



**The National  
Resource Center on  
Nutrition & Aging**

**MAKE YOUR MARK ON  
FOOD INSECURITY  
MARCH 25, 2020**



**The National  
Resource Center on  
Nutrition & Aging**

# **OPENING REMARKS**

# WELCOME

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Administration on Aging  
Administration for Community Living

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Human Services

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# **INTRODUCTIONS**



# AGE OPTIONS NUTRITION INNOVATIONS PROJECT “CLOSING THE LOOP”

**PAUL BENNETT, PHD, MSW**

Community Initiatives Manager & Project Lead, Age Options

March 25, 2020

# AGEOPTIONS

## History:

- Incorporated as a 501(c) (3) non-profit in 1974 and designated by the Illinois Department on Aging as the Suburban Cook County Area Agency on Aging (AAA)
- Our service area is suburban Cook County, IL – outside of the City of Chicago and is made up of 30 townships; We serve approximately 572,830 persons living in 130 communities
- Funding sources include: state, federal, corporate, private foundations and individual donations

## Mission:

- AgeOptions innovates, partners, and advocates to improve systems and services in order to strengthen communities so people thrive as they age



## AGEOPTIONS' ROLE AS AN AREA AGENCY ON AGING (AAA)

- As the AAA for suburban Cook County, we serve individuals with disabilities and those 60+
- AgeOptions is one of 13 AAA in Illinois
- AgeOptions funds local agencies to provide services directly to community members including
  - In-home care, adult day services, home delivered meals (HDMs), congregate meal sites, benefit access
  - Caregiver resources, adult protective services, fraud prevention, Medicare education
- AgeOptions also provides a number of direct services





## SETTING THE STAGE & AGENDA

- AgeOptions was one of five agencies awarded an Administration for Community Living (ACL) Nutrition Innovations' grant in 2018
  - Grants are given to projects that demonstrate and enhance the quality, effectiveness, and outcomes of nutrition services programs provided by the national aging services network
  - Grants are to identify innovative and promising practices that can be scaled across the country and to increase use of evidence-informed practices within nutrition programs
- Presentation will discuss
  - Background to Food Insecurity
  - AgeOptions' Past Experience
  - Thumbnail Sketch of the Project
  - What we are Learning



## FOOD INSECURITY AS A SOCIAL DETERMINANTS OF HEALTH (SDOH)

The World Health Organization defines Social Determinants of Health as the conditions in which people are born, grow, live, work, and age. They are the factors mostly responsible for health inequities . . . Approximately 80 percent of physicians maintain that addressing patients' social needs is as critical as addressing their medical needs. There are five major determinant areas:

- **Economic stability** (poverty, employment, **food security**, housing stability);
- **Education** (high school graduation, enrollment in higher education, language and literacy);
- **Social and community context** (social cohesion, discrimination, incarceration);
- **Health and health care** (accessibility and health literacy); and
- **Neighborhood and built environment** (food deserts, quality of housing, safety)

These factors can impact population health outcomes by establishing a negative social and physical environment and deepening the inequities that certain populations face.

*Retrieved on November 20, 2018 from: <http://www.allhealthpolicy.org/sourcebook/social-determinants-of-health/>*



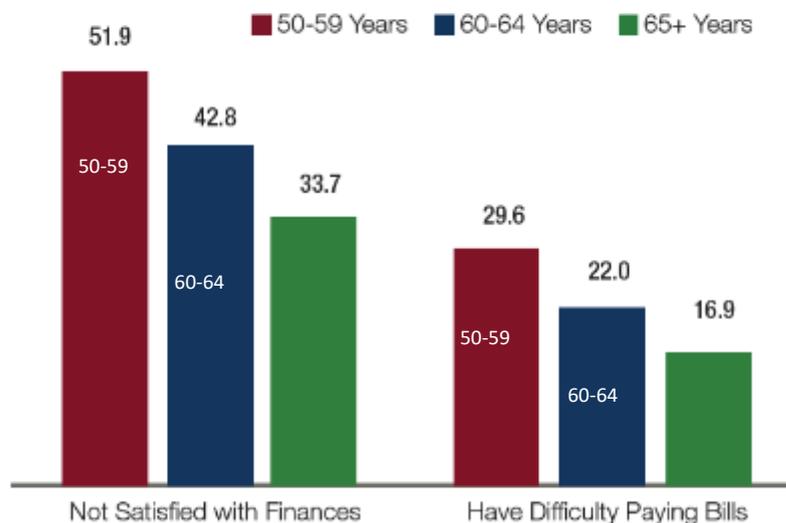


*Retrieved on August 28, 2019 from: <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health>*



## ECONOMIC SECURITY AND FINANCIAL HEALTH ENSURE WELL-BEING

Figure 1. Percent of Older Adults Experiencing Financial Hardships



- Social Determinants of Health have a systemic effect
- Think about how financial hardships impact
  - Ability to buy medicine? seek medical care? Comply with a treatment plan? Eat healthful foods?
  - Literature discusses “spending trade-offs” – medical care or housing? Paying utility bills?

