



*Meals on Wheels and More
Person Centered Approach*

Mission Statement

Meals on Wheels and More seeks to **nourish** and **enrich** the lives of the homebound and other people in need through programs that **promote dignity** and **independent living**.



Guidelines for meals

- Physical or mental impairment that makes the act of preparing an adequate meal a difficult task
- Basically homebound
- Individual does not have supportive services to provide a lunch time meal
- Quantitative data: ADL/IADL score; a depression screen, and at nutritional risk



Meals on Wheels and More

Who we serve?

65% are women 35% are men
24% Hispanic 76% non-Hispanic
31% are African American
68% are over the age of 65
85% are low-income with incomes below
\$24,000 (Individual)
53% live alone



Meals on Wheels - History

Began in 1972 as a small home delivered meal program

Delivered meals 3 times a week

35 volunteers prepared and delivered meals to 29 people

Prepared meals out of several church kitchens including St. Julia Catholic, and Ebenezer Baptist Churches in East Austin

Experienced a few changes in 43 years...



Generalist vs. Person Centered

- Always recognized the importance and role of social workers
- No structure in place to address a person centered approach
- In 2009, the agency embraced a new approach and structure for our Client Services Department.



Person Centered Approach to Services

Based on the motivations, self identified needs and values of the people we serve

Involves working with some of the most complex social issues/problems that older adults experience and developing manageable goals

Our social workers/care managers have to be highly skilled professionals in order to effectively assess the situation of the individual and assist in a plan that has an effective intervention



Person Centered Approach CARE Team

- Developed a 2 tier case management model
- CARE Team (Tier I) – more knowledgeable and experienced staff, often advanced, degreed case management team
- Coordinate services, resources and referrals for the individual; assist the client in identifying own realistic goals



