

# healthy aging UPDATE



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## Next time...

This is the final issue of *Healthy Aging Update*. Look for articles about the OAA nutrition program, falls prevention and other healthy aging topics in the Iowa Department on Aging's new e-newsletter, *The Link*, premiering in July 2015.

## More than a meal

As the largest of the Older Americans Act (OAA) services, the nutrition program is designed to address problems of food insecurity among older adults while encouraging socialization and promoting health and well-being through nutrition and nutrition-related services.

Evidence suggests the home-delivered meal program has had a positive impact on the nutritional well-being of older adults who are homebound. Meal recipients consistently show improvements in dietary patterns and decreases in food insecurity, while caregivers of meal recipients often report feeling relieved of some of their caregiving burden. Overall, home-delivered meals receive favorable evaluations and recipients are able to maintain their independence.

Despite these benefits, cuts to funding and increases in the costs of food and transportation have had significant impacts on home-delivered meal programs. These challenges have required providers to seek lower-cost solutions, such as transitioning to a once-a-week frozen meal delivery schedule.

To evaluate various home-delivered meal models and their impact on meal recipients, Meals on Wheels America – with funding from AARP Foundation – conducted the “More Than A Meal” 15-week study with 626 seniors across the United States. Key findings include the following:

- ▶ Those receiving and/or requesting



home-delivered meals are significantly more vulnerable compared to a nationally representative sample of aging Americans.

- ▶ Those who received meals delivered on a daily basis experienced the greatest improvements in health and quality-of-life indicators over the course of the study, compared to those who received frozen meals delivered weekly and the control group.
- ▶ Those who received daily-delivered meals reported greater benefits from their home-delivered meal program than those who received frozen meals delivered weekly.
- ▶ Those who lived alone and received daily-delivered meals were more likely to report decreases in worry about being able to remain in their home and improvements in feelings of isolation and loneliness.
- ▶ Daily-delivered meals decreased the likelihood of falling among recipients who had previously experienced a fall.

To access the entire report, visit [www.mealsonwheelsamerica.org/MTAM](http://www.mealsonwheelsamerica.org/MTAM).

# OAA nutrition program: Interesting facts you may not know

The Older Americans Act (OAA) is a flexible law that allows states to tailor programs – including the nutrition program – to meet the needs of their aging residents. Because states have the option to set additional requirements beyond those laid out in the OAA, people often have questions about what is permitted under the law.

To help address some common questions, the Administration for Community Living published an informal document in May to help educate nutrition program providers. Did you know...



## ▶ Taking home leftovers is permitted.

*While the congregate meal program is a social, in-person program and not a takeout meal service, the OAA allows participants to take home leftovers from their plate. Since older adults are at greater risk of food-borne illness, following food safety practices is important. Some providers offer containers with instructions for keeping food safe, while others have a process in place that allows participants to only take leftovers home that may be safely stored at room temperature (e.g., whole fresh fruit, bread).*

## ▶ Salad bars can serve as a meal.

*The OAA allows salad bars to be counted as a full meal, provided they meet the law's nutritional requirements. Providers have successfully used multiple methods to help participants select ingredients from a salad bar in healthy portion sizes to meet the nutritional requirements of the OAA.*

## ▶ Salt shakers are allowed.

*The OAA does not prohibit salt shakers from being placed on tables at congregate meal sites. The sodium in prepared foods or added in the kitchen while making food is typically more of a concern. Participants should not feel like they have to sneak salt shakers into their congregate meal site.*

## ▶ The program offers more than meals.

*The OAA nutrition program is not*

*simply a “feeding” or “meal” program. Rather, the OAA states that the nutrition program has three goals for older adults: (1) to reduce hunger and food insecurity; (2) to promote socialization; (3) to promote the health and well-being of participants by helping them gain access to nutrition, disease-prevention and health-promotion services to delay the onset of adverse health conditions resulting from poor nutritional health or sedentary behavior. While offering healthy meals is definitely part of the nutrition program, socialization, health and nutrition education are also key components.*

