

NUTRITION 2030 GRASSROOTS SURVEY

REPORT

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Nutrition 2030 Grassroots Survey **EXECUTIVE SUMMARY**

The purpose of ***Nutrition 2030 Grassroots Survey*** was to describe the current operational environments of Elderly Nutrition Programs (ENPs) as part of ***Nutrition 2030***, a strategic initiative to help ENPs modernize. ***Nutrition 2030*** is funded by the US Administration on Aging (AoA) through the Older Americans Act.

Elderly Nutrition Programs and other non-federally funded meal programs, collectively referred to here as ENPs, responded to a survey containing ten sections with 5-17 items to be ranked in each section. This survey was distributed primarily by broadcast fax and posted online at the National Policy and Resource Center on Nutrition and Aging at Florida International University. Responses were received April-August 1999. Data was analyzed using ANOVA and chi-square techniques.

Of the 478 respondents, 67% were ENPs; 23%, Area Agencies on Aging (AAAs); 2%, State Units on Aging (SUAs). Respondents were 44% rural, 28% urban, 14% suburban and 14% mixed rural, urban and suburban. Forty-four percent served >500 meals daily; 37% served 101-500 meals; and 19% served <100 meals daily. Respondents who were producing meals themselves on site equaled 36%; another 36% contracted with vendors; and 27% had a central kitchen. More than 70% received both public and private funds and 23% received only federal funds.

Results indicate ENPs are already being challenged to meet current service demands regardless of organization type, location, size, production method and funding source. Preoccupation with funding colored ranking responses and open-ended questions. Almost half of the highest ranked items dealt broadly with federal regulations related to providing nutritional assessment, safe time and temperature for food, nutrient content of meals, nutrition services, and with determining program outcomes. This is a system grappling with decreasing resources, diminishing numbers of volunteers, and increasing and shifting demands for services from congregate sites to homes. The desire for knowledge in terms of technology and software was evident.

The challenge of the Elderly Nutrition Program in preparation for Year 2030 is to establish consistent outcomes across a number of food and nutrition service areas. Those measurable outcomes could then be used to document better the value of ENPs and better position them for increased funding from all sources, including both public and private. The result would be more and better food and nutrition services in home and community settings for the increasingly diverse and burgeoning number of older Americans.

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Nutrition 2030 Grassroots Survey

INTRODUCTION

The Year 2030 marks the milestone when the first Baby Boomers will enter the ranks of the “old-old” (age 85+) and a large number of Generation Xers will begin turning 65. The doubling of the number of older adults to 70 million by the year 2030 will challenge the Aging Network and our Nation (1).

Nutrition 2030

meals served daily (four ranges), and production and funding methods (Table 1). Two open-ended questions asked “*What is your agency’s most pressing problem today?*” and “*What do you anticipate the most pressing problem of the future will be for your agency?*” Respondents could provide their names and titles on the survey, but both responses were “*optional.*”

An interactive version of survey was posted on the website of the National Policy and Resource Center on Nutrition and Aging, www.fiu.edu/~nutreldr. Notices about the survey were posted on three other websites, the AoA, the Gerontological Nutritionists (GN), a Dietetic Practice Group of the American Dietetic Association, and the National Association of Nutrition and Aging Services Programs (NANASP). The notices contained links to the survey itself. Anyone “*involved in any way with the Older Americans Act’s Elderly Nutrition Programs*” was invited to respond. Respondents were able to access the online survey from April to August 1999.

The Meals on Wheels Association of America distributed the survey to its members by broadcast fax. Copies of the survey were distributed to persons attending a NANASP Annual Meeting session in Chicago in June where Center faculty, Marta Alfonso, gave a presentation about **Nutrition 2030**. Thus, persons working in ENPs, AAAs and SUAs completed the survey.

Surveys were submitted to the Center online, via return fax to MOWAA, through regular mail to the Center or were handed in directly to Center personnel. While the number of respondents was large (n = 478, Table 1), respondents may not be representative of the entire ENP community or the Aging Network. There were differences in the number of respondents (range = 446-361) who ranked each item and the number of respondents within subgroups varied. The results in this report depict the submitted data.

The Statistical Package for the Social Sciences (SPSS) for MSWindows (version 8.0, 1998, Chicago, IL) was used for data analysis. Analysis of variance (ANOVA) was used to analyze differences among and within all groups. Chi-square techniques evaluated subgroup tendencies. Missing data (non-responses) were eliminated before analysis; therefore, various analyses had different sample sizes. Statistical significance was set at $p < 0.05$.

