

# ANALYSIS OF THE SENIOR NUTRITION SYSTEM IN MAT-SU



MAT-SU HEALTH  
FOUNDATION

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- Alzheimer's Resource of Alaska, Care Coordination Resource of Alaska
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- Food Bank of Alaska
- Kids Cupboard
- Mat-Su Regional Medical Center
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- 5 Loaves 2 Fish Kitchen
- Hilltop Assembly of God
- MatSu Food Bank
- United Way of Mat-Su

Older adults and elders in Mat-Su are lucky to have you.

# Background and Purpose

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In September 2018, the Mat-Su Health Foundation (MSHF) received several requests for additional support from senior nutrition programs. **While the Foundation funded several of these requests, it was noted that there needed to be a deeper understanding of the circumstances that led to this increased demand and of the nutrition system for older adults overall. The MSHF 2016 Senior Environmental Scan noted the increasing older adult population in Mat-Su and the need for additional services but did not delve deeply into senior nutrition specifically.**

2019 has also been a time of leadership transition in local senior nutrition programs.

- The long-time leader of the Upper Su Senior Center is retiring.
- Mat-Su Senior Services welcomed a new leader in August.
- Frontline Mission had a new leader take over in the spring.
- Mid Valley Senior Center in Houston, Alaska is in the process of closing its 501(c)3 status and turning the Center over to Wasilla Area Seniors, Inc (WASI). WASI began serving congregate meals there in May 2019.



**These transitions provide an opportunity to review the entire senior nutrition system and identify opportunities for alignment and improvement.**

With these circumstances in mind, the goal of this study was to learn what programs and funding exist for senior nutrition in Mat-Su, how these programs work together, and what options exist for service coordination and alignment to enhance access to nutrition for older adults. This report focuses on services available to adults over the age of sixty, as that is the age at which individuals qualify for federal senior nutrition programs, and includes a review of traditionally identified senior meals such as congregate and home-delivered meals (Meals on Wheels), as well as a broader understanding of all the ways that older adults in the Mat-Su Borough can access nutritious food.



# Methodology

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In order to complete this report, several methodologies were used. Primary research was conducted through key informant interviews, focus groups, and surveys. During a week long visit to the Mat-Su Borough, consultants had an opportunity to visit directly with service providers to tour their facilities, learn more about their programs, and better understand the distances between service sites. Consultants visited the following programs and areas:

- Upper Su Senior Center (Talkeetna)
- Upper Su Food Pantry (Talkeetna)
- Mid-Valley Seniors Inc. (Houston)
- Wasilla Area Seniors Inc.
- Mat-Su Senior Services (Palmer)
- Frontline Mission (Wasilla)
- Chickaloon Native Village



In addition to the site visits, the consultants also held focus groups to understand the community's level of knowledge of available senior nutrition options, gaps in service, and how providers might work together to ensure seamless services for the region's older adults. The following focus groups were held:

- Mat-Su Food Coalition
- Congregate Meal Recipients
- Hospital Social Workers
- Ancillary Service Providers
- Direct Senior Nutrition Service Providers

Secondary research was conducted to identify the food landscape, demographic trends, funding sources, and best practice information. A full overview of the methodologies used can be found in Appendix B.

## The Older Adult Population in Mat-Su

### KEY FINDINGS:

- Mat-Su has the fastest growing older adult population in the state increasing by 64.6 percent between 2010 and 2017, compared to a 43.9 percent increase for the state of Alaska.
- By 2030, more than one in five Mat-Su residents, nearly 27,500 people, will be age 60 and older.
- By 2030, the number of residents over the age of 85 years will rapidly increase by 188 percent to 1,864. These residents are often the most vulnerable and often require more intense services.
- The number of Alaska Native People age 60 and older is also continuing to grow and is estimated to be 13.4 percent of the population by 2030 compared to 10.8 percent in 2017.
- The number of older adults in poverty continues to grow.
- According to Feeding America's the State of Senior Hunger in America in 2017, 7.7 percent of all individuals age 60 and older are food insecure. This translates to more than 1,260 older adults in Mat-Su who don't have consistent access to enough food for a healthy life.<sup>1</sup>
- According to the General Accounting Office (GAO), an estimated 27 percent of all people age 60 and older will likely need home-based care. This means 4,417 older adults in Mat-Su are estimated to currently need some level of home-based care. Based on future population estimates, this number is expected to grow to 7,423 by 2030. Many of these residents may need home-delivered meals, some of which may be provided by Medicaid personal care attendants.
- The GAO also estimates that 23.5 percent of low-income (defined as 185 percent of poverty) older adults are food insecure and need home-delivered or congregate meals. Using available census data for older adults below 150 percent of poverty, a conservative 584 low income Mat-Su residents are in need of home-delivered or congregate meals. (Note: This does not include low income older adults between 150 percent and 185 percent of poverty or individuals above 185 percent of poverty who are homebound and in need of a home-delivered meal, so the number is even higher.)
- Assuming the percentage of low-income older adults remains stable at 15.3%, an estimated 988 low income older adults (below 150 percent of the poverty level) will need home-delivered or congregate meals by 2030, a staggering 69 percent increase in need.

The Mat-Su older adult population steadily increased from 2010 to 2017.<sup>2</sup> The rest of the state has seen similar growth,<sup>3</sup> but at a rate much lower than Mat-Su. **Between 2010 and 2017, the number of Mat-Su Borough residents age 60 and older increased by 64.6 percent compared to a growth rate of 43.9 percent for the state of Alaska.**<sup>4</sup> Growth projections for the next decade indicate the older adult population in Mat-Su will continue to increase and that by 2030, 27,493 (which is more than 20 percent of the Mat-Su population) will be age 60 and older.<sup>5</sup>

From 2015 to 2030, the number of individuals 85 and older, who are often the most vulnerable and most in need of services, is also expected to increase by 188 percent.<sup>6</sup>

## Current Older Adult Population

The most recent population data from the 2013-2017 American Community Survey (ACS) 5-Year Estimate shows the Mat-Su Borough with a population of 101,135, with 16,258 individuals, or 16.2%, age 60 and older.

Table 1: 60 and Older Population Comparison

% Mat-Su 60 and older	Mat-Su Borough Residents 60 and older	% Alaska 60 and older	Alaska Residents 60 and older	% US 60 and older	US Residents 60 and older
16.2%	16,358	15.8%	117,047	20.9%	66,956,449

SOURCE: 2017 ACS 5-Year Estimate, Demographic Profile for Mat-Su, Alaska, and the United States.

As Table 2 shows, a further breakdown of the population age 60 and older demonstrates that age range distributions are similar to distributions throughout Alaska. Although compared to the US, Mat-Su has a lower percentage of older adults overall, the percentage in the 60-64-year range is slightly higher than the nation indicating an emerging older adult population.

Table 2: Estimated Number and Percentage of Older Adults by Age Range

Age	Estimated Number of Mat-Su Older Adults (Percent)	Estimated Number of Alaska Older Adults (Percent)	Estimated Number of U.S. Older Adults (Percent)
60-64	6,140 (6.1%)	42,707 (5.8%)	19,224,060 (6.0%)
65-74	7,064 (7.0%)	50,640 (6.9%)	27,503,389 (8.6%)
75-84	2,525 (2.5%)	17,779 (2.4%)	14,087,477 (4.4%)
85 and over	629 (0.6%)	5,921 (0.8%)	6,141,523 (1.9%)

SOURCE: 2017 ACS 5-Year Estimate, Demographic Profile for Mat-Su, Alaska, and the United States.