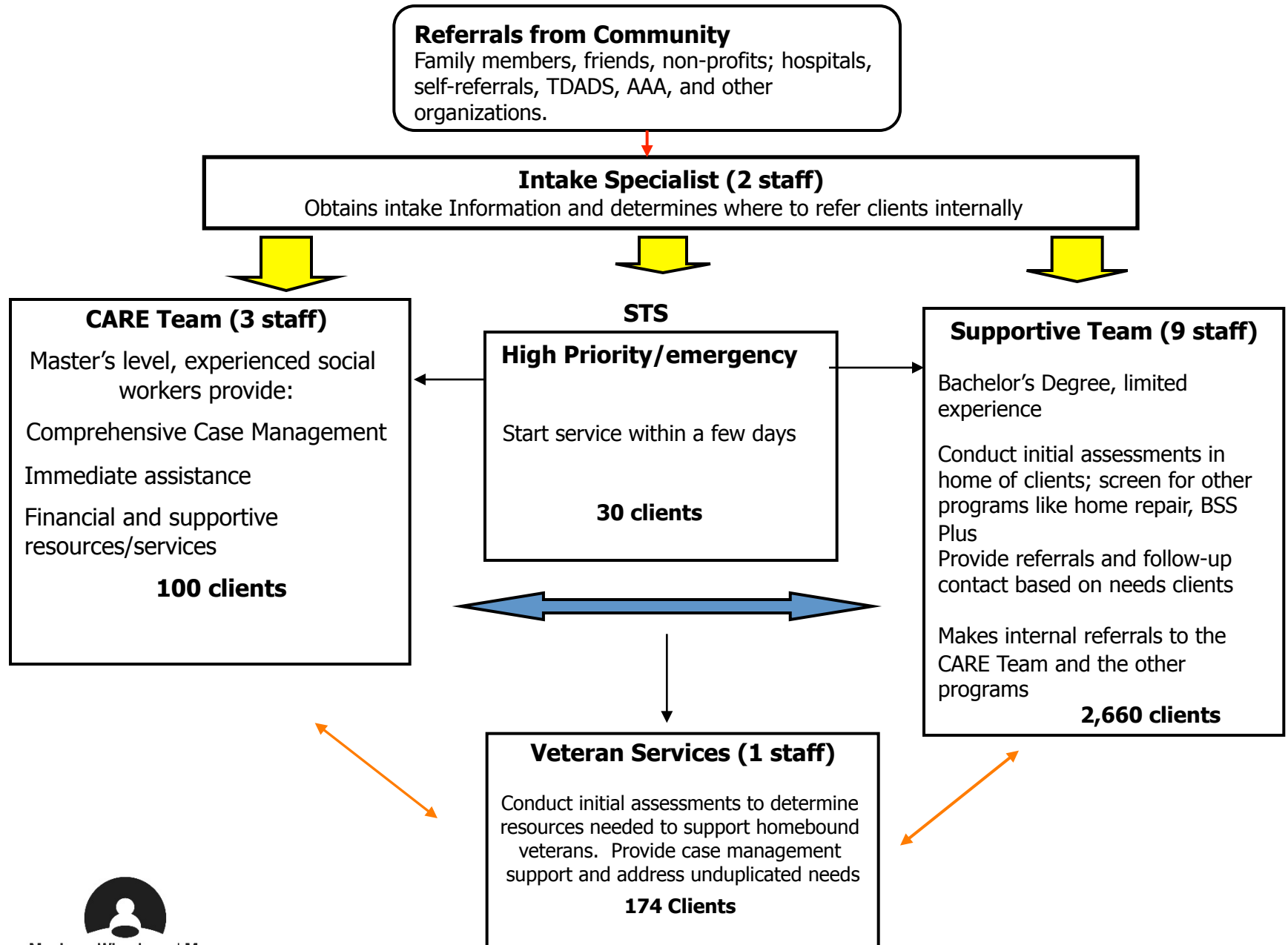
Person Centered Approach

Supportive Team

- Supportive Team (Tier II) provide limited referrals; act as a connector to other community resources including our internal programs and CARE Team
 - a. Enroll clients in our meal program in the privacy of their own homes; provide information and resources
 - b. Screen clients for program eligibility and services; for example: BSS Plus, our home repair programs, the GTG, PALS, HOPE, Mike's Place, and Veteran Services.



Case Management Model - Schematic



Who Are We Now

Case Management Model focuses on four broad areas of need

- Nutrition Services
- Financial support
- Emotional and mental health support
- Physical safety through home modification