Retrieved on August 28, 2019 from: <https://endseniorhunger.aarp.org/issue-brief-social-determinants-of-health-and-the-aging-population/>



## DEFINITIONS OF FOOD INSECURITY

- According to Lee and Frongillo, in their study *Nutrition and Health Consequences Are Associated with Food Insecurity among U.S. Elderly Persons* define food insecurity as:
  - “Older people who consume less than the recommended dietary allowance for eight nutrients of saturated fat, niacin, riboflavin, Vitamins B-6 and B-12, magnesium, iron and zinc.”
- The U.S. Department of Agriculture defines food insecurity as “the limited or uncertain availability of nutritionally adequate and safe foods or limited or uncertain ability to acquire acceptable foods in socially acceptable ways.”
  - “. . . Those who are food insecure are not necessarily suffering from hunger.”



## BACKGROUND

- In 2017, three million households with at least one adult age 65 or older were food insecure. Millions more households with seniors face marginal food security. <https://www.frac.org/hunger-poverty-america/senior-hunger>
- One in eight older adults are food insecure and this can impact their health.
- Food insecurity can increase the likelihood of a whole range of illnesses and conditions.
- There are estimates that up to 50% of older adults may be malnourished, and that up to 33% of older adults admitted to the hospital may be malnourished.
- 81% of people on Meals on Wheels say that their health has improved <https://www.mealsonwheelsamerica.org/docs/default-source/research/hungerinolderadults-execsummary-feb2017.pdf?sfvrsn=2>;



## FOOD INSECURE OLDER ADULTS ARE . . .

**50%**  
more likely to  
have diabetes

**3X**  
more likely to suffer  
from depression

**60%**  
more likely to have  
congestive heart failure  
or a heart attack

**30%**  
more likely to  
have at least one  
ADL impairment

**2X**  
as likely to report  
gum disease and asthma

*Source: Meals on Wheels America, 2017. Hunger in Older Adults: Challenges and Opportunities for the Aging Network:  
<https://www.mealsonwheelsamerica.org/docs/default-source/research/hungerinolderadults-execsummary-feb2017.pdf?sfvrsn=2>;*



## WHAT WE NOTICED . . . .

- A disconnect exists between health care providers and community-based organizations regarding Social Determinants of Health including food insecurity
- When referrals for nutritional services are given, health care providers most often do not know the outcome of the referral; Did the patient get linked with the service?
- Studies on closed-loop referral systems to-date have focused-on physicians referring to medical specialists, but not for community-based services
  - A closed loop is both acknowledging the referral and informing the referring entity of the outcome of the referral



## POLL QUESTION

- Are you using a web-based resource and referral platform to send and receive referrals?

Yes

No



## THUMBNAIL SKETCH OF THE PROJECT

- In collaboration with our healthcare partners, the project is to develop, implement and evaluate a closed referral system:
  - Using an on-line resource database and referral system, our healthcare entities refer persons to AgeOptions who are identified as being food insecure
  - AgeOptions screens for an array of needs and links the individuals to food as well as other resources, e.g. SNAP, Medicaid
  - AgeOptions “closes the loop” and informs the referring entities of the results of the referral; Results are integrated into the electronic healthcare record
  - Evaluation/research is examining benefit to participants, helpfulness to referring entities and potential cost savings



# PROJECT PARTNERS

- Project Coordination - AgeOptions
- Health Care Providers
  - Rush University Health Systems' Rush Oak Park Hospital
  - Oak Street Health – four (4) suburban locations
  - AMITA Health – four (4) suburban locations
- Technology for Closed Loop System – NowPow; Recently expanded to Aunt Bertha
- Meal Resources
  - Array of our grantee Home Delivered Meal providers including Mom's Meals for special diet needs; Congregate Dining sites; food pantries; farmer's markets.
- Education – Mather LifeWays – Telephone Topics



## LESSONS WE ARE LEARNING

- Start-up takes longer than projected
- Survey of partners and their populations – need to reach the most at-risk for targeting food insecurity
- Expand Definition of food insecurity
  - Financial triggers which were derived from questions on USDA tools may address food insecurity, but do not mesh well with nutritional needs of persons who may benefit from home delivered meals
  - Questions do not address ADLs and IADLs – Added a specific question relating to HDMs