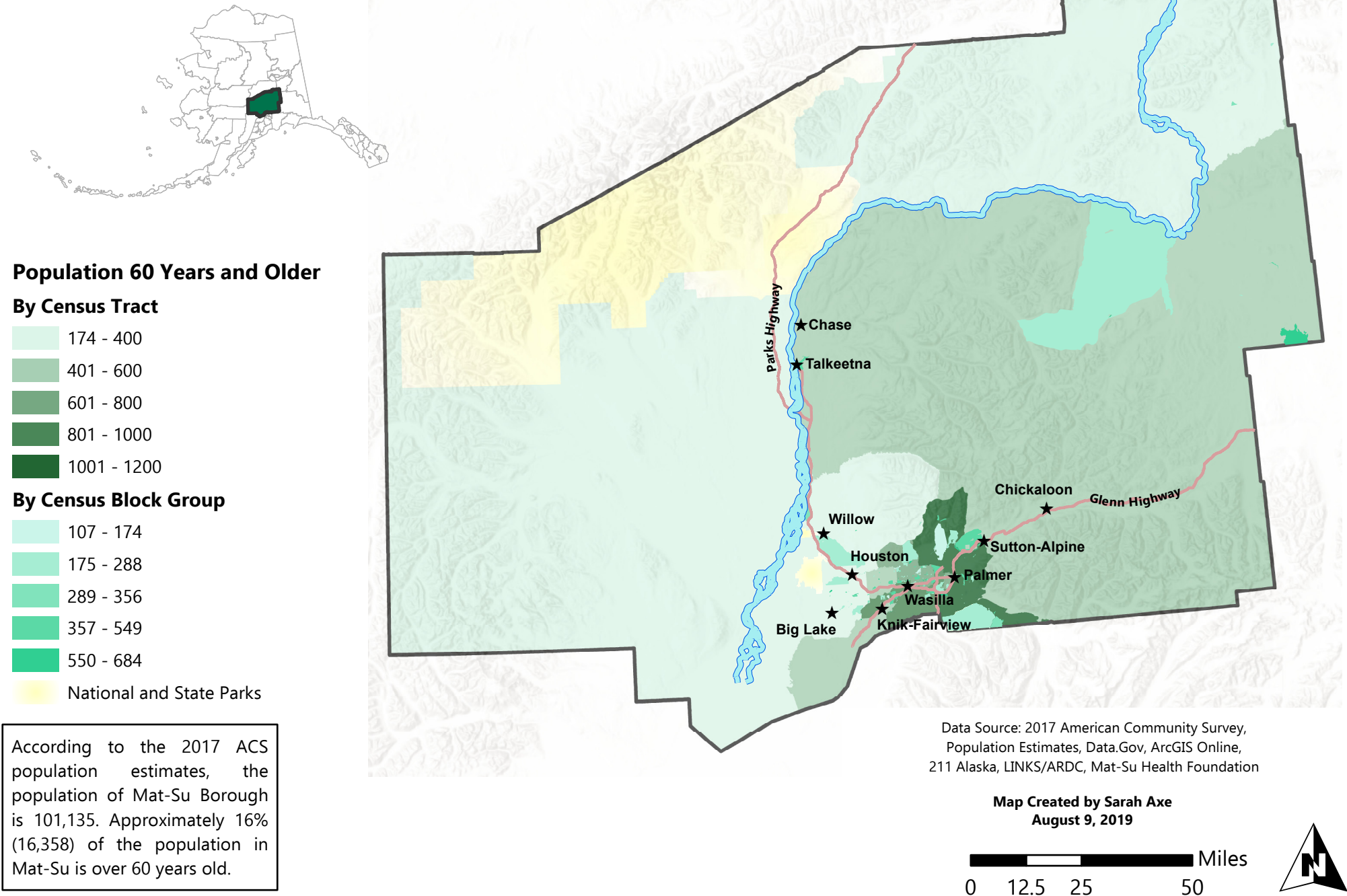
Older adults live throughout Mat-Su but as with the overall population, they are clustered in the Wasilla and Palmer areas.



# Mat-Su Borough

## Population 60 Years and Older

Figure 1: Distribution of Mat-Su Population 60 Years and Older



## Estimated Future Population

According to population projections from the State of Alaska Department of Labor and Workforce Development, the number of Mat-Su residents age 60 and older is expected to continue increasing overall through 2045. Table 3 shows that the number of Alaskan residents age 60 and older, and percent of residents, is projected to follow similar patterns to Mat-Su.

Table 3: Projected Population Age 60 and Older for Mat-Su and Alaska

Date	Mat-Su Population 60 and Older	Percent of Mat-Su Population 60 and Older	Alaska Population 60 and Older	Percent of Alaska Population 60 and Older
2020 Projected	21,003	19.1%	145,264	19.5%
2025 Projected	24,975	20.4%	164,639	21.4%
2030 Projected	27,493	20.5%	171,122	21.6%
2035 Projected	29,235	20.0%	171,143	21.2%
2040 Projected	30,965	19.7%	170,680	20.5%
2045 Projected	32,220	19.8%	175,972	21.0%

SOURCE: State of Alaska Department of Labor and Workforce Development, Alaska Population Projections 2017-2045, for Alaska, Mat-Su Borough/Census Area, and Alaska Native Populations.

Native Americans or Alaska Native Peoples constitute the second largest<sup>7</sup> and growing<sup>8</sup> race/ethnicity group in Mat-Su and make up approximately 11.1 percent of Mat-Su residents,<sup>9</sup> which is an increase from 9.1 percent of residents in 2015.<sup>10</sup> Data indicates that the number and percentage of residents age 60 and older who identify as Alaska Native Peoples will increase through 2045.<sup>11</sup> (Projection data from the State's Department of Labor and Workforce Development for Alaska Native Peoples is only available at the state level and not at the borough level. Data at the borough level is only available for 2017 and earlier via the American Community Survey.) However, based on state data, **Mat-Su should also prepare for an increased number of American Indian or Alaska Native Elders.**

Table 4: Estimated Number and Percentage of Alaska Native Elders

Date	Alaska Native Elders (Alone or in Combination) 60 and Older	Percentage of Alaska Native Elders 60 and Older
2017 Estimated	17,918	10.8%
2020 Projected	20,346	11.8%
2025 Projected	23,852	13.0%
2030 Projected	25,558	13.4%
2035 Projected	26,251	13.4%
2040 Projected	27,119	13.4%
2045 Projected	29,077	13.9%

SOURCE: State of Alaska Department of Labor and Workforce Development, Alaska Population Projections 2017-2045, Alaska Native Population

## Older Adults Living in Poverty

Between 2013 and 2017, the number and percentage of Mat-Su older adults in poverty grew by 68.9 percent and in the last three years was higher than the percentage of Alaska older adults in poverty.<sup>12</sup> For purposes of this comparison, poverty is defined as below 100 percent of the Poverty Level.

Table 5: Residents 60 and Older below 100% Poverty

Year	Percentage of Mat-Su Borough Residents 60 and older in Poverty	Estimated Number of Mat-Su Borough Residents 60 and older in Poverty	Percentage of Alaska Residents 60 and older in Poverty	Estimated Number of Alaska Residents 60 and older in Poverty	Percentage of United States Residents 60 and older in Poverty	Estimated Number of United States Residents 60 and older in Poverty
2013	5.3%	663	5.7%	5,415	9.5%	5,500,160
2014	5.4%	728	5.9%	5,933	9.6%	5,732,344
2015	5.9%	834	5.8%	6,097	9.7%	5,974,114
2016	6.2%	943	5.4%	5,940	9.7%	6,159,270
2017	6.9%	1,120	6.0%	6,936	9.7%	6,353,107

SOURCE: 2013-2017 ACS through 2009-2013 ACS 5-Year Estimate, Population 60 years and Over in the United States, the State of Alaska, and the Matanuska-Susitna Borough

As Table 6 shows, when considering low-income older adults at 150 percent of poverty, the population more than doubles.

Table 6: Low-Income Mat-Su Older Adults, 150% of Poverty

Year	Percentage of Low-Income Mat-Su Borough Residents 60 and Older	Estimated Number of Low-Income Mat-Su Borough Residents 60 and Older
2013	13.5%	1,689
2014	14.1%	1,901
2015	14.0%	1,980
2016	14.3%	2,175
2017	15.3%	2,484

SOURCE: 2013-2017 ACS through 2009-2013 ACS 5-Year Estimate, Population 60 years and Over in the Matanuska-Susitna Borough

As Mat-Su looks forward to identifying and serving the need for senior nutrition, it is important to understand the national trends that will also likely affect Mat-Su. According to the U.S. Government Accountability Office (GAO) 2015 analysis, Older Americans Act: Updated Information on Unmet Need for Services, more low income adults are food insecure than in 2008 (about 19 percent in 2008 compared to 24 percent in 2013). However, only about nine percent actually receive Title III home-delivered or congregate meals.<sup>13</sup> Some older adults may also receive prepared meals from a Medicaid personal care attendant, but even those meals are unlikely to fully meet the need for all food insecure older adults.

# The Landscape of Senior Nutrition Services

## Key Findings:

- The current service capacity in the region will not be enough to address the growing population of Mat-Su residents.
- Mat-Su has a wide variety of senior nutrition program options that allows older adults with varying mobility to access nutritious food.
- The senior campus model which incorporates senior housing, congregate meal programs, and home-delivered meals and transportation services offers a unique opportunity to fully serve senior nutritional needs in the region.
- A coordinated approach to addressing systemic issues related to senior nutrition is necessary for full region coverage, efficient service coordination, and garnering additional volunteers and financial support.
- The key barriers to fully serving older adults are lack of transportation, lack of financial resources, lack of volunteers, and an often fiercely independent older adult population that may not be willing to access services even when they may need them.
- Current funding restrictions make it challenging for nutrition providers to offer a full range of meal choice, including the choice of meals for Alaska Native Elders or therapeutic meals.
- There is opportunity for senior nutrition providers to learn from the strengths of the Alaska Native service providers, especially the intergenerational approach, to better serve the entire older adult population.
- Individuals and providers are often creating their own resource guides rather than using a common guide resulting in individuals operating from a different understanding of available services and service changes.
- Lack of a centralized data repository, a common intake form and an evaluation form make data collection challenging. The hope is that this can be addressed with Connect Mat-Su.

## Overall Food Access Landscape for Older Adults

When considering the ability of older adults to access nutrition services in Mat-Su, two key issues exist – whether they can cook for themselves and whether they have access to transportation. The options for older adults to access food in the Mat-Su fall into a combination of these categories:

Table 7: Categories of Ability to Access Senior Nutrition Services

Can Cook, Have Transportation	Can Cook, NO Transportation
Grocery/convenience stores Food Banks/Pantries Food Boxes Congregate Meal Programs	Delivered Food Boxes*
CANNOT Cook, Have Transportation	CANNOT Cook, NO Transportation
Congregate Meal Programs	Home-Delivered Meal Programs

\*Delivery of food boxes is not done by all organizations and may not be accessible to all older adult Mat-Su residents.