Consequences of Poor Diet on Functionality

**Limits Muscle Strength
Reduces Stamina
Prevents Physical Activity**

**Decreases ability to:
Perform ADLs & IADLs:
Eat, Walk, Grocery Shop, Prepare Meals
Grip Items & Lift Heavy Objects**

**Increases Dependency
Increases Need for Caregiver Assistance
Increases Risk for Falls & Fractures**

Threatens Independence--Reduces Quality of Life--Increases Healthcare Costs



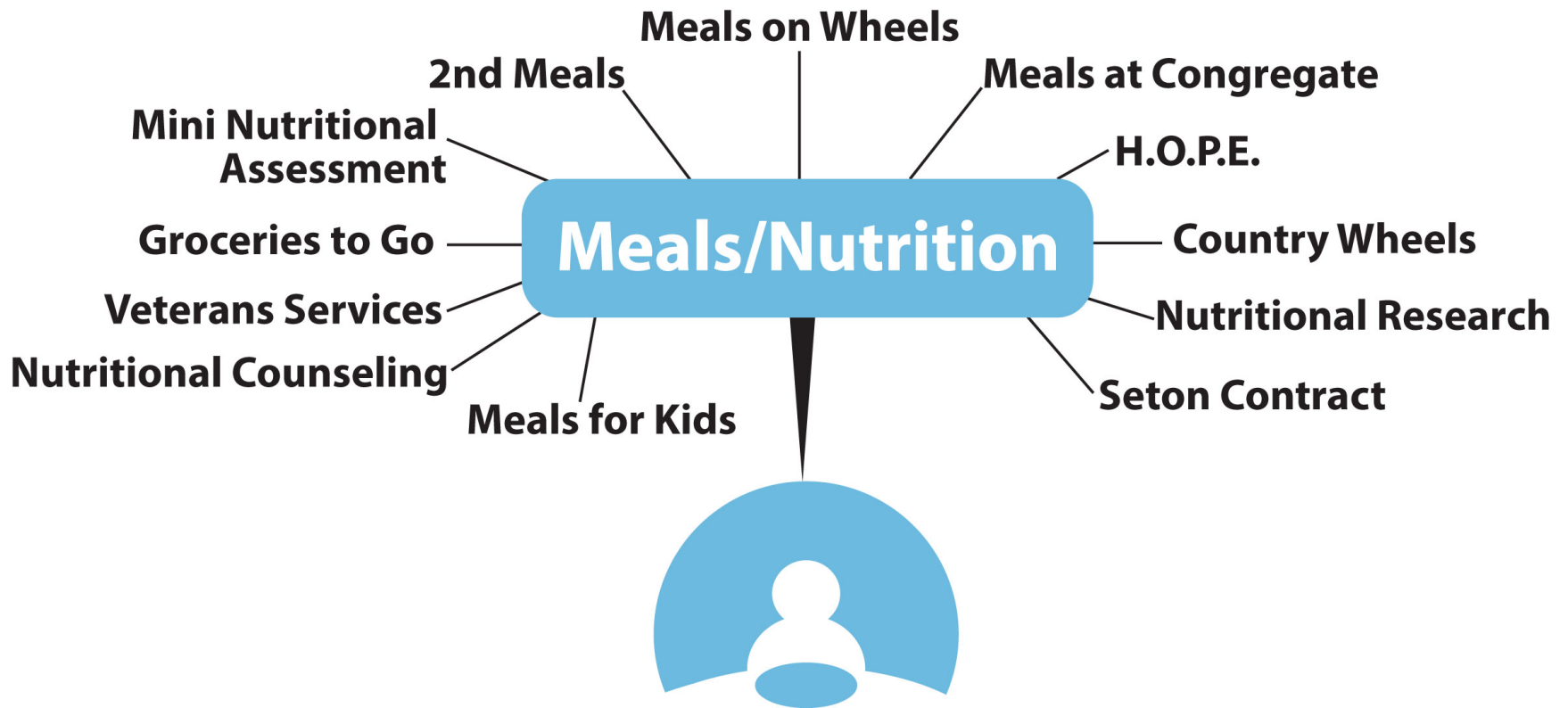
Meet Seniors Where they Are

- There is a continuum of need
- Older adults can struggle with hunger and malnourishment for various reasons
- Some of these factors include:
 - Accessibility; decreased driving capacity
 - Physical ability (shop, cook and prepare)
 - Limited income