## FOOD INSECURITY TRIGGER QUESTIONS

1. Are you worried that your food will run out before you have money to buy more?  
 Yes     No     Declined to Answer
2. In the last 2 months, have you run out of food that you bought, and didn't have money to get more?  
 Yes     No     Declined to Answer
3. I am not always physically able to:  
 Shop     Cook     Feed myself  
 No difficulty with these ADL/IADLs  
 Declined to Answer



## INITIAL RESEARCH FINDINGS

- As of our last survey, 83% of referrals were generated by social workers with 16% generated by nurses.
- $\frac{3}{4}$  of the referrals were generated by the social workers using a SODH screen; Remainder came from the PCP or APN asking for a referral.
- 66% were from the outpatient setting with 16% from the Emergency Department and 16% from the inpatient setting
- Most of the referrals were generated from a conversation and use of the SODH screening tool, with the remainder coming from a patient conversation alone.
- 67% indicated that because of the on-line referral platform, the referring agents indicated that they were now more likely to refer.
- There were close to 50% of the referring agents indicating that they actually do not routinely check the outcome of their HCBS referrals



## SUMMARY OF FINDINGS TO-DATE

- Attitudes towards NowPow and the Electronic Health Record are generally positive
- The rate at which professional respondents estimate they make food insecurity referrals has increased
- Of concern is that some professionals do not have referral follow-up as a part of their practice, so even if the information is available with these new tools, if the tools are not used to assure services are rendered or to flag cases in which services were never received the system will not be improved
- Buy-in to the “closed loop system” and utilizing it by assuring effective referrals is needed to improve positive outcomes with elderly with nutrition insufficiency



# POLL QUESTION

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Are you collecting food insecurity data via your client questionnaires using a food insecurity screener?

Yes

No





# INITIATIVES ADDRESSING FOOD INSECURITY

**RYAN GADZO**

Research Analyst, Erie County Department of Senior Services

March 25, 2020



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# NUTRITION & WELLNESS

Michael Saccomanno  
Community Services Coordinator



# CONGREGATE-STAY FIT DINING PROGRAM

- 48 Independent Dining Sites serve throughout Erie County
  - Senior/Community Centers & Senior Housing Facilities
- **FREE** Monthly Nutrition Education
- **FREE** Nutritional Counseling
- +3,000 Registered Participants
- 200,000+ meals served in 2019
- \$3 Confidential contribution



Balanced,  
Nutritious Lunch



# CLUB 99 FITNESS CLASS



LANCASTER SENIOR CENTER



William Emslie Center

# HEALTHY COOKING DEMONSTRATIONS

- \*Teaching simple healthy cooking techniques that seniors can follow and use at home.
- \*Partnered with EC case managers to provide SNAP outreach.



# POLL

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Are you currently using SNAP benefits as a way to make a voluntary meal contribution?

Yes

No



# SNAP BENEFIT ENROLLMENT



- National Council on Aging Senior SNAP enrollment initiative partner
- Offering the use of SNAP benefits as a way of contribution at our 48 Congregate Dining Sites
- Using 8 community partners including inner city, rural and English second language community-based organizations