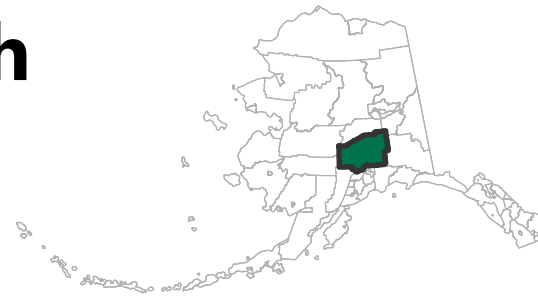
In Mat-Su, all of the options listed above are available, however, there are limitations in service areas, food choice, open hours, and transportation, all of which have been identified as major barriers to access.

Per Figure 3, as might be expected, most of the food options are located in the Wasilla-Palmer area.

# Mat-Su Borough

## Food Landscape

Figure 2: Mat-Su Borough Food Landscape Map



- Home-Delivered Meal Provider
- Congregate Meal Site
- ▲ Food Pantry
- Food Retail Outlet
- △ Senior Housing Site
- National and State Parks

### Population 60 Years and Older

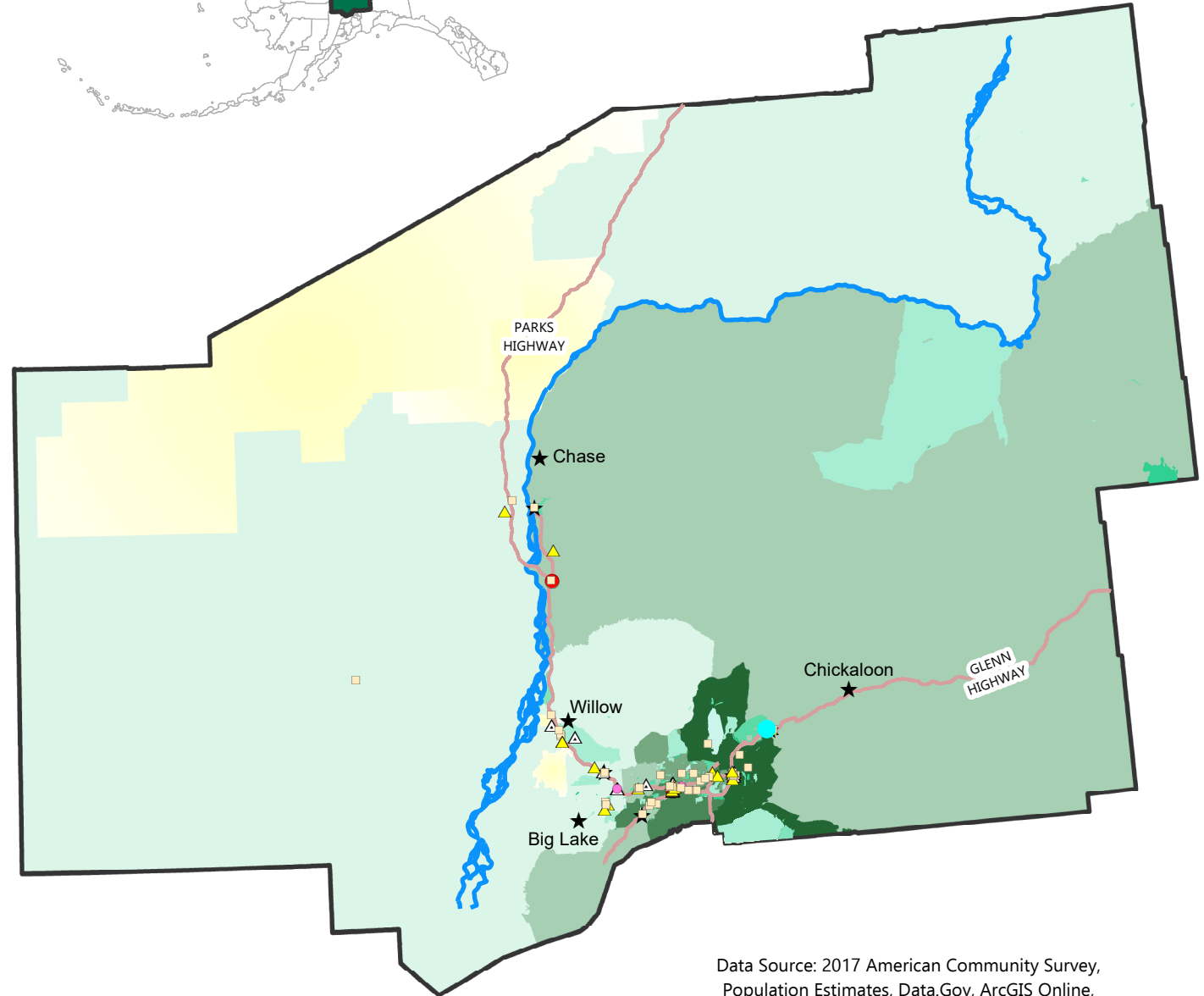
#### By Census Tract

- 174 - 400
- 401 - 600
- 601 - 800
- 801 - 1000
- 1001 - 1200

#### By Census Block Group

- 107 - 174
- 175 - 288
- 289 - 356
- 357 - 549
- 550 - 684

According to the 2017 ACS population estimates, the population of Mat-Su Borough is 101,135. Approximately 16% (16,358) of the population in Mat-Su is over 60 years old.



Data Source: 2017 American Community Survey, Population Estimates, Data.Gov, ArcGIS Online, 211 Alaska, LINKS/ARDC, Mat-Su Health Foundation

Map Created by Sarah Axe  
August 9, 2019

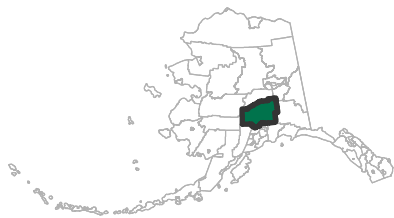
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# Mat-Su Borough

## Food Landscape



### Palmer-Wasilla Area

- Home-Delivered Meal Provider
- Congregate Meal Site
- ▲ Food Pantry
- Food Retail Outlet
- ▲ Senior Housing Site

#### By Census Block Group

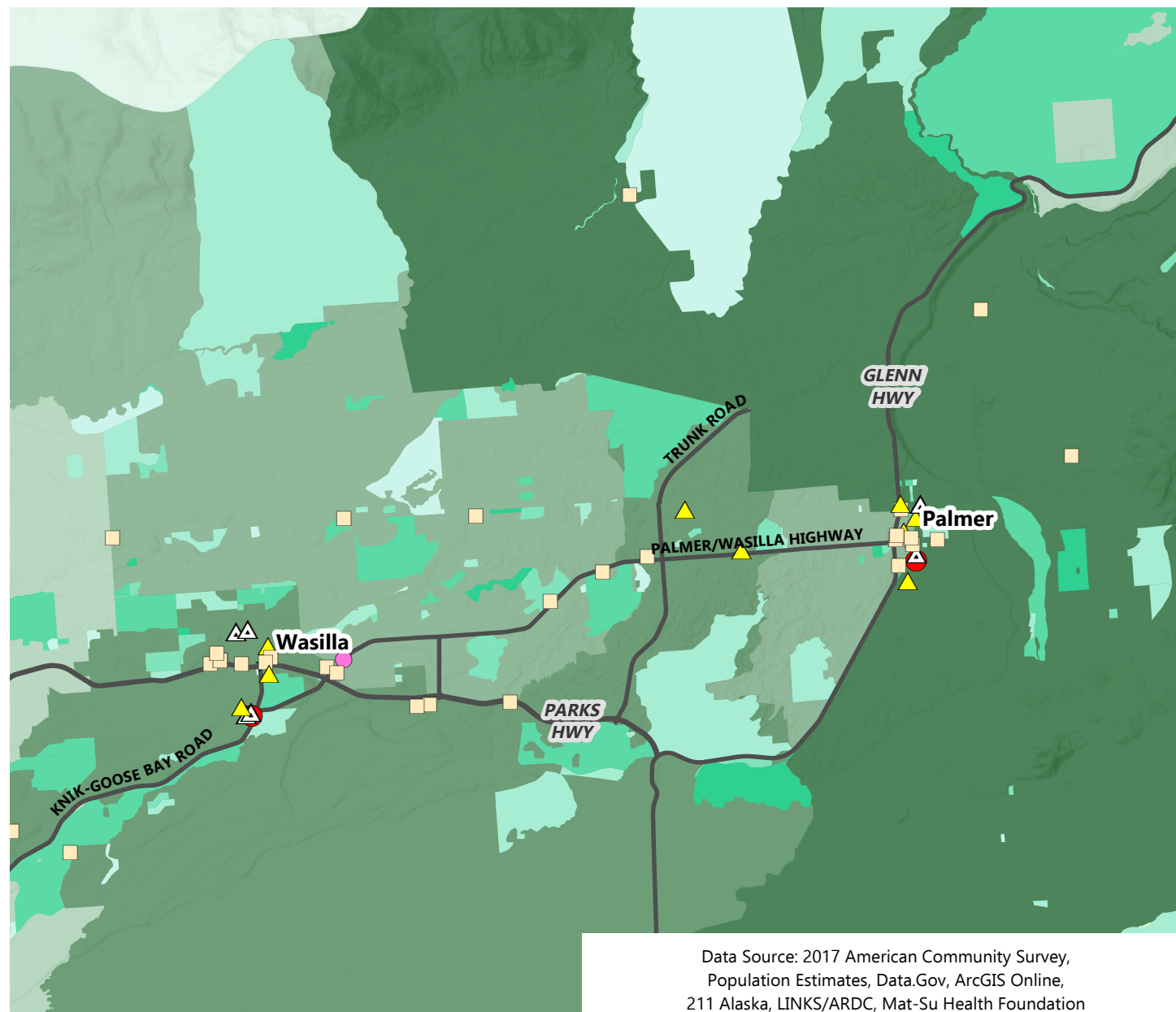
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■ National and State Parks

#### Population 60 Years and Older

##### By Census Tract

- 174 - 400
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Data Source: 2017 American Community Survey, Population Estimates, Data.Gov, ArcGIS Online, 211 Alaska, LINKS/ARDC, Mat-Su Health Foundation

According to the 2017 ACS population estimates, the population of Mat-Su Borough is 101,135. Approximately 16% (16,358) of the population in Mat-Su is over 60 years old.