## ▶ Meal participants must be consulted.

*The OAA requires states to ensure that meal providers solicit the advice of meal participants regarding the types of meals that are being provided. Providers can use participant satisfaction surveys, taste tests or pilot menus with consumers to gain insight.*

## ▶ Meals can be nutritious and delicious.

*The OAA requires meals to meet 33 1/3 percent of the Dietary Reference Intakes (DRIs) as well as the current Dietary Guidelines for Americans, but that does not mean the meals cannot taste good. If meals are not appetizing, there is typically something amiss with the quality and/or type of food, the food vendor, the menu, preparation, delivery, etc. Complaints about the way meals*

*taste can be addressed by reviewing food purchasing, considering different menus, experimenting with food presentation, consulting with a local chef about food preparation techniques and assessing what types of food is often left uneaten at meals.*

## ▶ Choice is allowed and should be encouraged.

*Choice should be the mantra for the OAA nutrition program. Older adults need nutritious food to maintain and improve their health, but healthy meals must look and taste good and be responsive to participants' preferences in order to be considered appetizing. Choice can be offered within a menu by offering more than one entrée or side dish, or participants may want to choose when to eat. If your program cannot offer various food items or meal times to participants for the same price, find out why.*

## ▶ Food can be offered but doesn't have to be served.

*The OAA allows meal participants to decide what they want to eat from the menu. Serving food that will not be eaten is wasteful and expensive. Although meals must be nutritionally balanced, if food is being offered that no one is eating, consider providing more choices and implementing participant satisfaction surveys and acting on the results.*

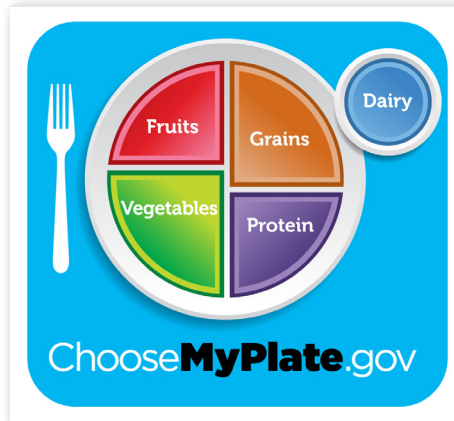
# Build a healthy plate at meal times

MyPlate serves as a reminder to help consumers make healthier food choices by thinking about building a healthy plate at meal times.

MyPlate is an icon that reflects both the Dietary Reference Intakes (DRIs), which are based on the most recent scientific evidence, and the Dietary Guidelines for Americans. The DRIs for nutrients are specified on the basis of age, gender and life stage, while the Dietary Guidelines for Americans provide advice for making food choices that promote health and help prevent disease.

The Dietary Guidelines include the USDA Food Patterns that emphasize selection of most foods in nutrient-dense forms. The patterns include calorie levels from 1,000 to 3,200. The meal plan templates allow for flexibility in food choices to accommodate individual food and beverage preferences.

The Mediterranean-style eating patterns and the DASH diet are recognized for their beneficial health outcomes and their



food groups are compared to the USDA Food Patterns. Worksheets for planning meals based on calorie needs can be found at <http://www.choosemyplate.gov/supertracker-tools/daily-food-plans.html>.

Iowa nutrition programs can use the MyPlate planning guide to draft a menu and then check the nutrients to ensure the DRIs meet the levels for one meal as identified on the Iowa Menu Approval Sheet. Many of the nutrients on the Approval Sheet are identified as a daily requirement, but allow weekly averaging to provide flexibility in menu planning.

## Food safety and the law

**IAC 17-7.12(7)** The AAAs shall develop procedures to:

a) Ensure that food service personnel, both paid and volunteer, conform to hygienic food handling techniques and to standards given in the current edition of "Center for Food Safety and Applied Nutrition—Food Code" published by the U.S. Food and Drug Administration;

### **17-7.15 (231) Food standards.**

The AAA or contractor shall, when purchasing food and preparing and delivering meals, comply with all state and local health laws and ordinances concerning preparation, handling and serving food.