RESULTS

Characteristics of Respondents

Table 1 includes descriptive characteristics of the 478 respondents to the **Nutrition 2030 Grassroots Survey**. Two-thirds of the respondents were ENPs; 23%, AAAs; 2%, SUAs. Respondents were 44% rural, 28% urban, 14% suburban and 14% mixed rural, urban and suburban. Forty-four percent served >500 meals daily; 37% served 101-500 meals; 19% served <100 meals daily. Equal percentages of respondents (36%) produced meals on-site or were vendor operated (i.e., an outside contractor provided the meals). Twenty-seven percent had central kitchens. More than 70% of the respondents received both public and private funds. Thus, the typical respondent was in a rural location, served over 500 meals daily that were prepared on-site or by a vendor and received public and private funds.

Table 1
Characteristics of respondents to the
Nutrition 2030 Grassroots Survey

TOTAL	n = 478
Organization type	
ENP	304 (67%)
AAA	104 (23%)
SUA	11 (2%)
Unknown	35 (8%)
Total	454 (100%)
Location	
Rural	200 (44%)
Urban	125 (28%)
Suburban	63 (14%)
Combination	63 (14%)
Total	451 (100%)
Number of meals served	
>500	201 (44%)
499-200	99 (22%)
199-100	68 (15%)
<100	87 (19%)
Total	457 (100%)
Production method	
Self-operated on-site	166 (36%)
Vendor operated	165 (36%)
Central kitchen	123 (27%)
Other	2 (<1%)
Total	456 (100%)
Funding method	
Both public and private	308 (71%)
Public only	99 (23%)
Private only	16 (4%)
Not applicable	13 (3%)
Total	436 (100%)

Table 2 shows the geographical distribution of respondents according to US Administration on Aging regions. Three of the nine AoA regions (II, V, IX) accounted for 51% of the respondents. Surveys were received from 47 of the 57 states and territorial jurisdictions. Six states accounted for 47% of the respondents: California, Wisconsin, New York, Idaho, Colorado and Texas.

Table 3 shows the means and standard deviations for each of the ranked items within the ten sections of the survey. Item rankings were reversed so that the highest mean number represented the highest ranking (most important). On Table 3, the ten sections were grouped under three broad categories (food and nutrition services, foodservice, management) to increase clarity and comparability of information. (Note: Rankings on Table 4 for ANOVAs were not reversed; lower means represent higher rankings.)

The narrative below highlights the two highest ranked items in each section. A closer examination of Table 3 reveals the many items that were of interest to respondents. Such information is useful to the aging network at all levels for program planning, resource allocation and training.

A. FOOD AND NUTRITION SERVICES Category

Nutrition Services

Providing nutritional assessments and providing nutrition education were the top-ranked items in the nutrition services section (Table 3). The narrow range of rankings (3.7-2.6) in this section indicates that the respondents considered *all* nutrition services items important. ANOVA indicated no differences in rankings for nutrition services items by organization type, location, number of meals served, production method or funding sources.

Congregate Meals

Providing outreach and improved marketing were the top-ranked items in the congregate meals section (Table 3). There were no statistical differences in rankings by organization type, location, number of meals served or production method. Deciding on an outreach strategy and a marketing plan in light of the different needs of older adult cohorts appears to be a universal problem of ENPs.

Home Delivered Meals

Increasing and maintaining volunteers and performing needs assessment were the top-ranked items in the home delivered meals section (Table 3). The difficult challenge of deciding who deserves priority as a potential recipient of meals when resources are limited is indicated by the emphasis on *needs assessment* as the second ranked item. There were differences by funding source (Table 4e) for *increasing and maintaining volunteers* with privately-funded respondents giving that item a higher ranking than did public or public/private. This is an indication that volunteers play important roles in privately-funded organizations. ANOVA identified no statistical differences by organization type, location, number of meals served or production method.