Map Created by Sarah Axe  
August 9, 2019

0 2.5 5 Miles



## Senior Housing Model

One of the unique aspects of senior services in Mat-Su is the clustering of services around senior housing.

Table 8: Senior Housing Complexes

Organization	Number of Units of Senior Housing
Chickaloon Native Village	Operates housing, not senior focused housing but older adults are eligible
Mat-Su Senior Services (MSSS)	55 units
Mid-Valley Senior Center	18 units*
Upper Su Senior Center	6 units
Wasilla Area Seniors, Inc (WASI)	192 units**

\*Of these, eight units are managed by WASI and ten are managed by Valley Residential Services.

\*\*Of these, two are low-income, senior housing complexes that border the WASI campus, Chinook Villa and Williwa Manor. WASI owns 128 units, Chinook has 32 one-bedroom units and Willawa has 32 units.

These campuses offer opportunities to provide holistic and integrated services for older adults as they include senior centers which provide congregate meals and offer other activities such as exercise programs and educational opportunities. This model also provides an opportunity for program income, especially if the housing units are for mixed-income residents. These campuses serve as the base for home-delivered meals (with the current exception of Mid Valley). Both WASI and MSSS are looking at ways to expand their senior housing.

## Coordination

In Mat-Su, there are two coalitions that relate to nutrition – The Mat-Su Food Coalition and the Coalition of Mat-Su Senior Centers. The Mat-Su Food Coalition has recently had some limited success initiating a program to increase access to food for children by attempting to create pantries within schools. The Coalition of Mat-Su Senior Centers is comprised of MSSS, WASI, Willow, Meadow Lakes, and Upper Su Senior Services. MSSS, WASI and Upper Su Senior Services have jointly received a state Nutrition, Transportation and Services (NTS) grant that they divide among the three organizations.

### RECOMMENDATION:

- Strengthen both the the Mat-Su Food Coalition and the Coalition of Mat-Su Senior Centers to ensure inclusivity, leadership engagement, and greater alignment and integration of services. Explore opportunities for them to work more closely together and align efforts when appropriate.

## Access to the System

In all focus groups, participants reported that they each keep their own resource guides. They noted that 2-1-1 is not kept current and does not always reflect Mat-Su resources. The lack of a consistently used resource guide makes it challenging, especially for community members, to know how to access resources. The individuals in the congregate meal focus group stated that most of them learned about the meal program from their peers or from flyers or newsletters.

To help address this, MSHF funds a program, specific to Mat-Su, called [Connect Mat-Su](#) which is open from 8 a.m.-5 p.m. Monday - Friday at the MSHF building in Wasilla. Individuals can walk-in for resource referral and navigation services or can call (907) 373-CNCT (2628) to access the same services. In the near future the resources available through Connect Mat-Su will also be accessible through the Connect Mat-Su website which individuals can navigate independently. Connect Mat-Su is designed to create and maintain an accessible, comprehensive resource database to help individuals and families navigate and identify the social, behavioral and medical services they need. Additionally Connect Mat-Su, in cooperation with key agency partners, provides resource navigation and support to help individuals with multi-faceted needs, access to social activities and connections to help people build a healthy social network and to accessing resources they might need to optimize their health.

In addition, while each organization has their own intake forms, **the Aging and Disability Resource Center (ADRC) is playing a central role in helping clients access and coordinate services.** They conduct screening and intake as well as facilitate access to community programs. Their goal is to “provide free information and referral services that promote health, well-being and safety for individuals with disabilities, seniors and vulnerable adults by connecting them to quality services and supports that foster independence, personal choice and dignity.”

The ADRC screening and referral services were often referred to by community partners as critical to determining who needs and qualifies for services. ADRC conducts intake via phone, in-home, and at community sites. They assist individuals with completing application forms for senior nutrition boxes, home-delivered meals, state resources, and food pantries. Once a month, they go to Talkeetna to assist individuals with completing screening and assessment forms and every other month they go to Willow. Approximately fifty percent of the intakes are conducted in homes as individuals do not have transportation to get to their offices.

## RECOMMENDATIONS:

- Create a common screening and intake tool and explore a common database to reduce the number of times individuals are asked to share personal information.
- Invest in ADRC’s ability to provide screening and referral
- Optimize and Publicize Connect Mat-Su

## Public Awareness of Senior Nutrition Programs

**In all of the focus groups, participants agreed that there is a need for greater awareness of available senior food programs.** Each organization has its own mechanisms for generating awareness, but there is no centralized campaign. According to the congregate meal site participants, while some individuals are computer and technology savvy, most individuals rely on word of mouth, flyers placed in community locations, or newsletters to learn about services.

Once fully operational, [Connect Mat-Su](#) should be able to fulfill many of the concerns that were expressed as it will have walk-in, telephone and web presence capabilities.

Based on discussions with other senior nutrition organizations from around the country, there are some other public awareness practices that should be considered by providers in Mat-Su.

### RECOMMENDATIONS:

- Jointly participate in community awareness such as the national March for Meals, coordinated by Meals on Wheels America, to increase community awareness about senior nutrition, recruit volunteers, and engage local businesses.
- Provide volunteer drivers with ways to indicate they are providing Meals on Wheels.
- Partner with local businesses to consider promotional opportunities such as sponsoring meals or wrapping all organizational vehicles with their information.
- Ensure long-term investment in Connect Mat-Su

## Volunteerism

**All Mat-Su senior nutrition organizations stated a desire for greater volunteer engagement and better volunteer management tools.** Each organization currently recruits and trains its own volunteers. Some are doing this more successfully than others. Frontline Mission averaged almost 300 volunteers per month in 2018 and the Upper Su Food Pantry averages 40 volunteers per month who assist with all aspects of the pantry. In the Senior Centers, volunteers assist with checking individuals in and helping participants feel welcome. Chickaloon Native Village elders volunteer to ride with drivers to deliver meals and at MSSS, volunteers actively participate in meal preparation and packaging.

### RECOMMENDATIONS:

- Centralize or coordinate recruitment of volunteers.
- Hold joint volunteer appreciation celebrations.
- Identify technology that can easily be used to track and manage volunteers.

## Data Collection

**Senior nutrition organizations have various levels of sophistication in their data collection.** Most are using Excel, one is using paper, and one is using volunteer management and donor management software. Each organization has a customer satisfaction survey which also differ in their level of data collection. Organizations expressed an interest in exploring more advanced software for data collection, but they were wary of the cost and trying a system that would be too complex or not meet their needs. Several software packages have been designed for Meals on Wheels programs including: [ServTracker](#); [MealsOnWheels Manager](#); and [Zippy Meals](#). All agreed this was an area worth further exploration.

### RECOMMENDATIONS:

- Explore and share best practices for data collection and program management.
- Review software options for data collection and program and volunteer management.
- Determine how to provide community level reports to demonstrate the impact of all Meals on Wheels programs.

# Home-Delivered Meal Programs

## Key Findings:

- While the Senior Centers meet on a regular basis and three of them share the state Nutrition, Transportation, and Support Services (NTS) grant, there are opportunities to include all home-delivered meal providers and focus collective energy on marketing, fundraising, advocacy, and sharing best practices.
- The lack of clearly defined service delivery areas allows for some client choice but may not be the most efficient approach.
- While the delivery areas are large, there are still communities such as: Glacier View, Butte, South of Trapper Creek and North of Willow, North of Talkeetna, especially Chase, end of KGB road, Caswell Lake, and Knik River Road for which home-delivered meals are infrequent or non-existent. This is generally related to terrain, lack of appropriate vehicles, and ultimately, lack of financial resources.
- There are not currently the resources in place to provide for meal choice, including meals that consider cultural or religious needs or therapeutic meals.
- As a region, providers serve home-delivered meals to approximately 388 older adults every day that they deliver a meal. This varies based on the time of the year with more meals delivered in the winter.