### **USDA Food Code**

2-301.12 Hand washing and use of jewelry

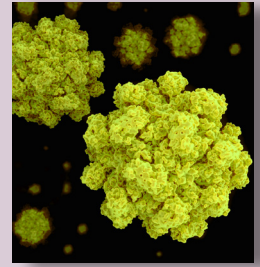
2-501 Responding to contamination events – clean-up of vomiting or diarrheal events

Annex 3 Avoid bare-hand contact with ready-to-eat foods



## Cracking down on the spread of norovirus

Norovirus is the leading cause of food-borne illness, responsible for 50 percent of all outbreaks. The highly contagious viral infection affects the stomach and intestines, causing vomiting and diarrhea in patients just 12-48 hours after exposure. It is difficult to kill and easy to spread, making it especially dangerous for older adults who are more likely to be hospitalized or die from food-borne illnesses than other age groups.



Norovirus is spread when an individual comes into contact with an infected person's feces or vomit, whether through physical contact, ingesting contaminated food or water or touching contaminated surfaces. As a result, a norovirus outbreak at a meal site can quickly lead to negative publicity and loss of business.

Norovirus can be spread by eating some foods, like oysters, fruits and vegetables, that are contaminated at their source. But it is most commonly the result of poor personal hygiene, improper holding temperatures and inadequate cooking methods.

To ensure food workers prevent norovirus from spreading, the [Centers for Disease Control and Prevention](#) recommend the following tips:

- Avoid preparing food while they are sick and for at least 48 hours after symptoms disappear;
- Wash their hands often with soap and water;
- Avoid bare-hand contact with ready-to-eat foods;
- Rinse produce and cook shellfish thoroughly;
- Clean and sanitize kitchen utensils, counters and surfaces on a routine basis; and
- Wash table linens, napkins and other laundry thoroughly.

## Foods rich in folate



Food Source	Folate (micrograms)
Beef liver, braised, 3 oz.	215
Spinach, boiled, 1 cup	131
Black-eyed peas (cowpeas), boiled, ½ cup	105
Breakfast cereals, fortified with 25% of the DV*	100
Rice, white, medium-grain, cooked, ½ cup*	90
Asparagus, boiled, 4 spears	89
Spaghetti, enriched, cooked, ½ cup*	83
Brussels sprouts, frozen, boiled, ½ cup	78
Lettuce, romaine, shredded, 1 cup	64
Avocado, raw, sliced, ½ cup	59
Spinach, raw, 1 cup	58
Broccoli, frozen, chopped, cooked, ½ cup	52
Mustard greens, frozen, chopped, boiled, ½ cup	52
Green peas, frozen, boiled, ½ cup	47
Kidney beans, canned, ½ cup	46
Bread, white, 1 slice*	43
Peanuts, dry roasted, 1 oz.	41
Wheat germ, 2 tbsp.	40
Tomato juice, canned, ¾ cup	36
Orange juice, ¾ cup	35
Orange, fresh, 1 small	29
Banana, 1 medium	24
Yeast, baker's, ¼ tsp.	23
Egg, whole, hard boiled, 1 large	22
Cantaloupe, raw, 1 wedge	14
Halibut, cooked, 3 oz.	12
Milk, 1% fat, 1 cup	12

\* Fortified with folic acid

Source: <http://ods.od.nih.gov/factsheets/Folate-HealthProfessional/#h3>

## The facts on folate

Folate is a water-soluble B vitamin that plays an important role in cell growth and metabolism. Although it occurs naturally in some foods, is added to others and is available in synthetic supplements (folic acid), many adults in the United States fail to get the recommended daily allowance of 400 micrograms.

While folic acid is probably best known for reducing the risk of birth defects of the brain and spine, the most important role of folate is in the production of RNA and DNA throughout the entire course of an individual's life.

Because low levels of folate can impede cell formation and growth, folate deficiency can lead to a number of problems, including anemia if the body is unable to produce enough new red blood cells to carry oxygen. Symptoms of folate deficiency also include inflammation of the tongue, diarrhea, mental confusion and problems with nerve function.

In addition to cell production, studies have suggested that recommended levels of folate also may protect against vascular disease, stroke in people with high blood pressure, cancer and mental disorders.