Who We Are Now

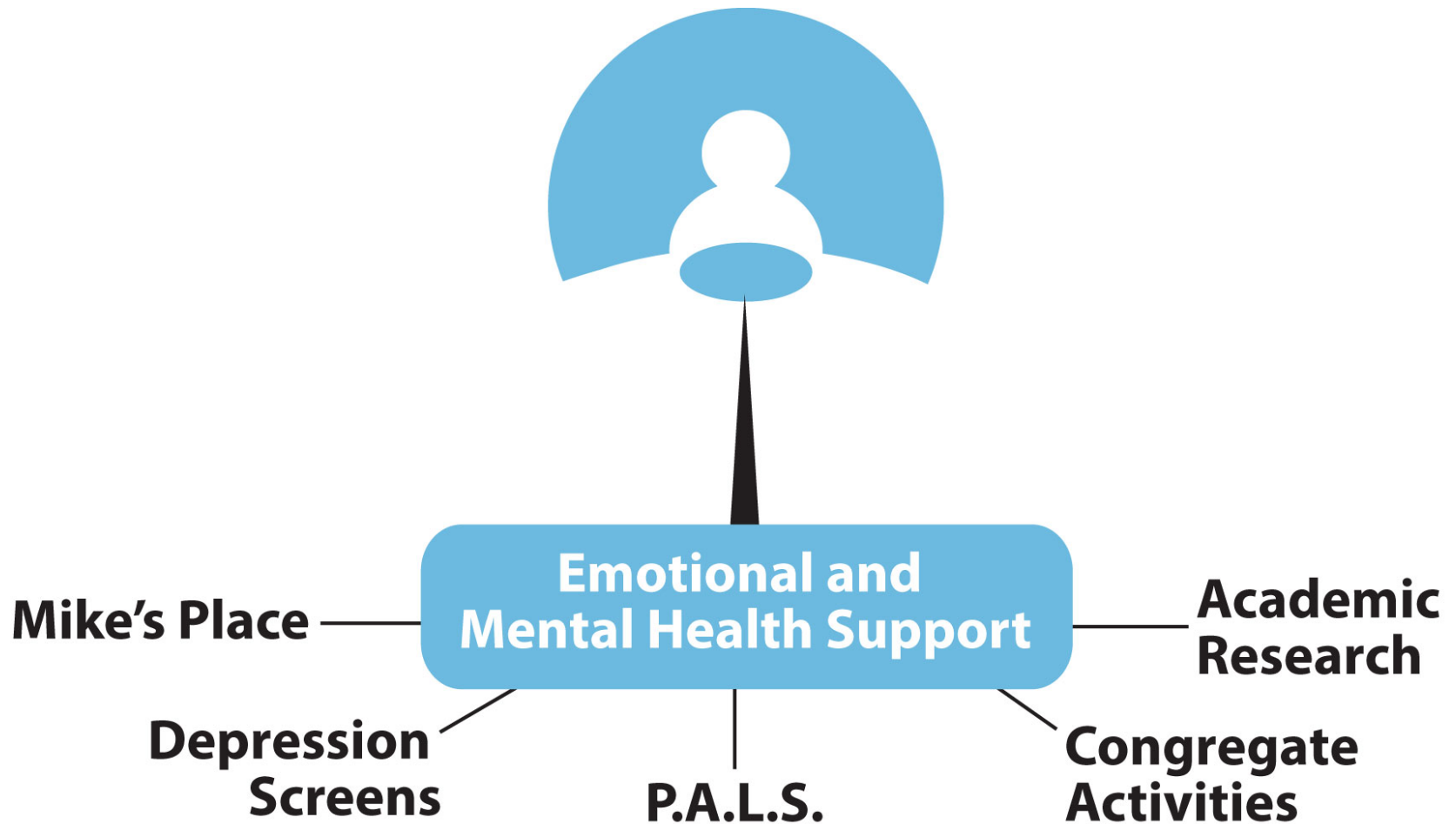
Doors Open



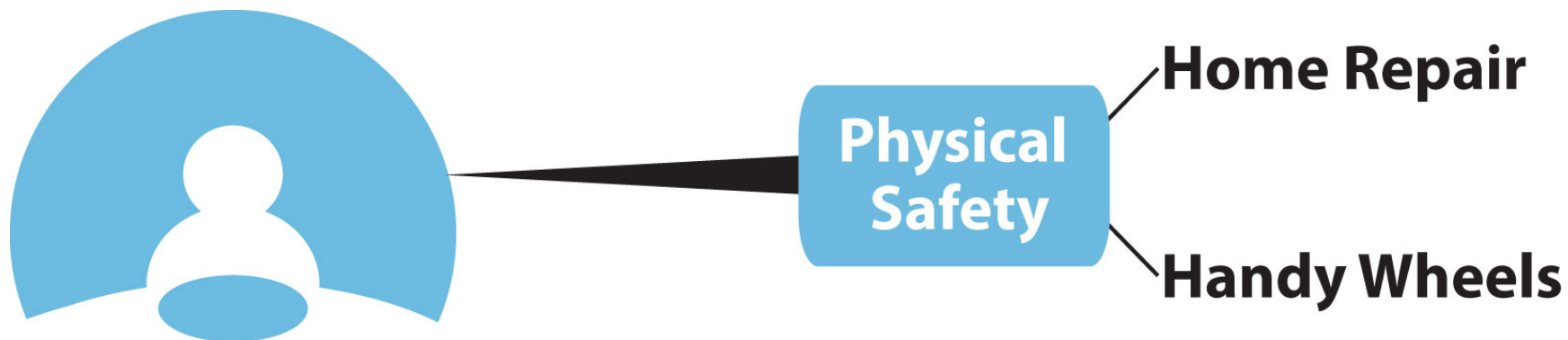
Who Are We Now



Who We Are Now



Who We Are Now



Support for the Caregiver

- a. Meal program provides respite to the caregiver
- b. Delivery of a daily meal provides a safety net component
- c. Delivery of a meal and a daily visit provides peace of mind



Support to the Caregiver

- Meet with family when convenient for their schedule
- Provide short-term services for up to six weeks or more extensive long term services
- Assist with supplemental support through our other programs and information and case management



Flexibility in Program

- Client develops his or her own meal delivery schedule
- Offer different types of meals; regular, bland, low-potassium, pureed, soft mechanical based on the medical need
- Currently developing client choice of entree to kick off in September of 2015



How do we define Success

- Our meal program solicits feedback using two surveys a year; one is a food survey, one is a nutrition risk and service performance survey.
- 80% of clients maintained or improved their nutritional status in the last year.
- 70% of clients completed one or more of their self-determined goals.
- Anecdotally, our case managers receive almost no emergency calls on Friday afternoon.



