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What Are the Components of a Quality Nutrition Program?

The National Resource Center on Nutrition and Aging is funded by the AoA/ Administration on Community Living. The Center is presenting monthly *Momentum* webinars as a resource to nutrition programs. The first webinar was held February 12, 2002 with Jean Lloyd speaking on “What Are the Components of a Quality Nutrition Program?” The webinar and slides can be accessed at <http://nutritionandaging.org/momentum>. The following are a few points from the presentation.

The environment for providing the nutrition program is changing due to demographics, health status, care systems, society, business, technology and resources. Society is demanding services, quality services, appropriate services for specific cultures, religions and therapeutic needs. People want choices in the kind of service, time, location and duration the services are offered. There is an increased demand from home and community based services.

In the business arena, for-profits are expanding into non-traditional markets and there are competing services with restaurants, grocery stores and fitness options. Not-for-profits are becoming more entrepreneurial including social entrepreneurship. They are developing community partnerships and identify both public and private funding streams.

Quality programs need to include:

Planning: Strategic planning-where are you going and how are you getting there.

Operations: Define your product based on customer wants/needs. Meet standards for healthy eating; choice in menu, attractive presentation of food, knowledgeable and friendly staff, variety of supportive programs, services and activities. Pleasant, welcoming, supportive environment, participant input, volunteer opportunities, adequate parking and transportation, evidence based nutrition education and counseling.

Collaborations, Coordination/Coalition Integration: An example is collaboration with the Iowa Department of Public Health and USDA SNAP Ed program to provide the Chef Charles nutrition education program.

Business Capacity and Acumen: Partnerships, costing, pricing, fair market value, packaging of services. Determine your market, what is your “niche”.

Generate Funding



Have a communication strategy. Culture change in provision of meals: time meal is served; service location or place; restaurant voucher programs; café style service; offering more than one menu; food choices; more than one meal a day; fee for service/private pay options; customer service emphasis.

Funding Resource Streams: OAA nutrition program leveraged funding often comes from state, city, and county, contributions, fundraising, food donations and grants.

Performance Measurement: Has the program achieved its objective as expressed by measurable standards. Measure includes: 1) Outputs- number of meals served; quality- participant assessment of meal and services. 2) Outcomes- targeting of services i.e. functionality or nutrition risk of seniors. Answers the questions: what and why.

Program Evaluation: Examines aspects of program operations or factors in program environment that contribute/impede success and provides an in-depth examination of the program performance and context to improve results. Answers the question: why.

New Ideas for the Nutrition Program

The nutritional benefits of meals can be used to promote the Nutrition Program to the general public. Consider promoting take-out or eat-in meals with an order for the meal placed a day in advance. People are busy and more people want healthy meals.

The meals could also be promoted as a way to control calories or to meet special dietary needs. The meals are lower in sodium, concentrated sweets and fat making them appropriate for people with diabetes, high blood pressure or high cholesterol. The meals range from 550 to 800 calories which could help people control their weight.

Are there businesses near the meal site that can be targeted-- visit them and give them your menu. Make the meal available at a fair market price (total cost plus markup). This funding source can help support the congregate and home delivered nutrition program.

March for Meals

“Mayors For Meals Day” and “March for Meals” held annually, is an event to show support for the home delivered meal program that provides nutritious meals to home bound older adults. Seneca Area Agency on Aging had at least one site from each of their ten counties participate. The event increases awareness of the nutrition programs. When mayors were not able to participate, some county supervisors or other dignitaries participated. Seneca Nutrition Director, Pam O’Leary said that “the event also gives them the opportunity to mention contacting their congressman to continue funding to support all the Older Americans Act programs”. The following is a highlight of some of the events:

Sigourney Senior Center: The Mayor, Pat Miletich, went with Barb Schmidt,

**Mayors for Meals
increases
awareness
of the nutrition
programs.**

meal site manager, to deliver HD meals. The Mayor gave the meal participants the Silvergrapevine newsletter, the April menu and components of the meal. An article was submitted to the local newspaper.