Table 2
Number of respondents to *Nutrition 2030 Grassroots Survey* by AoA Region^a

	n (%)
Region I. Connecticut (1), Maine (0), Massachusetts (9), New Hampshire (3), Rhode Island (1), Vermont (4)	18 (4%)
Region II. Delaware (2), District of Columbia (2), Maryland (3), New Jersey (10), New York (32), Pennsylvania (11), Puerto Rico (0), Virgin Islands (0), Virginia (1), West Virginia (7)	68 (14%)
Region IV. Alabama (3), Florida (14), Georgia (5), Kentucky (0), Mississippi (0), North Carolina (6), South Carolina (4), Tennessee (8)	40 (8%)
Region V. Illinois (12), Indiana (15), Michigan (6), Minnesota (7), Ohio (4), Wisconsin (57)	101 (21%)
Region VI. Arkansas (3), Louisiana (4), New Mexico (1), Oklahoma (5), Texas (17)	30 (6%)
Region VII. Iowa (5), Kansas (8), Missouri (5), Nebraska (10)	28 (6%)
Region VIII. Colorado (20), Montana (4), North Dakota (2), South Dakota (5), Utah (0), Wyoming (6)	37 (8%)
Region IX. America Samoa (0), C N Mariana Islands (0), TTPI (0), Arizona (4), California (70), Guam (0), Hawaii (1), Nevada (2)	77 (16%)
Region X. Alaska (6), Idaho (28), Oregon (7), Washington (6)	47 (10%)
Missing data	32 (7%)
TOTAL	478 (100%)

^a Note: AoA Region III no longer exists.

Table 3**Nutrition 2030 Grassroots Survey categories ranked in order of importance by section**

	n	mean \pm sd
A. FOOD AND NUTRITION SERVICES		
Nutrition services		
1. Providing nutrition assessments	424	3.7 \pm 1.3
2. Providing nutrition education	440	3.4 \pm 1.4
3. Providing nutrition counseling	428	3.1 \pm 1.1
4. Providing linkages to other services	428	2.8 \pm 1.6
5. Providing nutrition care management	414	2.6 \pm 1.4
Congregate meals		
1. Providing outreach	408	4.8 \pm 1.7
2. Improving marketing	402	4.7 \pm 1.9
3. Providing transportation	405	4.6 \pm 1.8
4. Providing activities at congregate site	411	4.4 \pm 1.8
5. Providing linkages to other services	406	4.3 \pm 1.6
6. Increasing & maintaining volunteers	407	3.6 \pm 1.8
7. Decreasing congregate services	361	2.0 \pm 2.0
Home-delivered meals		
1. Increasing & maintaining volunteers	436	6.4 \pm 2.4
2. Performing needs assessments	419	6.3 \pm 2.2
3. Linking w/ case management services	416	5.7 \pm 2.2
4. Developing service delivery alternative	423	5.7 \pm 2.3
5. Determining who gets a meal	403	5.6 \pm 2.3
6. Providing transportation for meal delivery	420	5.6 \pm 2.5
7. Providing outreach	421	5.5 \pm 2.5
8. Allowing / using vouchers for meals	388	3.6 \pm 2.4
9. Establishing waiting list	391	2.9 \pm 2.3
B. FOOD SERVICE		
Food production		
1. Maintaining safe time & temperatures for food	423	6.2 \pm 1.3
2. Complying with HAACP requirements	398	5.1 \pm 1.9
3. Procuring food	400	4.9 \pm 1.5
4. Receiving food	391	4.3 \pm 1.4
5. Storing food	395	4.3 \pm 1.4
6. Planning / contracting for construction or renovation	377	2.9 \pm 2.1
7. Recycling materials	370	2.2 \pm 1.6
Other topics		
1. Ensuring nutrient content of meals	430	11.6 \pm 2.6
2. Complying with DRI & RDA requirements	424	11.4 \pm 2.9
3. Planning menus	417	10.7 \pm 2.9
4. Offering choice of food options	408	10.0 \pm 3.3
5. Decreasing the cost of a meal	408	9.0 \pm 4.0
6. Improving knowledge of nutrient needs of older adults	423	8.8 \pm 3.7
7. Offering therapeutic diets	400	8.6 \pm 3.4
8. Improving knowledge of nutrition & illness	417	8.1 \pm 3.8
9. Offering culturally / religiously appropriate meals	404	7.5 \pm 3.9
10. Offering texture modified meals	386	7.1 \pm 3.2
11. Improving knowledge drug-nutrient interaction	408	7.0 \pm 3.9
12. Developing & monitoring catering contracts	384	6.8 \pm 4.2
13. Providing medical foods	391	6.5 \pm 3.5
14. Providing vitamins, minerals, botanicals, herbals	373	4.4 \pm 3.7