Table 9: Home-Delivered Meal Providers

Home-delivered Meal Providers	Service Area	Frequency	Approx. # Clients per Day
Chickaloon Native Village	Glacier View/Eklutna Bridge (to the South), Seward Meridian (West) to South Glenn Highway	Thursday (elders who did not attend elder lunch) and Friday (all elders)	30-40
Mat-Su Senior Services	Palmer and Wasilla Mid Valley to Chickaloon. Big Lake every day.*	Five days a week	200
WASI	Wasilla – South and West and Up to Willow. General break at Trunk Rd. Longest route to Mile 88, Parks Hwy.	7/1/19 moved back to five hot meals and two frozen meals per week	130
Upper Su Seniors, Inc (Sunshine Transit assists with delivery)	Talkeetna – ten miles north & south of headquarters. Once per week to Trapper Creek	M – Hot meal prepared by restaurant	19-26
		Total	379-396

SOURCE: Self-report from agencies listed during interviews and follow-up

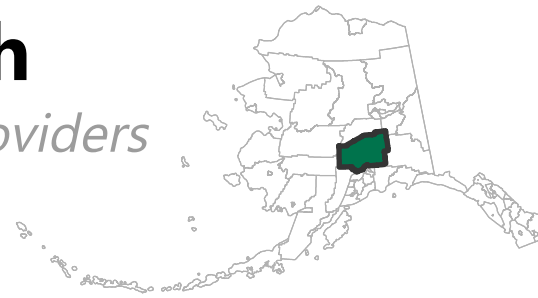
\* Mat-Su Senior Services delivery to Glacier View twice per week ended on 9/30/19.



# Mat-Su Borough

## Home-Delivered Meal Providers

Figure 4: Map of Home-Delivered Meal Providers in Mat-Su

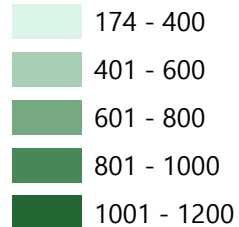


● Home-Delivered Meal Providers

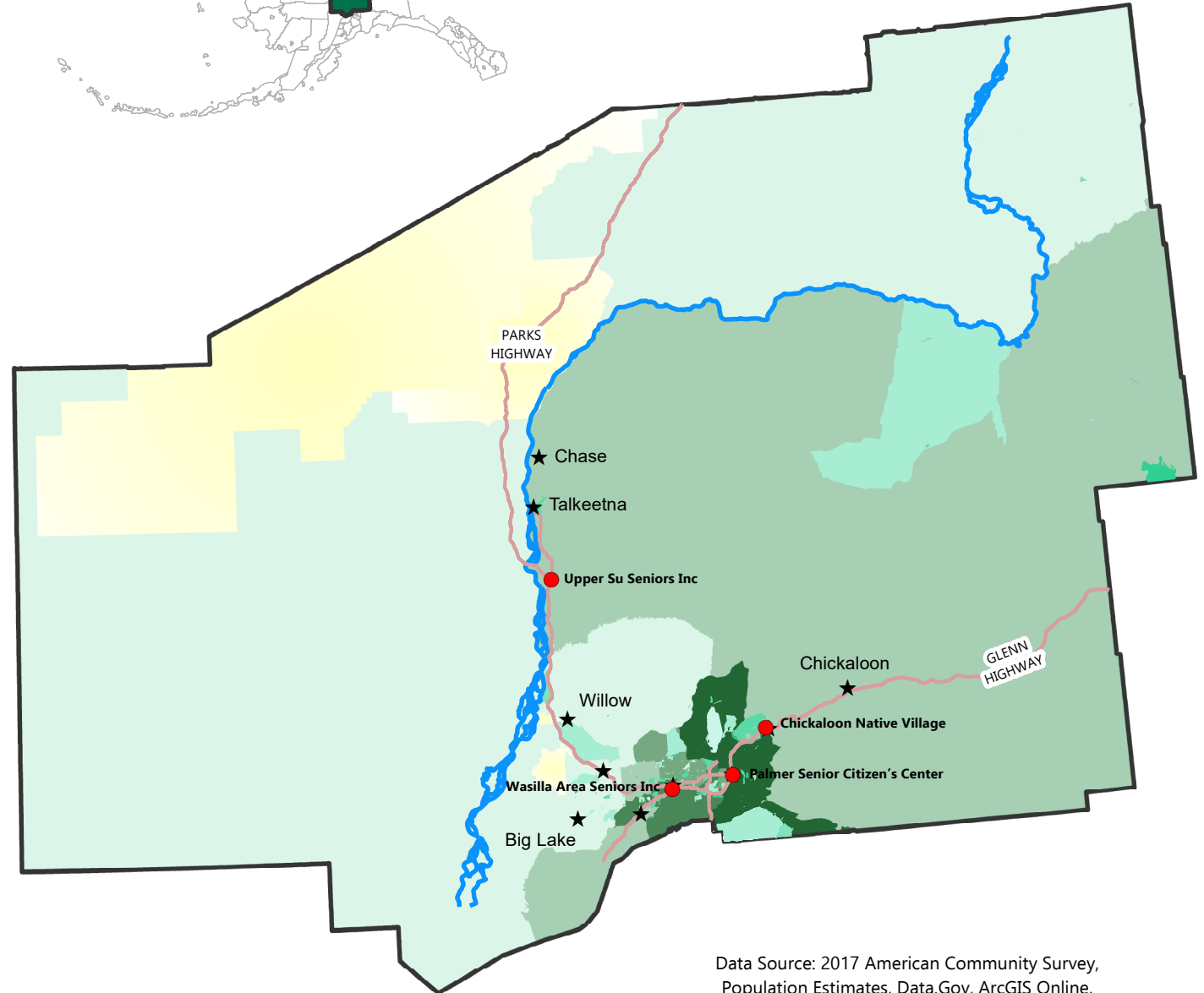
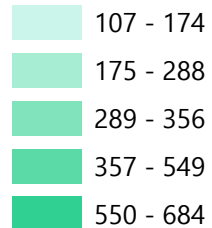
■ National and State Parks

### Population 60 Years and Older

#### By Census Tract



#### By Census Block Group



According to the 2017 ACS population estimates, the population of Mat-Su Borough is 101,135. Approximately 16% (16,358) of the population in Mat-Su is over 60 years old.

Data Source: 2017 American Community Survey, Population Estimates, Data.Gov, ArcGIS Online, 211 Alaska, LINKS/ARDC, Mat-Su Health Foundation

Map Created by Sarah Axe  
August 9, 2019

0 12.5 25 50 Miles



There are four organizations that provide home-delivered meals to older adults in Mat-Su. Only Mat-Su Senior Services (MSSS) and Wasilla Area Seniors, Inc (WASI) provide hot home-delivered meals five days a week. WASI increased hot meal delivery from three days a week to five beginning in July 2019 and they also provide two frozen meals for the weekend as does MSSS. Chickaloon Native Village provides a home-delivered meal on Thursday evening to elders who did not participate in the Thursday elder congregate meal program. They also home-deliver a meal to all elders on Fridays. Other providers deliver meals to Chickaloon elders Monday – Thursday. WASI works with the Knik Tribe and delivers home-delivered meals to their elders. Upper Su Seniors, Inc has a unique model whereby they partner with local restaurants to purchase meals for \$7.50 per meal, which they package in their kitchen, for two of the three home-delivered meals. They produce one meal in their kitchen. Some of the Upper Su meals are delivered using Sunshine Transit. WASI, MSSS, and Chickaloon Native Village use their own kitchens to prepare all their meals.

Meals on Wheels programs are generally provided at no cost to recipients, although recipients can provide a voluntary donation to help offset the cost of the meals. While almost all home-delivered meals are provided at no cost, Upper Su Seniors, Inc does occasionally charge clients for a meal if they are determined by the Director to have some financial resources to pay. WASI, MSSS, and Upper-Su Seniors Inc estimate their cost per meal is between \$9.50-\$12 per meal. Some of the discrepancy is based on the distance the meal must be driven. Meals on Wheels America has estimated that the cost of serving a senior Meals on Wheels in Alaska is 13.78.<sup>14</sup>

## RECOMMENDATION:

- All organizations should review and identify their full cost of providing a home-delivered meal.

## Coordination

Upper Su Senior Center, MSSS, and WASI meet on a regular basis via the Coalition of Mat-Su Senior Centers. In approximately 2012, these organizations and Mid-Valley decided to make a joint application to the state for the NTS grant with MSSS as the lead/administrative organization and were awarded it. Once the grant amount is received the organizational leaders must determine how to allocate the funding. This is not always an easy negotiation as there are different weights organizations give to transportation and meals. So far, allocations have been based on number of meals served. To date, MSSS has not taken an administrative fee for the coordination of data collection and reports from the state funds. However, WASI does pay MSSS \$1,000 annually for their administrative support.