Bloomfield: Paula Dearborn, site manager notified all home delivery clients that the Bloomfield Senior Center would be celebrating “March for Meals 2013” and that Linda Humphrey, Davis Co. Auditor and Dale Taylor, Davis Co. Board of Supervisor would deliver their meals on March 19th & 20th. Linda and Dale both commented on how great the meal program was and they were glad Bloomfield had this program along with many other services for the seniors. After delivering meals, both joined the meal participants at the Senior Center for the congregate meal.



Linda Humphrey and Sandra Miller



Dale Taylor and Ida Mae Lundstrum

Keosauqua: The mayor Kevin Hranicka delivered meals with Marvin Danneil. At the congregate meal site Sam Carruthers played the fiddle before lunch and then played the guitar and sang while meal participants ate their meal.

New Sharon: The “Mayor’s for Meals” was observed on Tuesday, March 19 with Mayor Dustin Hite serving meals.

Oskaloosa: The Oskaloosa meal site had a live band (Country Classics) entertaining the congregate participants prior to lunch. Several members of Mahaska County Area Agency on Aging Board were present as was the Oskaloosa Mayor, Dave Krutzfeld.

Albia: Sheryl Kaster, meal site manager, the mayor and two city council members delivered meals at Benton Place Apartments. The mayor then visited with people in the lounge and participated in the congregate meal. The event was reported in the Albia newspaper.

Chariton: City Council member, Ruth Smith delivered meals on March 20, 2013. The newspaper took pictures for an article.

Centerville: Mayor Jim Senior delivered Meals on Wheels from the Mercy Medical Center and the Appanoose Community Care Services on Tuesday, March 19 as part of the Mayors for Meals Day. Joining him were two volunteers from St. Mary’s Catholic Church, Tara Koestner and Kristen Sheston.



Sitting: Art Hermon (Meals on Wheels recipient)
Standing from Left to Right: Mayor Jim Senior,
Tara Koestner , and Kristen Sheston



Nutrition Program Data Show Program is Beneficial

The Iowa Nutrition Program does make a difference in the wellbeing of meal participants. INAPIS 2012 data shows:

- 38.4% of the congregate meal participants who were at high nutrition risk at the first screening were no longer at high nutrition risk at the second screening.
- 26.4% of home delivered meal participants were no longer at high nutrition risk at the second screening (usually 6 months).

Community Transformation Grant Health, Vending Options

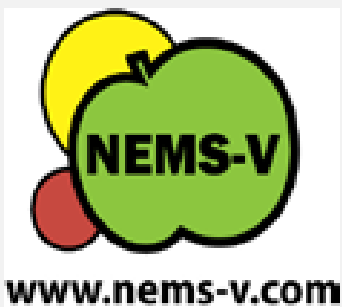
The Iowa Department of Public Health is working on the CDC Community Transformation Grant (CTG) in 26 Counties. One project is to improve the quality of food selections in vending machines. The Nutritional Environmental Measures Survey for Vending (NEMS-V) is an assessment tool that local CTG communities are using to help increase the availability of healthy foods and beverages across our state. NEMS-V helps identify which vending foods and beverages are healthy (green), healthier (yellow), or not so healthy (red).

The NEMS-V assessment system is a simple coding system of green, yellow, and red.

- GREEN - Products which would be rated as a “green” status are those which offer a full serving of fruit, vegetable, low-fat dairy, or whole grain and are considered the healthiest option.
- YELLOW - Products rated “yellow” are those which are healthier but do not provide a full serving of fruit, vegetable, low-fat dairy, or whole grain.
- RED - “Red” categories are food choices that are not considered healthy and include all food items not in the green or yellow categories.

With the color-coding system, vending machine users can make informed choices on the foods that they purchase. The local CTG communities offer NEMS-V assessments to worksites and community locations. After the completion of the assessment, the findings are shared with the worksite or community location, and healthier vending options are recommended. As the sites voluntarily decide to make changes to their vending machine options, the local CTG staff can assist with ideas on how the worksite or community location can easily implement the vending changes.

For more information on NEMS-V visit www.nems-v.com. *Does your agency have a vending machine? You may want to evaluate it to see if you can help create a healthier work environment.*



Nutrition Education 17—7.12(231) Nutrition Services.