Table 3, continued

C. MANAGEMENT	n	mean ± sd
Administration		
1. Recruiting & retaining quality personnel	404	13.5 ± 3.5
2. Training staff & volunteers	398	13.3 ± 3.4
3. Implementing quality service	403	12.6 ± 4.2
4. Increasing staff motivation	404	12.0 ± 3.9
5. Managing staff & service performance	395	11.9 ± 3.6
6. Increasing staff & volunteer cohesion	391	11.0 ± 4.1
7. Developing human resources	383	10.8 ± 4.4
8. Complying with funder reporting requirements	394	10.4 ± 4.8
9. Improving reporting	386	10.1 ± 4.9
10. Dealing with accounting & fiscal concerns	384	10.0 ± 4.5
11. Complying with NAPIS requirements	382	10.0 ± 5.4
12. Writing grants & proposals	387	9.4 ± 5.0
13. Working with AAA	188	9.2 ± 5.6
14. Managing risks	374	8.6 ± 4.2
15. Dealing with liability & insurance	371	7.4 ± 4.4
16. Ensuring disability access	375	6.9 ± 4.7
17. Disaster readiness plans	366	6.4 ± 4.8
Funding		
1. Increasing & maintaining government funding	446	6.8 ± 2.0
2. Increasing contributions	440	5.6 ± 2.0
3. Increasing / maintaining volunteers	446	4.8 ± 2.2
4. Raising private funds	426	4.6 ± 2.0
5. Increasing participant contributions	421	4.6 ± 2.4
6. Obtaining foundation grants	434	4.5 ± 2.0
7. Consolidating funding streams	411	3.7 ± 2.4
8. Replacing capital equipment	410	3.6 ± 2.0
Technology		
1. Increasing knowledge of new technology	401	6.1 ± 2.0
2. Using menu planning software	390	5.3 ± 2.1
3. Using new meal delivery technology	392	5.1 ± 2.1
4. Using data management software	392	5.1 ± 2.2
5. Using food preparation technology	394	4.7 ± 2.4
6. Using meal packaging technology	374	4.6 ± 2.0
7. Accessing the web	378	3.9 ± 2.7
8. Using volunteer management software	371	3.7 ± 2.2
Outreach: home & community integration		
1. Targeting nutrition services	419	3.7 ± 1.5
2. Providing services using Medicaid waivers	409	3.4 ± 1.3
3. Prioritizing home delivered & congregate services	398	3.2 ± 1.6
4. Providing service using third party reimbursement	409	3.1 ± 1.2
5. Providing service using managed care organizations (MCOs)	394	2.5 ± 1.3
Outcome development		
1. Developing indicators for program outcomes	408	5.3 ± 1.7
2. Determining program outcomes	405	5.1 ± 1.6
3. Developing indicators for individual outcomes	393	4.6 ± 1.8
4. Determining Individual outcomes	390	4.4 ± 1.8
5. Documenting program outcomes	400	3.8 ± 1.8
6. Documenting individual outcomes	389	3.4 ± 1.9
7. Using outcome measures	395	3.2 ± 2.3

Table 4a
ANOVA for Nutrition 2030 Grassroots Survey ranking of items^a by organization type

Item	ENP		AAA		SUA		<i>F</i>	<i>p value*</i>
Ranking	< ----- Mean \pm standard deviation ----- >							
FOOD SERVICE	n		n		n			
Other topics – 14 items in this section								
3. Planning menus	265	4.1 \pm 2.8	96	4.5 \pm 2.9	10	7.4 \pm 4.0	4.3	0.005
6. Improving knowledge of nutrient needs	267	6.5 \pm 3.8	98	6.0 \pm 3.5	11	5.1 \pm 3.6	3.9	0.009

MANAGEMENT

Outreach: home & community integration –

Table 4b
ANOVA for Nutrition 2030 Grassroots Survey ranking of items^a by location