**All home-delivered meal providers agreed in the debrief group that there is a need for greater awareness about home-delivered meal programs, the need for additional volunteers, advocacy, and fundraising.**

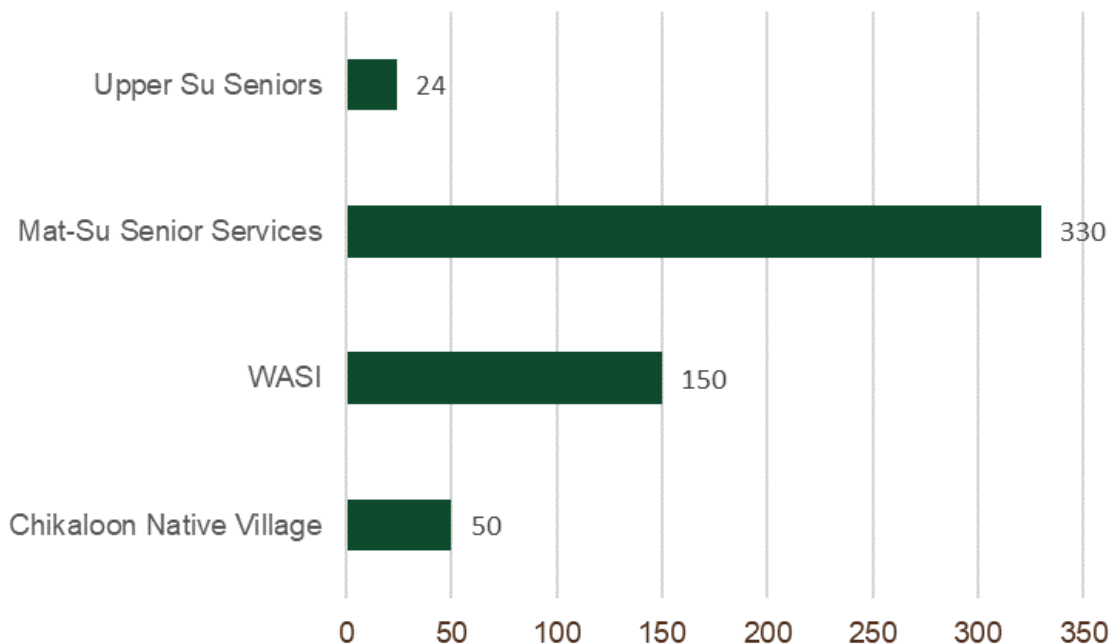
## RECOMMENDATION:

- Create a structure such as Meals on Wheels Mat-Su whereby all home-delivered meal providers work together to achieve common goals and identify opportunities for alignment such as bulk vehicle or food purchases or vehicle maintenance agreements and incorporation of best practices. This was initially discussed by programs in the area but was put on hold due to leadership transitions. WASI has registered “Meals on Wheels of the Mat-Su Valley” with the state of Alaska and Meals on Wheels America which provides an opportunity for further exploration and collaboration.

## Service Capacity

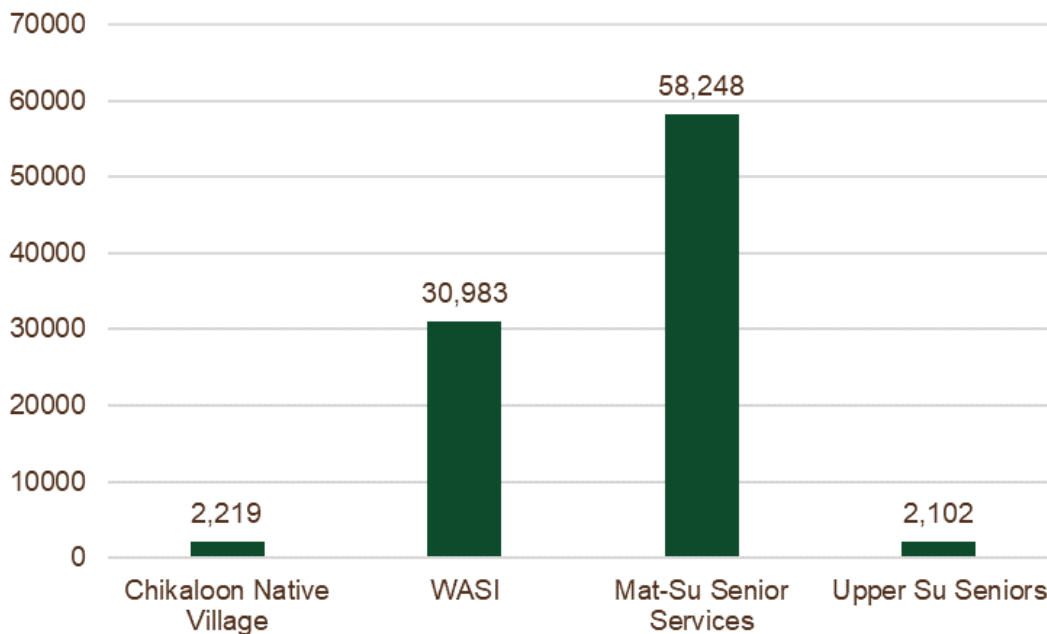
**Based on annual reports submitted to the state, between February 1, 2018 and January 31, 2019, 554 unique individuals received home-delivered meals in Mat-Su and 93,552 meals were delivered.** Providers noted that the number of meals can vary seasonally as some individuals have the ability to be mobile in the summer but cannot leave their homes in winter and so need a meal delivered then. While home-delivered meal providers do not currently have waiting lists, all report that their resources are stretched thin and they do not have much additional capacity without additional funds. Not all individuals receive a hot meals five days a week due to lack of resources. Upper Su Senior Center only delivers three times a week and only once a week to Trapper Creek. On some of the longer routes, older adults are provided a combination of hot and frozen meals. Even with the best efforts of organizations, the vast majority of individuals are, at most, eating one meal per day.

Figure 5: Individuals Receiving Home-Delivered Meals in Mat-Su  
02/01/2018-1/31/2019



SOURCE: SAMS Agency Summary report for 02/01/2018-01/31/2019 provided by Mat-Su Senior Services and USDHHS Title VI Report FY2018 provided by Chikaloon Native Village

Figure 6: Number of Home-Delivered Meals in Mat-Su  
02/01/2018-01/31/2019



SOURCE: SAMS Agency Summary report for 02/01/2018-01/31/2019 provided by Mat-Su Senior Services and USDHHS Title VI Report FY2018 provided by Chikaloon Native Village

## RECOMMENDATION:

- Create a plan to ensure all residents in need of home delivered meals, receive access to a minimum five days with at least one hot meal

## Service Area

The Mat-Su Borough has a total area of 25,258 square miles. While much of this is not densely populated, it is a vast area for home-delivered meal programs to try and cover with limited resources. The terrain can also be difficult to traverse, especially in winter. There are a limited number of paved roads and driving in the unpaved areas is difficult for vehicles. Many older adults have chosen to live “off grid” in remote locations, with limited ability to heat food or keep it cool. Even when they live in clustered areas, it is challenging for home-delivered meal programs to reach them. One way in which home-delivered meal providers have addressed this is that for some of the longer routes they are providing a mix of hot and frozen meals. However, even these more limited services can be in jeopardy based on resources. MSSS recently announced that they are going to stop serving Glacier View as of 9/30/2019.

An additional challenge that all providers face because of the terrain and number of miles driven is the toll that it takes on vehicles. All providers expressed a need for additional vehicles, especially those that are adapted for hot or cold meals for longer distances, and for vehicle maintenance. All struggle with identifying funding sources for the capital costs needed to purchase new vehicles.

The four home-delivered meal providers have not clearly defined their territories which allows for client choice but may not be the most efficient method of delivery.

## RECOMMENDATIONS:

- Home delivered meal providers should review service areas and determine if there is a more efficient way to deliver services.
- Any changes in service should be made through client attrition so that no new clients are accepted outside service areas.

## Areas Identified as Unserved or Underserved with Home-Delivered Meals

While the providers are serving a large part of Mat-Su, they identified several areas that they believe are unserved or underserved. Most of these areas are difficult to access and/or have sparse populations. Unserved or underserved areas include:

- South of Trapper Creek and North of Willow
- North of Talkeetna, especially Chase
- End of KGB road
- Caswell Lake
- Glacier View
- Knik River Road
- Butte

The unserved areas change as routes from providers change, however, the challenges with serving these areas was highlighted with MSSS’s recent determination that they will stop serving Glacier View as of 9/30/2019.

## RECOMMENDATION:

- Home-delivered meal providers should review the unserved areas and identify a plan for serving them.

## Meal Choice

In the focus group with organizations that serve older adults but do not provide food, and an interview with a hospital social worker, they stated that **two of the primary reasons why individuals do not access home-delivered meals are 1) the lack of meal choice and 2) challenges with being able to swallow delivered meals.** They reported that many older adults have stated that home-delivered meal programs are not able to provide meals that meet specific dietary requirements for their medical conditions or cultural requirements. Some individuals cannot swallow the meals as they are not cut small enough or they need soft foods or a liquid substitute such as Ensure or Thick-It type products which are not always available. **At the time of this study it was noted that the need for the liquid substitutes is even more critical, since as of July 1, 2019, Medicaid in Alaska no longer covers these types of products.**

The four providers report that their ability to provide choice in the meals they offer is limited by current resources. Most try to meet some dietary restrictions, but do not have the capacity to fully meet the needs of therapeutic meals and they can only provide liquid products on an ad hoc basis. For example, MSSS offers an array of meal choices such as diabetic-appropriate and low-sodium meals but does not currently offer a liquid meal option.

In terms of meal preference, for certain meals such as liver and onions or fish, some programs offer an alternative such as pizza as they have discovered that individuals have strong love or hate relationships with those particular foods. In addition, when providing frozen meals, the drivers at WASI can also choose the frozen meals to take and often know their clients' preference and choose based on that. The Chickaloon Native Village provides meats, fish and organic fruits and vegetables that are in alignment with their cultural traditions. It was noted that the elders, while appreciative of the meals provided by other providers, would prefer increased access to traditional foods. Upper Su Senior Center is limited to the types of meals that the restaurants are willing to provide.

