



Senior Nutrition - "Congregate Dining & Meals on Wheels"

"Helping Older Minnesotans maintain their
independence through access to healthy foods."



Minnesota Association of
Senior Nutrition Services



Overview

- Senior Nutrition is "More than just a Meal". The overall focus of Senior Nutrition is to provide nutritious meals, socialization and other supportive services for individuals 60 years of age or older.
- This service provides for the very basic need, "FOOD" and a priority service to Older Adults in MN.



Aging with dignity

Meals on Wheels in particular, can be the tipping point for many elderly or disabled shut-ins. Having a hot, nutritious meal delivered can be the key to independence.

And just as important as the food is the daily contact with volunteers.

Receiving meals and having someone check on the homebound are the type of in-home services that can help keep people out of nursing homes -- saving millions in hospital and other institutional costs.



Currently, the total number of meals that are being served in the state of MN is 3.3 million and the average age of the typical diner or meals on wheels customer is 80-84, which has increased substantially from the inception of the program when we provided service to many 60-70 year old seniors.

Seniors today are needing to work longer and also seeking out more choice in menu options to maintain their health.

Volunteers are vital to our success!
They provide millions of dollars worth of in-kind labor for our programs each year.



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GOAL - "Helping Older Minnesotans maintain their independence through access to healthy foods."



What changes are we seeing to achieve this goal?

1. The baby boomer generation. Their behavior will be completely different from the previous generation. We are preparing for a group with a history of altering retail, business, health care and social institutions as they age. Access will change.
2. Diversity of cuisine/service with more choice and healthy options.
3. Service needs increasing to rural and remote areas.
4. Waiting lists in many areas including unserved communities.
5. Access to AC/EW and MSHO funds to reimburse meal service.
6. Innovative service/delivery options e.g. bundled services, dining cards & diners clubs, frozen meal service, etc.

INNOVATIONS: Congregate dining/Meals on Wheels
Diners Clubs have a place in our future.



The diners club is an economic development venture in the rural areas, as it provides a steady business for small town restaurants that struggle to stay open.



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Bundled-Services Delivery Model

- ✓ Coordinates services for homebound seniors.
- ✓ Addresses the needs of the aging senior population.
- ✓ Minimizes service delivery barriers, including distance and transportation.



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Have demographics changed?

1. We are serving a much older and frail population. The clients/volunteers that began with our program back in the 1970's and 1980's were between the ages of 60-70 and were the backbone of the volunteer structure for the nutrition projects. Now those same clients & volunteers are in their 80-90's and are not as able to contribute of their time and talents. We are in need of reaching out to younger seniors, community members, local business and service clubs to recruit the essential volunteers for this in-kind contribution of their time. We are also serving more people in some areas that are -60 who are physically and/or mentally disabled.
2. Rural communities no longer have grocery stores, restaurants, goods and services. Older adults remain in the communities due to economic factors.

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Have demographics changed? (Continued)

3. Younger people are migrating out of the rural areas with older adults remaining, placing burden on rural aging services.
4. We receive more requests from our clients for ethnic and special diet meals.
5. We are serving seniors that are in a much more frail condition as a result of early hospital releases.
6. We see a shift of our clients from congregate dining to home delivered meals and we are not replacing the congregate diners as a result of the lack of staff time and funding to adequately promote and market the program.

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What are the biggest obstacles we face?

1. The seniors we serve are in poverty or near poverty given the price of gas, food, medications, health insurance costs, etc. This has and will impact what they are able to afford to contribute for their services like meals.
2. Gas Crisis as it relates to: increased food and supply costs, delivery surcharges, and increased mileage reimbursement for volunteer drivers and the loss of some volunteer drivers.
3. Unable to pay staff to carry out the mission including the necessary outreach and activities to grow and maintain programs.
4. Continuing unfunded mandates and the paperwork needs to be reduced, kept to a minimum and consistent across all service areas in the state.
5. Resources not offered to provide service options e.g. nutrition risk assessment, follow-up counseling, intervention, and nutrition education.

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What are the biggest obstacles we face? (Continued)

6. Several funding factors and contracting concerns with the current system that puts too many risks on the provider.
 - a. Funding for Senior Nutrition has not kept up with growing senior population and declining purchasing power due to inflation.
 - b. Funding Formula implemented by in the state has had a negative impact for rural areas (yet this is a priority area).
 - c. The shift of Title III funding away from Senior Nutrition Programs and into other service areas when there are unmet needs.
 - d. Provider host agency covering several costs associated to nutrition services and can't continue to take on more financial burden.
 - e. Allow providers the ability to develop/supply service in the most creative and cost effective manner they feel is necessary.

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What are the biggest obstacles we face? (Continued)

7. Priority people we should serve in relationship to the contracting method.
8. Lack of volunteers.
9. Doing more with less money/staff (energizing staff & staff burnout)
10. Contract Pitfalls - need shared risk, improved ability to re-negotiate, and contract partners versus adversaries.

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What might be some new opportunities?

1. Expand bundled services & frozen meal delivery to meet the unmet needs in the rural areas.
2. Increased efficiency through technology e.g. marketing, ordering and tracking service.
3. Increased coordination with other food programs e.g. food shelves, NAPS, and community kitchens.
4. Establish a business for profit to support Senior Dining & Meals on Wheels through local community partnerships or a major business provider.
5. The coordination of the Nutrition Directors Association in looking at crossing boundaries, menus, food sources, vendors, & other opportunities.

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What might be some new opportunities? (Continued)

6. Senior Nutrition being identified as a #1 priority in providing a basic need to older adults and the refocus of federal funding directed to this service.
 7. Increase the Diner's Club concept in rural and remote areas to provide for the unmet needs.
 8. Increased development of local community partnerships to raise the funding necessary for program stability.
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