Items	urban		suburban		rural		<i>F</i>	<i>p value</i> *
Ranking	< ----- Mean \pm standard deviation ----- >							
FOOD SERVICE	n		n		n			
Food production – 7 items in this section								
7. Recycling materials	98	5.6 \pm 1.8	49	5.7 \pm 1.8	160	6.1 \pm 1.3	2.7	0.044
Other topics – 14 items in this section								
11. Improving knowledge of drug-nutrient interactions	102	7.8 \pm 3.9	52	9.0 \pm 3.8	184	7.7 \pm 4.0	3.1	0.025
14. Providing vitamins, minerals, herbals	98	10.0 \pm 4.0	51	11.2 \pm 3.6	163	10.4 \pm 3.6	4.1	0.007
MANAGEMENT								
Administration – 17 items in this section								
11. Complying w/ NAPIS requirements	91	7.8 \pm 5.5	49	9.6 \pm 5.9	176	7.2 \pm 5.0	4.1	0.007
Funding – 8 items in this section								
5. Increasing participant contributions	115	3.2 \pm 2.0	61	3.0 \pm 1.8	187	3.7 \pm 1.9	3.3	0.020
Technology – 8 items in this section								
2. Using menu planning software	100	4.1 \pm 2.1	50	3.9 \pm 1.9	170	3.5 \pm 2.1	2.6	0.050
5. Using food preparation technology	96	5.1 \pm 2.2	50	4.8 \pm 2.2	161	5.6 \pm 2.1	3.5	0.016
8. Using volunteer management software	104	4.1 \pm 2.1	50	3.3 \pm 1.4	171	3.9 \pm 1.3	6.3	0.000
Outreach: home & community integration – 5 items in this section								
1. Targeting nutrition services	103	2.6 \pm 1.6	54	2.8 \pm 1.5	183	2.0 \pm 1.2	6.3	0.000
4. Providing service using third party reimbursement	102	2.7 \pm 1.4	53	2.9 \pm 1.1	181	3.2 \pm 1.3	2.8	0.041
5. Providing meals, nutr serv thru MCOs	100	3.2 \pm 1.4	52	3.3 \pm 1.4	171	3.9 \pm 1.3	6.6	0.000

^a Lower means = higher rankings, i.e., 1 = highest rank, 2 = second highest rank, etc., in Table 4 only.

* $p < 0.05$

Table 4c
ANOVA for Nutrition 2030 Grassroots Survey ranking of items^a by number of meals served

Items	0-99		100-199		200-499		500+		F	p value*
Ranking	< ----- Mean ± standard deviation ----- >									
FOOD SERVICE	n		n		n		n			
Other topics -- 14 items in this section										
2. Complying with DRIs & RDAs	71	3.0±2.6	59	3.4±2.5	92	4.2±3.4	189	3.7±2.8	2.4	0.070
3. Planning menus	71	3.5±2.3	58	4.3±3.0	90	4.0±2.8	189	4.7±3.0	3.1	0.027
4. Offering choice of food options	70	5.1±3.3	60	6.0±3.6	88	4.7±3.1	177	4.7±3.2	2.6	0.050

^a Lower means = higher rankings, i.e., 1 = highest rank, 2 = second highest rank, etc., in Table 4 only.

* p<0.05

Table 4d
ANOVA for Nutrition 2030 Grassroots Survey ranking of items^a by production method

Items		On-site		Central Kitchen		Vendor		F	p value*
Ranking		< ----- Mean \pm standard deviation ----- >							
FOOD SERVICE		n		n		n			
Food production – 7 items in this section									
5.	Storing food	147	3.6 \pm 1.4	143	3.8 \pm 1.5	94	4.1 \pm 1.2	2.7	0.043
6.	Plan/contract for construction & renovation	139	5.5 \pm 1.9	135	4.8 \pm 2.3	92	5.1 \pm 2.0	4.5	0.004
7.	Recycling materials	140	6.0 \pm 1.5	128	5.7 \pm 1.7	92	6.0 \pm 1.4	2.6	0.050
Other topics – 14 items in this section									
9.	Offering culturally/religiously appro. meals	142	7.8 \pm 3.6	141	7.4 \pm 3.9	107	7.7 \pm 4.0	4.6	0.003
12.	Developing/monitoring catering contracts	134	7.8 \pm 3.6	134	7.4 \pm 2.5	109	5.7 \pm 2.4	9.2	0.000
MANAGEMENT									
Administration – 17 items in this section									
16.	Ensuring disability access	131	10.9 \pm 4.8	132	11.1 \pm 4.9	103	11.8 \pm 4.0	8.0	0.000
Funding – 8 items in this section									
7.	Consolidating funding streams	150	4.8 \pm 1.4	141	4.8 \pm 1.4	106	4.8 \pm 1.4	3.7	0.021
5.	Increasing participant contributions	148	4.8 \pm 2.3	145	4.4 \pm 2.4	114	4.1 \pm 2.3	3.7	0.011
Technology – 8 items in this section									
4.	Using data management software	138	4.4 \pm 2.1	142	3.8 \pm 2.3	106	3.6 \pm 2.2	2.9	0.035
5.	Using food preparation technology	144	3.7 \pm 2.0	142	4.2 \pm 2.4	100	5.4 \pm 2.4	13.1	0.000
Outreach: home & community integration – 14 items in this section									
5.	Providing meals, nutr services thru MCOs	133	3.8 \pm 1.2	142	3.3 \pm 1.4	111	3.8 \pm 1.4	5.4	0.001
Outcome development – 7 items in this section									
1.	Developing indicators for progms outcomes	140	3.1 \pm 1.8	143	2.7 \pm 1.7	116	2.4 \pm 1.4	3.9	0.009
7.	Using outcome measures	138	5.3 \pm 2.1	136	4.5 \pm 2.3	111	4.7 \pm 2.4	3.0	0.031