How Do We Measure Success

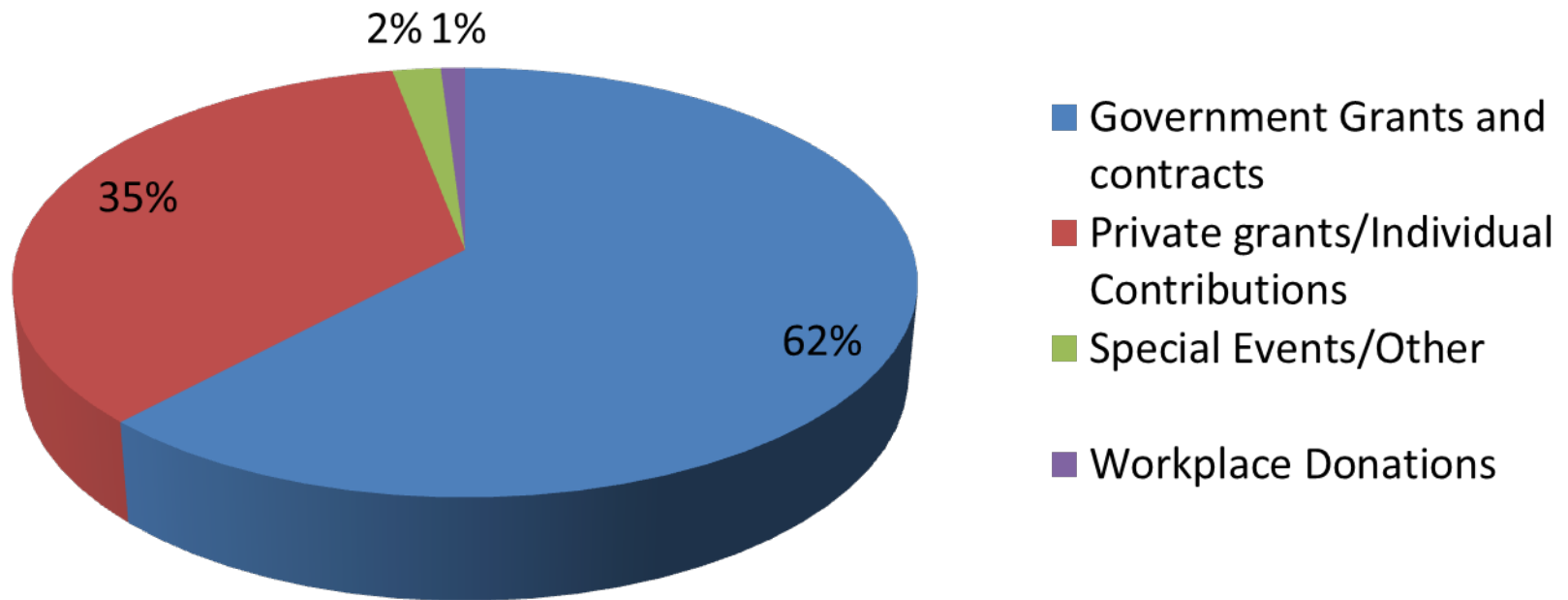
- Identifying clients who are malnourished and have unintentional weight loss
- Registered Dietitians on staff conduct an 8 week follow-up after meal service begins
- Of the clients who participated 70% reported an improvement in their weight (stable or gain).