Foods rich in folate include leafy green vegetables, organ meats, orange juice, beans and legumes (see list at left). However, American adults typically consume most of their folate by eating



fortified, ready-to-eat cereals and vegetables such as green beans, peas, lettuce, cabbage and vegetable soups.

Because folate is very susceptible to destruction by heat, food processing and cooking can destroy as much as 50-90 percent of the naturally occurring folate in food. As a result, dietitians recommend cooking vegetables quickly by steaming, stir-frying or microwaving.

The folate nutrient guideline for the Iowa OAA nutrition program is at least 133 micrograms per meal, based on a weekly average. Simple ways to meet this guideline include adding fresh spinach or broccoli salad to the menu; offering a trail mix made of fortified cereal, raisins and peanuts as an appetizer; or serving a fruit crisp with a fortified cereal topping for dessert.

## Folate-Rich Recipe: Tropical Smoothie

### INGREDIENTS

1 cup crushed pineapple, chilled	1 banana, frozen, peeled
½ cup milk	1 tsp. fresh ginger, minced
1 pkg. (4.5 oz.) kale or spinach	4 ice cubes
½ cup celery, chopped	3 tbsp. milled chia seeds (optional)
1 cup green grapes, frozen	

### DIRECTIONS

Combine pineapple, milk and kale in an emulsifier blender. Cover; blend until smooth. Add celery, grapes and ginger. Cover; blend until smooth. Add banana and chia seeds. Cover; blend until smooth. Serve. Makes eight 4-oz. servings.

### NUTRITIONAL INFORMATION (PER SERVING)

Protein 5g, Carbohydrate 45g, Fat 0g, Fiber 4g, Sodium 72g, Potassium 775g, Folate 88 micrograms.



# Addressing food insecurity among older Iowans

Nutrition plays an integral role in keeping older Iowans healthy and independent in their local communities by preventing malnutrition; reducing the risk of chronic diseases and related disabilities; supporting better mental and physical functioning; and managing common chronic diseases.

To address a growing concern about meeting the needs of food-insecure older Iowans in a climate of declining funding, the Iowa Legislature appropriated \$250,000 in HF 2473 Section 9 for the fiscal year beginning July 1, 2014, and ending June 30, 2015.

With the funds, the Iowa Area Agencies on Aging (AAAs) were asked to provide meals to food-insecure older Iowans. The meals needed to follow MyPlate guidelines to ensure the provision of healthy meals and offer meal recipients options that differed from the OAA-funded meals, such as a choice of menu items, meal times or days on which meals were served.

Because partnerships with private entities were encouraged, four of the six AAAs partnered with Hy-Vee in areas



Above, dietitians Megan Conlon (left) and Stephanie Wharton (center) of the Mason City Hy-Vee work with Amy Jones (right), dietitian at Elderbridge Area Agency on Aging. The partnership was formed to help decrease food insecurity among older Iowans.

with high populations of food-insecure older adults. The other two AAAs used their existing meal providers. Older adults applied for the program by completing a registration form to identify age, income range and level of food insecurity. Qualified individuals then received meal vouchers, which allowed them to select a healthy meal.

To help evaluate the program and the funding provided, meal participants were asked to complete a survey (see sample questions below). The survey revealed that a large number of individuals who received the meals documented a significant level of food insecurity.

## FOOD INSECURITY SURVEY QUESTIONS:

In the past 30 days...

- ... were you hungry because there was not enough money to buy food?
- ... did you skip meals because there was not enough money to buy food?
- ... were you able to afford well-balanced meals?
- ... did you cut the size of your meals due to not having enough money to buy food?
- ... did you eat less than you felt you should because there was not enough money to buy food?
- ... did you run out of food and not have money to buy more?

## Iowa Falls Prevention Coalition hosts first annual symposium



### HAWKEYE COMMUNITY COLLEGE JULY 10, 2015

Join the Iowa Falls Prevention Coalition for its first annual symposium – Iowa Stands Up to Prevent Falls – and help work toward developing a system that screens older Iowans for fall risks and makes referrals to appropriate evidence-based falls prevention programs that have been proven to make a significant impact on reducing falls and fall-related injuries.