^a Lower means = higher rankings, i.e., 1 = highest rank, 2 = second highest rank, etc., in Table 4 only.

* p<0.05

Table 4e
ANOVA for Nutrition 2030 Grassroots Survey ranking of items^a by source of funding

Items	Public only		Private only		Both		F	p value*
Ranking	< ----- Mean + standard deviation ----- >							
FOOD AND NUTRITION SERVICES	n		n		n			
Home delivered meals - 9 items in this section								
1. Increasing & maintaining volunteers	84	4.5 _± 2.5	15	1.6 _± 1.2	291	3.4 _± 2.4	8.0	0.000
FOOD SERVICE								
Food production – 7 items in this section								
7. Recycling materials	75	5.8 _± 1.6	13	4.6 _± 2.1	244	6.0 _± 1.6	3.4	0.017
Other topics – 14 items in this section								
13. Providing medical foods	80	11.0 _± 3.2	11	11.8 _± 3.8	248	10.7 _± 3.7	2.8	0.039
14. Providing vitamins, minerals, herbals	81	9.8 _± 3.4	12	7.0 _± 3.3	260	8.5 _± 3.4	4.4	0.005
MANAGEMENT								
Administration – 17 items in this section								
14. Managing risk	82	6.6 _± 3.1	24	5.2 _± 4.0	264	6.2 _± 3.7	4.5	0.004
Funding – 8 items in this section								
1. Increasing & maintaining gov't funding	92	1.9 _± 1.8	12	5.3 _± 2.9	298	2.6 _± 1.9	11.0	0.000
2. Increasing contributions	91	4.1 _± 1.9	15	2.0 _± 1.6	290	3.2 _± 1.8	8.1	0.000
4. Raising private funds	89	4.9 _± 1.8	16	2.4 _± 1.3	279	4.3 _± 2.0	7.8	0.000
5. Increasing participant contributions	89	5.3 _± 2.3	10	3.7 _± 1.9	279	4.3 _± 2.4	7.8	0.000
7. Consolidating funding stream	93	4.5 _± 2.5	10	6.1 _± 1.8	267	5.5 _± 2.4	4.1	0.007
Technology – 8 items in this section								
4. Using data management software	74	4.6 _± 2.2	13	3.3 _± 2.0	271	3.8 _± 2.2	3.9	0.010
8. Using volunteer management software	71	5.9 _± 1.9	12	3.3 _± 1.8	256	5.2 _± 2.2	6.7	0.000
Outreach: home & community integration – 14 items in this section								
5. Providing meals, nutr service thru MCOs	78	3.9 _± 1.2	11	2.7 _± 0.9	269	3.5 _± 1.4	5.0	0.002
Outcome development – 7 items in this section								
7. Using outcome measures	76	5.4 _± 2.1	13	2.9 _± 2.1	267	4.7 _± 2.3	5.3	0.001

^a Lower means = higher rankings, i.e., 1 = highest rank, 2 = second highest rank, etc., in Table 4 only.

* p<0.05

B. FOOD SERVICE Category

Food Production

Maintaining safe time/temperature and compliance with Hazard Analysis Critical Control Point (HACCP) standards were the top-ranked items in the food production section (Table 3). This reflects the recent emphasis on food safety by the President's National Initiative on Food Safety. ANOVA identified no statistical differences by organization type, location, number of meals served or production method.