7.12(1) Purposes of the program. The purposes of the nutrition services program are to:

c. Provide activities of interest to older individuals on each day the congregate meal site is open including a monthly nutrition education program under the supervision of a licensed dietitian if the nutrition education provides medically oriented information.

Reporting Manual 12 Nutrition Education (one session per participant). The INAPIS Registration is not required (but beginning July 1, 2013 it will be required); however, IDA encourages reporting of this service. A program to promote better health by providing accurate and culturally sensitive nutrition, physical fitness, or health (as it relates to nutrition) information and instruction to participants and caregivers in a group or individual setting overseen by a dietitian or individual of comparable expertise.

The “overseen by a dietitian or individual of comparable expertise” could be the review and selection of medical-oriented nutrition education material. This individual could also provide suggestions to the person designated to provide the nutrition education on how to incorporate adult learning principles and provide background information on the topic to facilitate learning or promote the desired behavior change as a result of the nutrition education provided.

Nutrition education involves an interaction between a leader and one or more participants. Providing reportable nutrition education to home delivered meal clients entails having the nutrition educator being in the home to discuss the nutrition education material. This most likely is not feasible during the regular meal delivery due to time constraints. Nutrition education could be provided during an in-home assessment for homebound status and nutrition screening when more time is available.

AGE OF CHAMPIONS Documentary – National Online Premiere April 18-28, 2013

Age of Champions tells the story of five competitors who sprint, leap, and swim for gold at the National Senior Olympics. You’ll meet a 100-year-old tennis champion, 86-year-old pole vaulter, and rough-and-tumble basketball grandmothers as they triumph over the limitations of age.

Age of Champions is a powerful resource for senior health advocates to engage older adults and start a positive conversation about aging in their communities. Organize a movie night, forward this email, or invite your community to watch the film through your website, e-newsletter, blog, events calendar, or social media pages using the link: ageofchampions.org/premiere



Dark Green Vegetables

Are you getting tired of including the same dark green vegetables on the menu. Here are some alternatives listed on www.choosemyplate.gov.

- Bok choy
- Broccoli
- Collard greens
- Dark green leafy lettuce
- Kale
- Mesclun
- Mustard greens
- Romaine lettuce
- Spinach
- Turnip greens
- Watercress



Generations Area Agency on Aging Recommended Spinach Salad.

Catherine Pratscher-Woods, says this recipe has been very popular at the GenAge Cafes.

Popeye's Favorite Spinach Salad with Orange, Egg and Nuts



INGREDIENTS:

- 3 cups fresh spinach
- 1 small orange or small can of mandarin oranges
- 1 tablespoon chopped red onion
- 1 hard cooked egg
- 1 tablespoon of your favorite unsalted nuts (walnuts, almonds, pecans or peanuts – can be used)
- 2 teaspoons olive oil
- 2 teaspoons orange juice
- 1/2 teaspoon lemon juice

DIRECTIONS:

In a bowl combine the spinach, orange (peeled, sliced & seeded) red onion, egg shelled and sliced. For dressing combine the olive oil, orange juice and lemon juice in a small bowl mix and drizzle over salad. Makes two servings.

Nutritional Information:

Each serving contains: 231 Calories; 15g fat; 122 mg sodium; 14 g carbohydrates; 3 g fiber; 120 mg calcium; 507 mg potassium; 148 mcg folate





Food Insecurity Continues to Increase

According to the [Food Assistance Landscape: FY 2012 Annual Report](#) about 1 in 4 Americans participated in at least one of USDA's 15 food and nutrition assistance programs. Expenditures for these programs totaled \$106.7 billion, 3 percent more than the previous fiscal year. Food insecurity is increasing for all age groups and the cost of food has increased as reflected in the Consumer Price Index (CPI). The largest increase in food costs was in 2011 but it is still increasing.