The symposium's goal is to help create an integrated evidence-based falls prevention network in Iowa. At the conclusion of the symposium, participants will be able to:

- Identify characteristics of local falls prevention coalitions;
- Discuss a process for fall risk screening, assessment and referral;
- Describe three evidence-based falls prevention programs;
- Adapt strategies to prevent falls for persons with disabilities;
- Identify environmental fall hazards;
- Recognize the role of EMS in falls prevention; and
- Define the roles of vision and medications in falls prevention.

Registration is limited to 200 participants. The early registration fee of \$35 can be obtained by entering the class code "FALLS" while registering. After July 1, the registration fee is \$50. The fee includes conference materials, continental breakfast, lunch, refreshments and CEUs. Register online at [www.hawkeyecollege.edu/go/NEI3A-conference](http://www.hawkeyecollege.edu/go/NEI3A-conference).

# Tools & Resources

## GO4LIFE MONTH OFFERS

[Go4Life®](#), the national exercise and physical activity campaign for people aged 50 and over, is offering [free resources](#) to help organizations and individuals get involved in the movement. Go4Life Month will be celebrated in collaboration with the White House Conference on Aging this coming September.

## GOOD NEWS ABOUT PROTEIN

Studies show some people can lose and maintain a healthy weight, support a healthy metabolism and age more vibrantly when they consume more high-quality protein, within calorie goals. The [Protein Challenge](#) will be published in this month's edition of the *American Journal of Clinical Nutrition*.

## MEDITERRANEAN DIET HELPS WITH COGNITIVE FUNCTION

[Research](#) indicates that older adults using a [Mediterranean diet](#) supplemented with olive oil or nuts are associated with improved cognitive function.

## 'TIS THE SEASON FOR FARMERS MARKETS

It's that time of year when shopping for fresh produce is easier and more fun than ever! Farmers markets have opened throughout the state and many continue well into October. Use the Iowa Department of Agriculture's [online directory](#) to find locally grown fruits and vegetables as well as other fresh food items, plants, flowers, crafts and entertainment at a farmers market near you.

## SODIUM CONSUMPTION

The Center for Science in the Public



Interest (CSPI) released a [report](#) and a [press release](#) on the potential costs saved by each state if sodium consumption were to be reduced to 2,300 mg daily.

Sample tweets:

[@US\\_FDA](#) can reduce state health care costs by \$100s of millions with #sodiumreduction <http://www.cspinet.org/new/201505211.html>

CA, TX, FL, and NY would save over \$1 billion/year in health care costs if [@US\\_FDA](#) acted on #sodiumreduction <http://www.cspinet.org/new/201505211.html>

We could be saving \$17 billion and up to 90,000 lives each year. Tell [@US\\_FDA](#) to #reducesodium <http://www.cspinet.org/new/201505211.html>

## TOP 10 LIST OF HEALTHY FOODS

*Medical News Today* recently updated its list of the top 10 healthiest foods to eat according to surveys and sources across North America and Western Europe. Not surprisingly, [the list](#) is comprised of lots of familiar favorites:

1. Apples
2. Almonds
3. Broccoli
4. Blueberries

5. Oily fish
6. Leafy green vegetables
7. Sweet potatoes
8. Wheat germ
9. Avocados
10. Oatmeal

## SUMMER SAFETY TIPS FOR SENIORS

Hot weather can be dangerous, especially for older adults. Every summer, nearly 200 Americans die of health problems caused by high heat and humidity – and most of them are 50 or older. Hot weather is more likely to cause health problems for older adults for a number of reasons. Physical changes that happen with age make older people less likely to notice when they feel hot, even when outside temperatures are high. They also can't cool down as quickly or as well as younger people. Older adults are also less likely to feel thirsty, which means they're more likely to become dehydrated.

For a list of hot weather precautionary tips for older adults and tip sheets on topics like how to spot and treat health problems caused by heat, visit <http://www.healthinaging.org/resources/resource:hot-weather-safety-tips-for-older-adults/>.