Other Topics

Ensuring nutrient content of meals and compliance with Dietary Reference Intakes (DRI) & Recommended Dietary Allowances (RDA) were the top concerns in the other topics section (Table 3). It is interesting to note that the five highest ranked items in this section dealt with menu planning. There were ANOVA differences by number of meals served (Table 4c) for *compliance with DRI & RDA*, with programs serving fewer meals giving this a higher ranking. ANOVA identified no differences by organization type, location, production method or source of funding.

C. MANAGEMENT Category

ANOVA identified some differences in several management sections among lower ranked (less important) items. Differences by location (Table 4b), production methods (Table 4d) and funding (Table 4e) could be attributed to the smaller numbers of respondents in each of these lower ranked items.

Administration

Recruiting and retaining quality personnel and training staff and volunteers were the highest ranked items in the management section (Table 3). Both deal with one of the more important functions of management, i.e., staffing. There was general agreement on the importance of staffing across organization type, location, number of meals served, production method and funding source.

Funding

Increasing and maintaining government funding was the top concern followed by *increasing contributions* in the funding section (Table 3). The high ranking of these two items documents the preoccupation with the financial viability of the programs. ANOVA differences by funding source (Table 4e) showed, not surprisingly, that publicly-funded programs were more concerned with public funds and privately-funded programs were more concerned with *increasing contributions*. ANOVA showed significant difference by rural or urban location for *increasing contributions* with urban showing a higher concern. There were no significant differences by organization type, location, number of meals served or production method.

Technology

Increasing knowledge of new technology and using menu-planning software were the highest ranked items in the technology section (Table 3). ANOVA showed differences by location (Table 4b), number of meals served (Table 4c), production methods (Table 4d) and funding (Table 4e) for a number of lower ranked items,

including those using specific technologies such as software, food preparation or packaging technology. There were no differences by organization type. Analyses by chi-square (Table 5) indicated that large rural ENPs ranked technology higher.

Outreach and home & community-based service integration

Targeting nutrition services and *provision of services using Medicaid waiver* were the top items in the outreach and home & community based service integration section (Table 3). ANOVA indicated differences by location (Table 4b) for *targeting nutrition services* with rural showing higher concern. There were differences by organization type (Table 4a) for *provision of meals & nutrition services through Medicaid waivers* with SUAs ranking that item higher. There were no significant differences by number of meals served, production method or funding.

Outcome development

Developing indicators for program outcomes was the highest ranked item followed by *determining program outcomes* in the outcome development section (Table 3). This topic is important because the federal Government Performance and Results Act (GPRA) mandates a focus on outcomes. ANOVA showed differences only by production method (Table 4d) with central kitchen production ranking *developing indicators for program outcomes* higher. There were no differences by organization type, location, number of meals served or funding source.

OPEN-ENDED QUESTIONS

The two open-ended questions at the end of the ***Nutrition 2030 Grassroots Survey*** (Table 6) allowed respondents to state their concerns in their own words. Answers were coded and grouped according to the ten sections in the survey. Funding was by far the “*most pressing problem today*,” with 65% of the comments focused on funding as their primary difficulty. A total of 59% of respondents anticipated that funding would still be their primary problem in the future. Table 6 lists other answers.

DISCUSSION

This ***Nutrition 2030 Grassroots Survey*** provided respondents with a large number of items to rank within the ten sections. A total of 87 items offered the opportunity for respondents to review the wide range of topics relevant to ENPs today. Conversely, the large number of items to be ranked may have diluted the number of responses on a particular topic. There were fewer responses for lower ranked items as many people completing the survey merely ranked their three highest concerns.

Other factors that may have influenced the responses were the different formats or page layouts required by the two main distribution channels, i.e., broadcast fax and online. The faxed survey presented the items to be ranked in two columns on each of two pages. Items in one section were split between two columns on one page. Some respondents considered those to be two different sections and, thus, gave more than one item a rank of #1. The online survey had sections that split between screens, so not all items to be ranked within a category may have been visible at one time. Many respondents submitted partially completed surveys. Omitted responses were removed before analysis. Consequently, the number of respondents varied by items.