**Creating meal choice, especially choice of therapeutic meals that can address health issues, also creates a potential new revenue stream. Managed care companies and hospitals are looking for services that will assist with reducing readmission to hospitals and beginning in January 2020, home delivered meals will be supplemental benefits in the Medicare Advantage Special Supplemental Benefits for the Chronically Ill (SSBCI) program.** According to the Centers for Medicare & Medicaid Services (CMS),<sup>14</sup> Medicare Advantage programs will be able to offer these services to chronically ill enrollees if they have a “reasonable expectation of improving or maintaining the health or overall function of an individual as it relates to their chronic condition or illness and may not be limited to being primarily health related benefits.”

In order to qualify for the benefits, an enrollee must:

1. Meet CMS' criteria for “chronically ill,” which they define as any enrollee with a condition listed in Section 20.2 of Chapter 16b of the Medicare Managed Care Manual. CMS notes in the guidance that 73 percent of current Medicare enrollees have at least one of these conditions, which include diabetes, cardiovascular disorders, congestive heart failure, stroke, chronic lung disorders, chronic and disabling mental health disorders, and others.
2. Be at high risk for hospitalization or other adverse health outcomes
3. Need intensive care coordination.
4. CMS allows plans the flexibility to develop internal criteria to determine if enrollees meet these criteria.

## RECOMMENDATIONS:

- Strengthen the coordination of all home-delivered meal programs to provide greater public awareness, volunteer engagement, fundraising, and advocacy.
- Consider collaboration for joint vehicle purchase and vehicle maintenance.
- Create a plan to serve the unserved areas.
- Identify ways to enhance meal choice so that therapeutic, medical, and culturally appropriate meals can be provided.
- Explore feasibility of participation in Medicare Advantage Programs



# Congregate Meals

## Key Findings:

- Senior Center model encourages individuals to attend congregate meals.
- Congregate meals help address social isolation.
- Transportation is a primary barrier that limits participation.

Congregate meals are meals served in group settings to people who are at least 60 years of age. The meals are healthy and designed to meet the nutritional needs of adults age 60 and over. Nationally, both the number of congregate participants and meals served has been steadily declining for the past 12 years.<sup>15</sup> However, Mat-Su generally has congregate meal programs that are growing or holding steady. Only one program stated that they are seeing a slight decline in participation. Congregate meals are targeted at all older adults, not just low-income, and provide the dual purpose of connection with others and senior nutrition.

There are six organizations that provide congregate meals. WASI, Mid Valley Senior Center, and MSSS offer lunch five days a week. Frontline Mission provides an evening meal on Wednesday and lunch on Thursday and Friday. Their meals are open to the whole community and approximately twenty percent of their participants are older adults. Upper Su Senior Center and Chickaloon Native Village provide lunch one day a week. In addition, Primrose, a private residential community for older adults, has a breakfast on the first Tuesday of each month that is open to the community, but an RSVP is required. Mid Valley Senior Center had closed its program, but in May 2019, the board handed over management to WASI who began providing congregate meals. Mid Valley Senior Center is in the process of dissolving their 501(c)3 organization and turning over the assets to WASI.

Per Table 10, congregate meal providers serve an average of 214 individuals per day.

Table 10: Congregate Meal Providers

Congregate Meal Providers	Location of Congregate Meals	Frequency	Approx. # Clients per Day
Chickaloon Native Village	Sutton	Thursdays	20-30
Frontline Mission	Wasilla	Wednesday at 6pm, Thursday and Friday from 10:30am-12:45pm	14 older adults a day (20 percent of 69 total per day)
Mat-Su Senior Services	Palmer	Monday-Friday	60-65
Mid Valley Senior Center	Houston (WASI provides meals and staff)	Monday-Friday	15
WASI	Wasilla	Monday-Friday	70-80 (up to 150 on rib day)
Upper Su Seniors, Inc	Talkeetna	Tuesdays	19-26
		<b>Total</b>	<b>198-230</b>

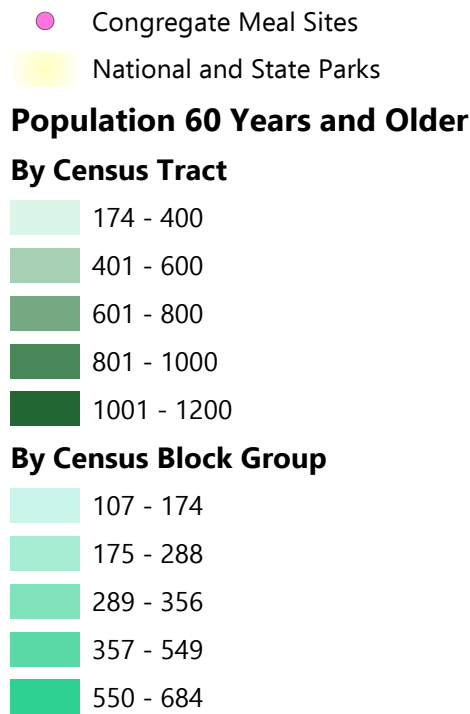
SOURCE: Self report from each provider through interviews and follow-up with researchers.

Most of the congregate meal sites provide meals on a donation basis, with a recommended donation in the \$5-\$8 range. Upper Su Seniors, Inc charges \$9 per meal to older adults who are members of the Senior Center and \$11 to older adults who are not members. This is because their meals are purchased from local restaurants at \$7.50 per meal.

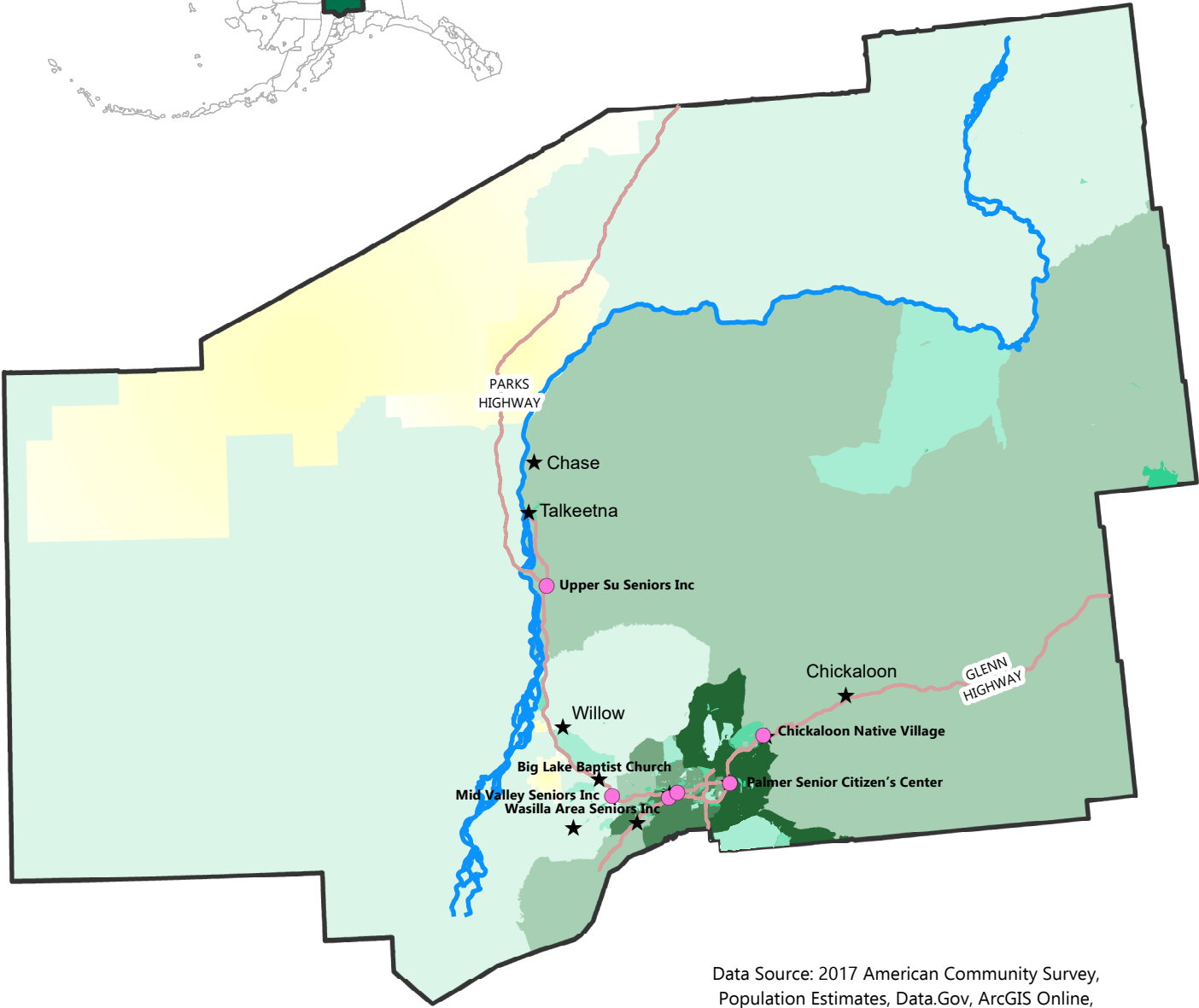
# Mat-Su Borough

## Congregate Meal Sites

Figure 7: Map of Congregate Meal Sites in Mat-Su

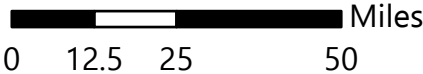


According to the 2017 ACS population estimates, the population of Mat-Su Borough is 101,135. Approximately 16% (16,358) of the population in Mat-Su is over 60 years old.