Selected Economic Indicators	2010	2011	2012
Food insecure households (thousands)	17,229	17,853	NA
Very-low-food-security households (thousands)	6,357	6,839	NA
CPI for all items (percent change)	1.6	3.2	2.1
CPI for food (percent change)	0.8	3.7	2.6
CPI for food at home	0.3	4.8	2.5
CPI for food away from home	1.3	2.3	2.8

Consumer Price Indexes (CPI) program produces monthly data on changes in the prices paid by urban consumers for a representative basket of goods and services.

Food Security Questions

The following questions are a reasonable measure of food insecurity in older adults participating in the Older American Act Nutrition Program.(Jung Sun Lee, Mary Ann Johnson, Arvine Brown, and Mark Nord. Journal of Nutrition, May 2011). These could be added to screening tools to help prioritize individuals most in need of nutrition services.

These next questions are about the food eaten in your household in the last 30 days and whether you were able to afford the food you need.

1. During the last 30 days, how often was this statement true: The food that we bought just didn't last, and we didn't have money to get more.

Often Sometimes Never

2. During the last 30 days, how often was this statement true: We couldn't afford to eat balanced meals.

Often Sometimes Never

3. In the past 30 days, did you or other adults in your household ever cut the size of your meals because there wasn't enough money for food?

Yes, on ≥ 3 days Yes, on 1 or 2 days No

4. In the past 30 days, did you or other adults in your household ever skip meals because there wasn't enough money for food?

Yes, on ≥ 3 days Yes, on 1 or 2 days No

5. In the last 30 days, did you ever eat less than you felt you should because there wasn't enough money to buy food?

Yes No

6. In the last 30 days, were you ever hungry but didn't eat because you couldn't afford enough food? Yes No



**Fruits and
vegetables
give
mental boost.**

Fruit and Vegetable Intake in Older Adults with Depression

(Acad Nutr Diet 2012;112:2022-2027)

Depression is a serious and common mental disorder. It is the third leading cause of disease burden and is the leading cause of disability worldwide. Depression is associated with poor nutrition, which may be both a contributor to and consequence of depression. One aspect of an inadequate nutritional intake is low intake of fruits and vegetables which leads to low intake of antioxidants. Antioxidants may protect against aging and chronic diseases, and may have a role in depression.

In a recent study, antioxidants from fruit and vegetable intake rather than dietary supplements were associated with depression. Antioxidants, fruits, vegetable intake were lower in individuals with late-life depression. This study illustrates the benefit for consuming a well-balanced diet.

The congregate and home delivered nutrition program provides 1/3 of the recommended servings for fruits and vegetable. Nutrition education needs to provide information and encouragement for older adults to consume adequate fruits and vegetables for their other meals.

An individual aged 51+ who needs 2000 calories a day should eat 2.5 cups of vegetables and 2 cups of fruit each day.

Suicide

The following are notes from a 1-16-13 Administration on Aging sponsored webinar on suicide. The archived webinar may be accessed at the Administration on Aging (AoA) [web site](#). Additional information may be found at this site in the Issue Brief #4: *Preventing Suicide in Older Adults*.

Suicide occurs more often in men and later in life. Older adults are more apt to die on the first attempt. This may be that they are more isolated and no rescue occurs or they are more determined. Guns are the method in 67% of the cases. For older adults at risk of suicide, intervention must be more aggressive.

Some risk factors include:

- Social-loss, isolation, dependence
- Medical- cancer, COPD, CHF, severe pain. Three physical illness increases risk 3 times.
- Psychiatric – depression (stronger risk in older adults)
- Personality traits- increased anxiousness, angry, sad, fearful
- Prior attempt

Screening does not increase risk. Ask “in last two weeks, have you had suicidal thoughts or thoughts of hurting or killing yourself? Anyone can ask these questions. If the answer is yes, they should not be left alone and intervention is needed. Refer to the Issue Brief at the AoA link.