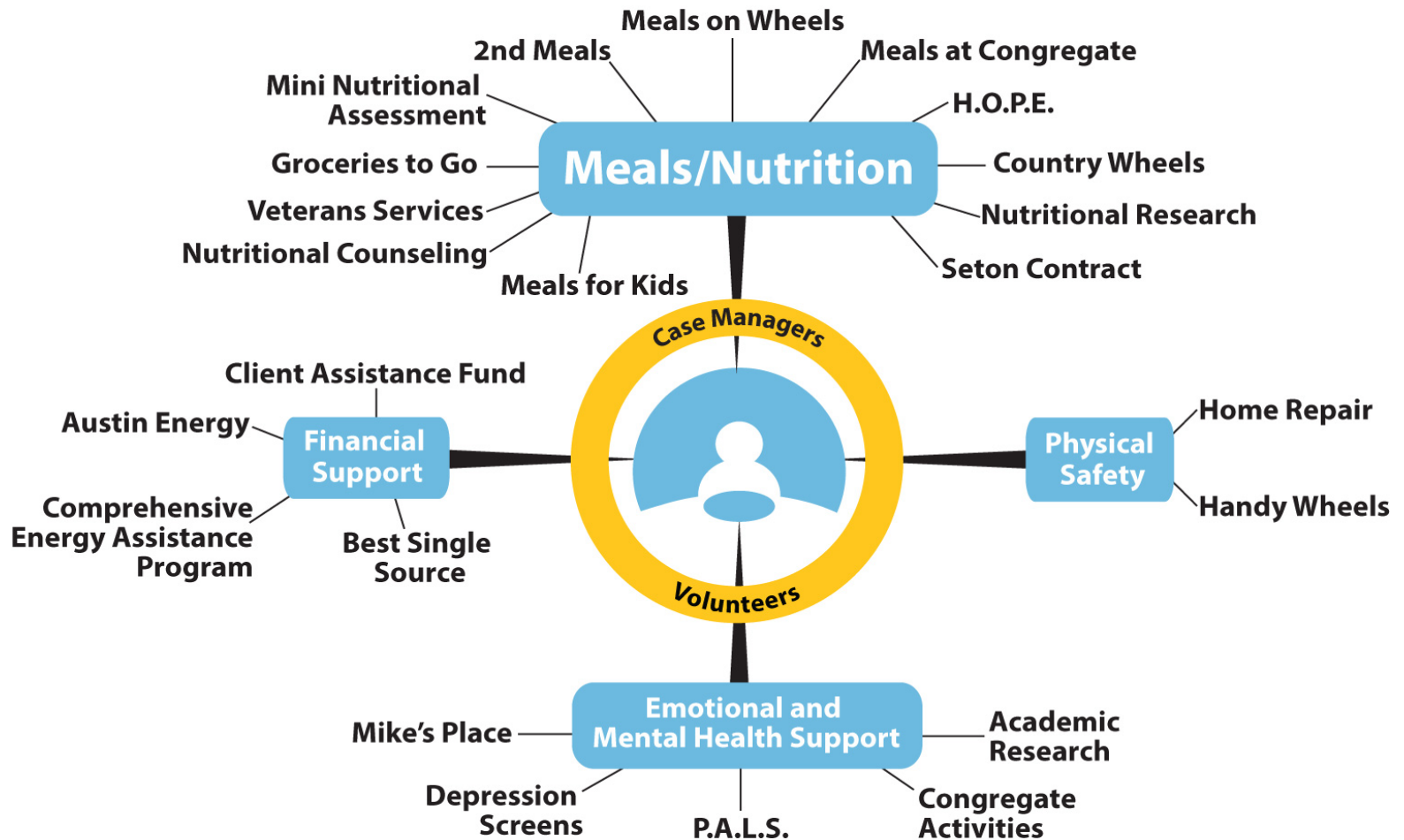
Major Sources of Funding

Funding

**Annual Report
2013**



Who We Are Now



Volunteers

- Volunteers are the “eyes and ears” of our meal program
- They are the daily link between our homebound clients and our agency and report medical, financial, environmental concerns on behalf of our clients
- Volunteers are needed at a number of church locations. Please call Denise Jimenez at 512-476-6325 (143)



Three wishes

- **Increased federal, state and local nutrition funding**
- **Increase community emphasis on the importance and connection between overall good health outcomes and improved nutrition**





"I'm always going to be extremely grateful to Meals on Wheels and More for what they've done for me. They gave my life some stability" - Evan Johns, Client



"They're not my delivery people, they're my friends" - Dolores Rodriguez, Client



"It just helps you value every phase of life. Someday we'll all be where we need somebody's help." - Kyle Wilkie, Volunteer