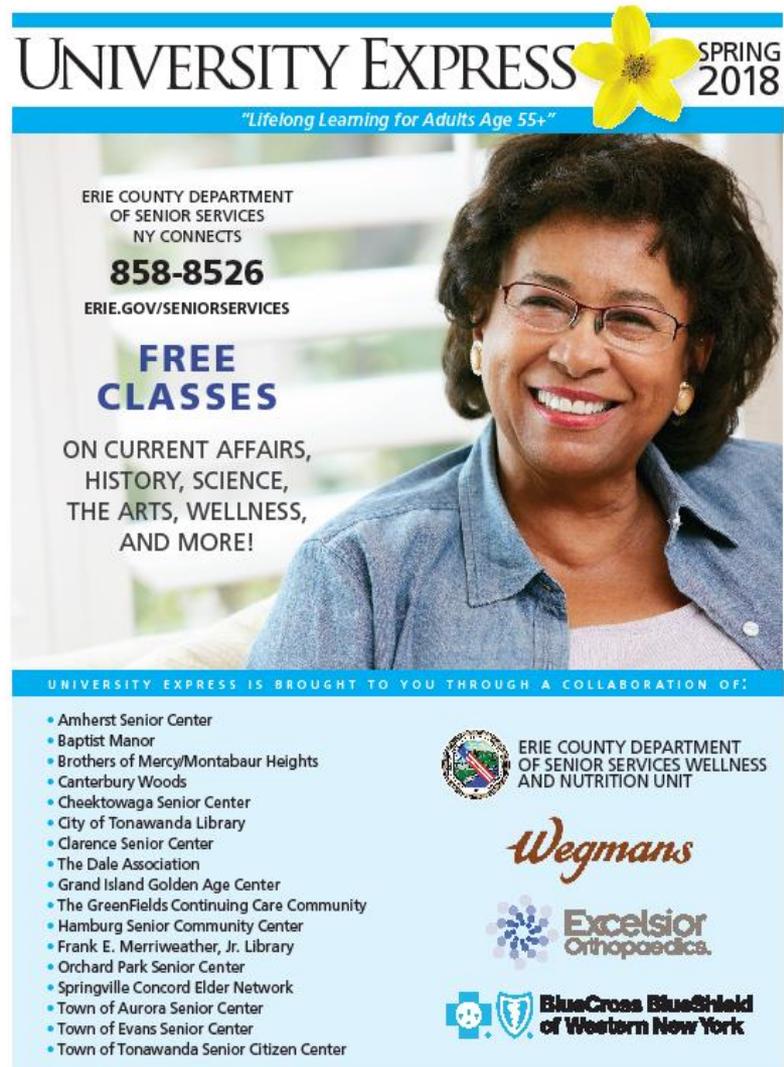
# UNIVERSITY EXPRESS

“Lifelong Learning For Adults  
in Erie County”

-Two Yearly Sessions:  
Spring & Fall Semesters

-Currently 14 class  
locations

-3 Locations offer Lunch  
and Learn series



**UNIVERSITY EXPRESS**  **SPRING 2018**

*“Lifelong Learning for Adults Age 55+”*

ERIE COUNTY DEPARTMENT  
OF SENIOR SERVICES  
NY CONNECTS

**858-8526**

ERIE.GOV/SENIORSERVICES

**FREE CLASSES**

ON CURRENT AFFAIRS,  
HISTORY, SCIENCE,  
THE ARTS, WELLNESS,  
AND MORE!

UNIVERSITY EXPRESS IS BROUGHT TO YOU THROUGH A COLLABORATION OF:

- Amherst Senior Center
- Baptist Manor
- Brothers of Mercy/Montabaur Heights
- Canterbury Woods
- Cheektowaga Senior Center
- City of Tonawanda Library
- Clarence Senior Center
- The Dale Association
- Grand Island Golden Age Center
- The GreenFields Continuing Care Community
- Hamburg Senior Community Center
- Frank E. Merriweather, Jr. Library
- Orchard Park Senior Center
- Springville Concord Elder Network
- Town of Aurora Senior Center
- Town of Evans Senior Center
- Town of Tonawanda Senior Citizen Center

 ERIE COUNTY DEPARTMENT  
OF SENIOR SERVICES WELLNESS  
AND NUTRITION UNIT









# NEW EVENTS AND PROJECTS

## ANNUAL SUMMER PICNIC



# INNOVATIONS IN NUTRITION PILOT PROGRAM



- \$500k (2) year grant from ACL shared by Erie and Albany Counties
- Menu's analyzed by EC RD's
- 4 Meals per month
- 10+ restaurants offered in each county
- Each has different menu options



# ERIE COUNTY SENIOR SERVICES NUTRITION & WELLNESS PROGRAM

Providing appealing, nutritious meals in a friendly atmosphere where seniors can improve the health of their body, mind and spirit!



# DISCUSSION QUESTION

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*Please share your organization's programs or initiatives for addressing food security among the older adults you serve.*

Please enter a brief description of these efforts into the Chat box on your control panel. Let us know!





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**Q & A**

# CELEBRATE THE SENIOR NUTRITION PROGRAM

- Help ACL celebrate the Older Americans Act National Senior Nutrition Program congregate services.
- Please continue to send in photos, videos, audio clips, or testimonials from seniors about your meal site, program activities, or nutrition education to [healthpromotion@acl.hhs.gov](mailto:healthpromotion@acl.hhs.gov).
- Please include your contact information and permission to use the material.



# SAVE THE DATE

Together with ACL, we will host a two-part webinar series on the learnings and next steps for the inaugural cohort of six Innovations in Nutrition Programs and Services grantees.

**Title: Capstone Webinars Series**

**Date:** Tuesday April 14<sup>th</sup> and 21<sup>st</sup>, 2020

**Time:** 2:00pm – 3:30pm ET

**Register:** *Coming Soon!*



# CONNECT WITH YOUR PEERS VIA NRCNAengage

NRCNAengage is an online venue for senior nutrition program staff, nutrition and aging professionals across the country to connect, share best practices, resources, recopies and ideas for action!





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**THANK YOU**