and the National Resource Center on Nutrition and Aging (NRCNA) co-hosted a day-long convening in Alexandria, VA on March 28, 2019. The convening brought together multidisciplinary stakeholders, including local nutrition program leaders, area agencies on aging, state units on aging, researchers, healthcare representatives, and national nonprofit leaders, to discuss best practices for congregate nutrition services today and identify steps that congregate nutrition programs can take going forward to seize opportunities for growth. In all, 48 participants and staff attended from 15 states across various regions of the United States.

After a keynote speech focusing on the value of the congregate nutrition programs by Assistant Secretary for Aging and Administration for Community Living Administrator Lance Robertson, convening participants were divided into small discussion groups. During the convening, participants engaged with their peers in small group discussions through a series of breakout sessions (identifying root causes, diagramming assets, and discussing solutions and opportunities) to identify foundational issues central to the congregate nutrition services community, organizational assets to leverage going forward, as well as challenges and opportunities to contend with and overcome.
A National Convening

NOURISHING PARTNERSHIPS:
CREATING A SUSTAINABLE FUTURE FOR COMMUNITY NUTRITION & AGING

Lance Robertson

WHAT DOES ALL THIS MEAN?

1.5 served in 10 dinner
$11.06 cost per meal
467. low-income
597. alone
117. disease
45% evidence-based
68% science-based
107. older adult impact
69% helped
9% impact on social isolation
93% opp to spread

OUTCOME vs. PROCEDURE
least cost, preventing readmission, better outcome

 Integral to strategy

Thank Leaders!

National Resource Center

CONGRAGATE MEAL PROGRAM

PUSH FORWARD MEDIA
... NEED HELP

NEW EVALUATION REPORT

PUSH/USE CUR
INFographics

HAI R: NET

PARTICIPANT NS ARE DECLINING

beyond meal itself
so much more

VALUE OF FOOD!

[Hand-drawn design elements and visual data]
Process

These small group discussions were led by trained focus group moderators and recorders, and all findings have been generalized from recorder transcriptions and the maps and charts created by the groups. The graphic images accompanying each section were recorded on-site in real time and reflect an immediate summary of the discussions held.

All graphic images and ideas presented within them reflect the perceptions and experience of the local programs invited to attend and are not the opinions, perceptions, and/or experiences of the funders, conveners, or the nation as a whole.
Discussion Activities

**Root Causes:** Each group was given one of two general problem statements and asked to dive deeply into why the statement might be true for some programs nationally.

**Asset Mapping:** Participants were asked to identify their program’s current partners, competitors, barriers, opportunities/assets, and funders, and then each small group put together a composite diagram.

**Solutions and Opportunities:** During this breakout session exercise, participants were asked to discuss in small groups the root cause issues raised in the context of their asset maps in an attempt to discern whether some of the opportunities, partners, and other assets identified might work to address these issues.

**Going Forward:** In a final breakout session, convening participants discussed implementation of the strategies discussed throughout the day, both in their own local programs and as an aging network overall.
This graphic reflects the totality of the discussions in this breakout session.
Root Causes

The first activity was a “root cause analysis.” Each group was given one of two general problem statements (“Congregate meal programs are increasingly not perceived as relevant to support successful aging in place” or “Participation in congregate meal programs is declining across the country”) and asked to dive deeply into why that might be true for some programs nationally. Despite having different problem statements, very similar issues facing congregate programs were identified in group discussions across the board.

Convening participants noted that one of the key issues facing the network is interpretation of the federal and state regulations and laws governing Older Americans Act programs. Though it was generally agreed that federal and state regulations permit many creative options for meals, programming, etc., participants were concerned that some programs rely on regulations to the detriment of innovation and creative thinking, and that some programs, local governments, and states interpret the regulations too narrowly, causing programs to feel stifled. Participants also said that this narrow interpretation can cause issues with the quality of meals and programming.

Convening participants also noted that another key issue is leadership. This was expressed in several ways. Some participants felt that there is a lack of continuity in leadership across the aging network. By this, participants expressed that as nutrition program directors retire, they leave new and inexperienced leaders to lead in their place. Some participants also expressed concerns about the perceived lack of training resources for these new leaders, noting that while many training resources do exist, including NANASP’s annual new directors training at its conference, the National Resource Center on Nutrition and Aging’s website, resources, and trainings, and materials from the Administration for Community Living, new leaders often do not know where to find these materials. Some participants felt that this lack of training can lead to inconsistency across congregate nutrition services, meaning that some programs thrive and some do not.
Asset Mapping

Summary of key assets, barriers, and opportunities.
For the asset mapping breakout session exercise, participants were divided into small groups and asked to fill out a diagram analyzing their congregate programs. (For those participants who were not part of a congregate program, they were asked to analyze a local community program they were familiar with.) Participants were asked to identify their program’s current partners, competitors, barriers, opportunities/assets, and funders, and then each small group put together a composite diagram. Again, participants had very consistent results across groups.