Table 5

Three highest ranked items by rural and non-rural ENPs serving 500+ meals daily that differed from rankings by the total group of respondents to the *Nutrition 2030 Grassroots Survey*

Ranking (#) by all respondents	rural		non-rural		chi-square	
A. FOOD AND NUTRITION SERVICES	n = 62	%	n = 56	%	F	p value*
Congregate meals						
3. Providing transportation	36	64	16	41	5.0	0.025
6. Increasing & maintaining volunteers	14	25	21	54	8.2	0.004
Home-delivered meals						
6. Providing transportation for meal delivery	38	69	14	35	10.9	0.001
C. MANAGEMENT						
Funding						
1. Increasing & maintain government funding	55	95	35	75	8.8	0.003
Technology						
2. Using menu planning software	34	65	15	42	4.8	0.028
Outreach: home & community integration						
1. Targeting nutrition services	48	84	25	66	4.3	0.048
3. Prioritizing home delivered & congregate services	40	74	19	53	4.3	0.037
5. Providing meals, nutrition services using MCOs	19	37	21	58	4.1	0.044

* p<0.05

Table 6
Responses to two open-ended questions on *Nutrition 2030 Grassroots Survey* regarding “most pressing problem today” and “most pressing problem of the future”

	today (n = 468)	future (n = 495)
Funding and resources	305 (65%)	291 (59%)
• funding & transportation of people / food	86 (25%)	7 (4%)
• funding & volunteers	74 (24%)	30 (10%)
• funding & staffing	55 (18%)	11 (4%)
• funding & capital equipment / buildings	34 (11%)	11 (4%)
• funding & home bound / home delivered meals	27 (9%)	11 (4%)
• funding & waiting lists / prioritization of services	17 (6%)	5 (4%)
• funding & programs	15 (5%)	196 (67%)
• funding & changing needs of older adults	3 (1%)	24 (8%)
• total	100%	100%
Administration	48 (10%)	15 (3%)
Congregate nutrition services	24 (5%)	20 (4%)
Meal service, health and food	25 (5%)	15 (3%)
Home delivered meals	18 (4%)	26 (5%)
Technology	15 (3%)	13 (3%)
Outreach / home & community	13 (3%)	18 (4%)
Nutrition services	9 (2%)	9 (2%)
Food production	5 (1%)	4 (<1%)
Outcome development	3 (<1%)	0 (0%)

Survey respondents were largely from rural areas. Data analysis reveals concerns of a large complex system in search of some clear directions. There is concern for nutrition service problems such as nutritional assessments, needs assessments and nutrition education. Nine of the highest ranked items dealt broadly with federal regulation compliance issues. This depicts a system trying to do the right thing, but grappling with decreasing resources, limited staffing, diminishing numbers of volunteers, and increasing and shifting demands for services from congregate sites to homes. The desire for further knowledge in terms of technology and the use of specialized software is also evident.

CONCLUSIONS

The ***Nutrition 2030 Grassroots Survey*** provides a snapshot of the most important issues challenging ENPs and other stakeholders from the grassroots level up. Information from this survey was shared with white paper authors to help them more sensitively include and frame the issues of local providers and others in the aging network.

The survey results document the growing pains of the Elderly Nutrition Program. These programs are strapped to provide food and nutrition services to meet an increasing demand. They are concerned about how best to address the nutritional needs of older adults while providing an umbrella of supportive services. They seem to be struggling with turning people away or finding fair ways of prioritizing services. As funding for all governmental programs has come under tight scrutiny, documenting results and increasing efficiency are expectations in today's environment.

The responses show multiple concerns of the Elderly Nutrition Programs as they strive to provide high quality service to America's aging population. ENPs want to learn state-of-the-art nutrition information and assessment techniques to best serve the older adults that they care for daily. ENPs are concerned about food safety and want training in all areas of management. They want training in technology to make their programs more efficient. They are looking for practical, useful tools to measure outcomes resulting from their interventions. Peter S. Rummel, CEO, St Joe Company, Jacksonville, Florida, emphasizes the importance of outcomes in the business world: "*One thing that all successful organizations have in common is an uncompromising focus on results.*"

The challenge of the Elderly Nutrition Programs in preparation for Year 2030 is to establish consistent outcomes across a number of food and nutrition service areas. Those measurable outcomes could then be used to document better the value of Elderly Nutrition Programs and better position ENPs for increased funding from all levels, both public and private. The result would be more and better food and nutrition services in home and community settings for the increasingly diverse and burgeoning number of older Americans.

References

1. *Profile of Older Americans 1998*. US Administration on Aging and AARP, Washington, DC, 1998.
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