Food Assistance

Getting more out of SNAP: Many older adults may not be getting their full benefit from the Supplemental Nutrition Assistance Program (SNAP), they may be receiving the minimum \$16 a month in benefits. But they may be missing out on higher benefits because they don't take advantage of the medical expense deduction. Federal regulations allow many medically recommended procedures and supplies to count toward the medical deduction, including:

- Medical/dental care
- Hospitalization and nursing home costs
- Costs of health insurance premiums, deductibles, and co-pays (including Medicare)
- Dentures, hearing aids, prosthetics
- Costs associated with owning a service dog
- Eye glasses prescribed by an optometrist or specialist
- Transportation and lodging costs incurred to obtain medical treatment, including mileage (calculated at federal rate = 56.5¢/mile in FY13)
- Attendant, home health aide, homemaker, or child care services
- Over-the-counter and prescription drugs, vitamins, supplies, and equipment
- Call the **Iowa Hotline at (877) 937-3663** for more information and to see if the application can be made over the phone.

In January the average older Iowan's monthly Food Assistance benefit for one person household was \$89 and for two person household was \$121. The higher amounts were received by the 60-69 year olds.

Senior Hunger Issues Newsletter: The National Foundation to End Senior Hunger has released their first edition of "Rooftops," an online newsletter. This newsletter seeks to inform, engage, and recruit anyone interested in the very important topic of senior hunger issues. Click [here](#) to subscribe to the "Rooftops" newsletter.

Nutrition Program Resources

- **Perspectives on Nutrition and Aging Proceedings Now Available**

The National Resource Center on Nutrition and Aging (NRC) has released of the Proceedings from [Perspectives on Nutrition and Aging: a National Summit](#), held August 23, 2012 held on the 40th anniversary of Older Americans Act nutrition program. The Summit provided a day of future-focused discussion about the critical link between nutrition and health in the context of a rapidly aging nation. [Explore](#) the complete compilation of presentations, videos and supporting materials published in the Summit Proceedings.

- The National Resource Center on Nutrition and Aging continues the dialogue initiated in the 2012 Summit in the "[Momentum](#)," a series of discussions in a webinar format about building the future of senior nutrition services. The slides from the presentation "Components of a Quality Nutrition Program" can be assessed at http://mowaacenter.org/momentum/qualitynutrition_1.pdf

Nutrition Education

- **Nutrition educational materials and best practices** can be found at The National Resource Center on Nutrition and Aging .
<http://www.nutritionandaging.org/resources-tools/client-education-materials>
- **A Little Less Sodium Saves Lives:** HHS HealthBeat (March 21, 2013)
Researchers have figured out what would happen if we all started to use a little less salt in our food.
 - [A little less sodium a lot of lives](#)
Listen to the podcast [here](#)
Eat Less Sodium: Quick Tips [here](#) .
- **My Plate website** has six new [SuperTracker site tour videos](#) under the SuperTracker "Help" menu. These videos demonstrate how to use the following features:
 - [My Foods](#) (*New Enhancement!*)
 - [Physical Activity Tracker](#)
 - [My Top 5 Goals](#)
 - [My Weight Manager](#)
 - [My Journal](#)
 - [How to Recover a Forgotten Username or Password](#)
- **MyPlate for Older Adults** and **MiPlato para Adultos Mayores** mini-posters that are available for free download at :
<http://fycs.ifas.ufl.edu/extension/hnfs/enafs> or for bulk purchases at :
<http://ifasbooks.ifas.ufl.edu/c-10-health-nutrition-family-and-community.aspx> . **Eight Elder Nutrition and Food Safety modules** are available at the [same link](#). A Nutrition bingo game that is fun to use at congregate meal sites is also available.
- **Eat Smart, Live Strong** has been updated. This resource targeted to 60-74 year olds, originally released in 2008, is now consistent with the 2010 Dietary Guidelines for Americans and MyPlate. The resource uses a variety of approaches to promote 2 key behaviors:
 - increase fruit and vegetable consumption to 3 ½ cups per day (1 ½ cups of fruit and 2 cups of vegetables), and
 - participate in at least 30 minutes of physical activity most days of the week.