Many groups’ current partners included local governments, healthcare providers, universities, food banks, YMCAs, local businesses, government programs such as SNAP, advocacy groups, volunteer and faith-based organizations, the local VA, elected officials, transportation providers, local restaurants, and local park and recreation centers. Interestingly, some of these partners were also seen as competitors by some participants, including local restaurants and government programs. Other competitors that were cited included hospitals, for-profit meal delivery companies, and fast food chains. Convening participants recognized the opportunity to engage with and convert competitors to partners.
Asset Mapping, cont.

Common program barriers cited by participants included space limitations, regulatory barriers, large service areas, unfavorable community perceptions, and limited business acumen. Some programs also face shortages in key areas, such as funding, transportation, and staff/volunteers. Other intangible barriers were also discussed, such as lack of creativity and a need for more diversity among staff and leadership of programs.

Similar to the aforementioned partner/competitor overlap, there was some overlap in content between barriers perceived and opportunities and assets envisioned. Participants commonly cited their staff’s creativity and business acumen, partnerships with their local governments, relationships built with their community, collaboration with health programs, and improved marketing as assets that their programs leveraged. Participants also identified a variety of funding sources their programs drew from, including government funding, private sector donations and partnerships, grants, participant contributions, and other earned income.

Several key takeaways for local programs were raised by convening participants. First, many participants observed the overlap in partners/competitors, raising the idea that programs should look to their competitors to become partners wherever possible. Other participants noted that some local programs have already challenged the barriers that were raised and solved them through their own assets and opportunities. Further, participants concluded that local programs should work to diversify their funding sources, perhaps looking at the examples set by other programs.
Solutions and Opportunities

Summary of identified solutions and opportunities.
During this breakout session exercise, participants were asked to discuss in small groups the root cause issues raised in the context of their asset maps in an attempt to discern whether some of the opportunities, partners, and other assets identified might work to address these issues. Participants were also asked to envision congregate nutrition services in 2030, to highlight differences perceived between now and their vision of the future, and to strategize how to arrive at this future. Then, participants ranked the strategies that their group raised, taking into account feasibility, necessity, and interest from older adults and the aging network.

Some of the common “winning” strategies included adapting meal site design and function to meet the needs of local communities, increasing funding revenues, rebranding programs, implementation of advanced technology, and further leveraging partnerships.

Several groups of participants expressed a similar overall theme: training new leaders and sharing best practices throughout the network. As mentioned before, while many training resources already exist, new leaders often do not know where to find these materials, and that this lack of training can lead to inconsistency across congregate nutrition services. One group explained that there are already many great solutions and innovative ideas out there about how to solve the challenges and issues local programs face, and so the key strategy should be how to appropriately and effectively share these practices across the network at all levels. Suggested practices to share included best practices for staff development, dining experience, OAA policy interpretation, and leveraging healthcare partners.
Going Forward

In a final breakout session, convening participants discussed implementation of the strategies discussed throughout the day, both in their own local programs and as an aging network overall.

Participants identified various ideas for the network overall to implement:
- Creating a clearinghouse of aging network information.
- Intensifying training in business acumen for congregate programs, particularly in the areas of grant-writing and consulting.
- Implementation of technology as a key improvement going forward, particularly in programming, operations, and tracking outcomes.
- Improving partnerships between programs and their communities; including intergenerational programming as a way to bring in non-traditional partners and funders.

In participants’ individual programs, strategy implementation plans included:
- Creating consumer focus groups.
- Engaging more staff at all levels (kitchen managers, site managers, cooks, volunteers, etc.) to determine best practices and strategies.
- Technological improvements such as consistent online training for staff and volunteers.
- Sharing more about the current innovative work that is already happening in participants’ programs.

The convening ended with a keynote address from Bob Blancato, Executive Director of NANASP, and Ellie Hollander, President and CEO of Meals on Wheels America, where they discussed the work of both organizations and their extemporaneous thoughts on where and how the network might address issues raised during the convening. This address is reflected in the accompanying graphic.

After the convening, participants overall reported feeling encouraged and emboldened to take steps in their own communities and with the aging network at large to ensure the sustainability of congregate nutrition services.
Going Forward

Summary of closing keynotes and next steps.
Ongoing Work

After the convening, a series of presentations, webinars, and materials were released. Oral presentations were given at both the NANASP and Meals on Wheels America 2019 annual training conferences. Two “virtual summit” webinars were held in summer 2019 to solicit more feedback from the aging network at large, as space at the convening was limited, some invitees were unable to travel, and many more providers may have liked to share their thoughts. The proceedings of this convening and these virtual summits will be used to produce a series of issue briefs in summer 2019. A literature review was released in summer 2019.
## Participants

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References

1 Aging Integrated Database, Data-at-a-Glance (SPR), 2017 Data, Administration for Community Living, accessed April 26, 2019.
Reshaping the future of Nutrition & Healthy Aging

Visit us online to learn more about strategies to position the congregate nutrition program for the future:

futureofcongregate.com