The Activity Kit includes a Leader’s Guide to assist in delivering and promoting the intervention and four session guides to reinforce key behaviors. Each session encourages achievement by allowing participants to practice both nutrition and exercise activities. The Activity Kit can be downloaded: <http://snap.nal.usda.gov/resource-library/nutrition-education-materials-fns/eat-smart-live-strong>

Health Promotion

- **What works: Skin Cancer Prevention.** Skin cancer is the most common form of cancer in the United States. People can lower their risk of getting skin cancer by getting less sun exposure, protecting themselves while in the sun, and avoiding indoor tanning. For more information, <http://www.thecommunityguide.org/about/What-Works-Skin-Cancer-fact-sheet.pdf>
- **Fall Prevention Resource List:** NCOA recently updated its Falls Free® Resources that highlights websites, online publications, evidence-based program sites, and general aging resources. [View recommended resources](#)
- **CDSMP in the News:** The Fox affiliate in Roanoke, Virginia recently aired a story on the Chronic Disease Self-Management Program. Be sure to click "play" on the embedded video. [Watch the video](#)
- **CDSMP Shows Benefits:** The Centers for Disease Control and Prevention recently published a study of health status, health behaviors, and health care utilization outcomes of CDSMP. Among the findings, small to moderate improvements in psychological health and selected health behaviors that remain after 12 months suggest that CDSMP produces health benefits for participants and would be a valuable part of comprehensive chronic disease management strategy. [Read the full article](#)
- **Navigating self-management programs and patient-centered medical homes:** The Agency for Healthcare Research and Quality (AHRQ) offers brief, easy-to-understand advice columns for consumers. Go to <http://www.ahrq.gov/news/columns/navigating-the-health-care-system/030513.html>.
- **Behavior Health Issues:** The Substance Abuse and Mental Health Services Administration (SAMHSA) and the Administration on Aging (AoA) recognize the value of strong partnerships for addressing behavioral health issues among older adults.

They have developed issue briefs and webinars, particularly in the areas of addressing suicide, anxiety, depression, and alcohol and psychoactive medication misuse and abuse among older adults, and are partnering to get these resources into the hands of aging and behavioral health professionals.

For more information regarding the Older Adults Behavioral Health Technical Assistance Center, please contact Donna Siu at JBS International, Inc. at dsiu@jbsinternational.com

Oral Health-Dry Mouth Brochures: The Iowa Department of Public Health Oral Health Bureau has a large supply of brochures designed to help older adults deal with dry mouth. These brochures will be sent to each of the Area Agencies on Aging in early April.

- **Millions of Hearts: Team Up. Pressure Down:** High blood pressure contributes to nearly 1,000 deaths a day nationally. The leading risk factor for heart disease and stroke is high blood pressure. 1 in 3 adults have high blood pressure and too many do not have it under control. The Millions of Hearts program is encouraging blood pressure checks by pharmacists and dentists in addition to the doctors. The AAAs can obtain educational materials at <http://millionhearts.hhs.gov>. Also the CTG grant has blood pressure brochures available at www.idph.state.ia.us/CTG.

Food Safety

- **Time to Clean the Scene:** Your refrigerator is an important appliance. Make it the focus of your spring cleaning. This information sheet has steps to clean and sanitize refrigerator surfaces and a link to safe food storage times.
http://www.fsis.usda.gov/factsheets/refrigeration_&_food_safety/index.asp
- **Slow Cooker Food Safety:** Slow cookers are easy to use and are helpful in cooking for one or two people. These appliances cook foods slowly at a low temperature - generally between 170 F and 280 F. Safety tips can be found at
http://www.fsis.usda.gov/FACTSheets/Focus_On_Slow_Cooker_Safety/

Emergency Preparedness

- **The Get Ready: Set Your Clocks, Check Your Stocks** campaign has checklists, fact sheets and shopping lists to help you whether you are refreshing your emergency kit or starting from scratch. Remember: It's always better to update your supplies before an emergency occurs.

Fund Raising

- **Brewery Partnership:** The Center for Active Seniors, Inc. (CASI) is proactively raising funds and awareness to address the increase in demand for programs and services. To help this mission, CASI has teamed up with a regional microbrewery, Great River Brewery, to create a new beer dedicated to seniors and senior services. The results: Owey Irish Red Ale. Owey, an old Irish name for "elderly" is being released in retail locations throughout the Quad Cities. Proceeds from the sale of Owey Irish Red Ale will be used by CASI to fund services for seniors in the Quad City community.