Data Source: 2017 American Community Survey, Population Estimates, Data.Gov, ArcGIS Online, 211 Alaska, LINKS/ARDC, Mat-Su Health Foundation

Map Created by Sarah Axe  
August 9, 2019



## Service Capacity:

Each congregate meal site posts its menu in advance and sites reported that attendance is often dictated by the meal or quality of speaker if one is available. Attendance is also seasonal with higher attendance in the summer as many older adults choose to go to the lower 48 in the winter if they are mobile or cannot attend if they are homebound through lack of transportation. All sites reported that they have capacity for additional attendees. Based on state reports for MSSS, WASI, and Chickaloon Native Village and self-reports from Frontline Mission and Upper Su Senior Centers, Table 11 shows that between February 1, 2018 and January 31, 2019 approximately 1,650 individuals received 44,000 congregate meals.

Table 11: Annual Participation in Congregate Meals

	# of individuals	# of congregate meals	Cost to older adults	Available Transportation
Chickaloon Native Village	52	1,563*	None	Provides van to pick up elders
Frontline Mission	84**	2,171**	None	None
MSSS	838	21,594	Suggested donation \$5	Provides van for pick up within 25 miles of facility
WASI	617	17,589	Suggested donation \$6	Van picks up within 5-7 minutes of facility
Upper Su Seniors, Inc	60 Est	1,144 Est	\$9 for members \$11 for non-members	Upper-Su Food Pantry Ripples Program uses Sunshine Transit to pick up from Trapper Creek, Willow, and Caswell Lake

SOURCE: SAMS Agency Summary report for 02/01/2018-01/31/2019 provided by Mat-Su Senior Services and USDHHS Title VI Report FY2018 provided by Chickaloon Native Village

\*This is the number meals for Alaska Native Elders served by Chickaloon Native Village. They also serve 10-15 older adults per week who are non-native for an estimated total of 500 additional meals per year.

\*\*20 percent of overall numbers which is the estimated percentage of individuals age 60 years or older who receive meals.

## Senior Center Model

Except for Frontline Mission, congregate meal sites are located at senior center community sites. This proximity allows for residents to easily access nutritious meals.

## Addressing Social Isolation

More than 40 percent of older adults regularly experience loneliness, according to a University of California, San Francisco (UCSF) study. The UCSF researchers found that this feeling of separation and disconnection from other may predict serious health problems and even death.<sup>16</sup> The participants in the focus group for congregate meals almost universally stated that the ability to be with other people was the primary reason that they came for the meals. “It’s the sense of community and friendliness that keeps folks coming back” stated one of the participants.

## Transportation Barrier

**Congregate meal providers identified transportation as the primary barrier to participation in congregate meal services.** This barrier is faced in all parts of Mat-Su with a lack of fixed routes, relatively expensive on-demand services, and extremely limited options in more rural areas.

Congregate meal providers are addressing transportation challenges in a variety of ways. In Upper Su, the Upper Su Food Pantry received a grant from the Mat-Su Health Foundation to start the Ripples Program. This program partners the food pantry with Sunshine Transit to bring older adults from Willow, Caswell Lake, and Trapper Creek to the Tuesday congregate meal at the Upper Su Senior Center and covers the cost of the meal. The representative from Sunshine Transit stated that when the pick-up first began in spring 2019, the van was very quiet and everyone kept to themselves, however, now the van is full of individuals sharing stories and treating each other like friends.

Chickaloon Native Village has a public transit service known as Chickaloon Area Transit System (CATs). CATs operates Monday through Friday within the service area from MP 70 to MP 40 of the Glenn Highway. CATs is a demand-response transit system with wheelchair access that is available to all residents in the service area as dates, times, and seating are available. CATs connects to Valley Transit for rides in their Palmer & Wasilla service area with connections to Anchorage. Chickaloon Native Village picks up their elders for the congregate meal and provides transportation for them to a variety of other community activities.

WASI and MSSS both use vans to pick up older adults and bring them to congregate meal sites. MSSS will pick individuals up within 25 miles of their facility. WASI's lunch shuttle transports seniors who live near (within about five minutes) the Wasilla Senior Center but cannot travel independently due to mobility or other limitations. Often, WASI travels further from the center to transport a Medicaid Choice Waiver client, and in that case, will also transport seniors who live along the route to/from the Medicaid recipient's residence. WASI expands service whenever donations to the service allow.

**WASI and MSSS both noted that with Valley Transit moving from fixed route to demand-response, the access for older adults to transportation in Wasilla/Palmer area has become even more challenging.**

There are currently discussions within Mat-Su regarding the need for increased transportation coordination which provides an opportunity for greater access to senior nutrition.

## RECOMMENDATIONS:

- Invest in expanding transportation options
- Create a transportation plan to assist older adults' ability to access senior nutrition

## Addressing Attendance

In the focus group with primary senior nutrition providers, they asked for best practices related to maintaining or increasing attendance in congregate programs. The Suburban Area Agency on Aging (SAAA) and Community Nutrition Network conducted focus groups with older adults and identified the following reasons why individuals do not attend congregate meals:<sup>17</sup>

- Not recognizing that they have a need for services,
- Inadequate transportation,
- Impaired health,
- Social discomfort with attending or applying for assistance,
- Dissatisfaction with foods served, and
- Lack of awareness that the program exists.

All of these were mirrored in the focus group of congregate meal participants in Wasilla. In order to address these challenges, the same study identified the following components of a successful program:

- Choice in menu, including cultural & dietary choices,
- Attractive presentation of food,
- Knowledgeable and friendly staff,
- Pleasant, welcoming, supportive environment,

- Participant input and volunteer opportunities,
- Adequate transportation and parking,
- Variety of programs, services and activities, and
- Widespread publicity.

Based on discussions with other similar-sized organizations, additional recommendations for locally increasing participation in congregate meals were identified.

## RECOMMENDATIONS:

- Engage and invite multi-generational community members to the meals. It was noted that Chickaloon Native Village is already doing this and could serve as a model.
- Utilize current participants and volunteers as program ambassadors. Arm them with information that they can share with their peers and family members.
- Ensure that older adults are aware of the congregate meal programs.

Appendix F includes the results of similar-size programs around the nation that have congregate meal programs and/or home-delivered meal programs and the practices that they have used when facing challenges.



# Food Boxes

## Key Findings:

- The food box programs are providing supplemental nutrition for older adults, but some need assistance in learning how to maximize their contents.
- There is additional capacity within the Commodity Food Supplemental Program (CFSP) program.

There are two different types of food boxes that are available in Mat-Su: the Commodity Food Supplemental Program (CFSP), which is specifically targeted at older adults, and The Emergency Food Assistance Program (TEFAP).

## Commodity Food Supplemental Program (CFSP)

The Commodity Food Supplemental Program (CFSP) is a U.S. Department of Agriculture Program that is designed to improve the health of low-income persons at least 60 years of age by supplementing their diets with nutritious USDA Foods. These boxes are provided by the Food Bank of Alaska and delivered to local distribution sites. To be eligible, individuals must be 60 years old and have an income at or below 130 percent of Federal Poverty Income Guidelines.<sup>18</sup>

Table 12: 2019 CFSP Income Guidelines for Alaska

Household Size	Federal Poverty Guidelines – 100%	Older Adult 130% Annual	Older Adult 130% Monthly
1	\$15,600	\$20,280	\$1,690
2	\$21,130	\$27,469	\$2,290
3	\$26,660	\$34,658	\$2,889
4	\$32,190	\$41,847	\$3,488

SOURCE: Alaska Department of Health and Social Services, Division of Public Assistance website, <http://dhss.alaska.gov/dpa/Pages/nutri/cfsp/default.aspx>

Older adults must complete an application which can be found online at the Department of Health and Social Services website.<sup>19</sup>

As noted in Tables 13 and 14, in Mat-Su, there are two organizations which deliver CFSP boxes and six organizations that provide CFSP boxes through pick-up. MSSS does not participate in the food box programs.

An older adult is eligible to receive one box per month and each box contains approximately \$40 worth of food. The Food Bank of Alaska, which is contracted by the state to manage this program, reports that not all eligible older adults are signed up for CFSP and there are about 200 slots available statewide.

Table 13: CFSP Delivery

Organization	Service Area	Frequency	Recipients
Salvation Army (ADRC assists SA with the Wasilla to Willow delivery)	Palmer to Sutton Wasilla to Willow	Once per month 2nd Friday Once per month last Friday	4 older adults 20 older adults
Upper Su Food Pantry	Talkeetna area to Willow	Once per month	5 older adults in summer 25 older adults in winter
		<b>Total</b>	<b>39 summer</b> <b>59 winter</b>

Table 14: CFSP Pick Up

Organization	Pick Up Location	Frequency	Recipients
Big Lake Food Pantry	Big Lake	Once per month	Unknown
Mat-Su Food Bank (distribute for WASI)	Wasilla	Pick-up available five days a week	35-40 older adults
Salvation Army	Palmer	Once per month	48 older adults
Upper Su Food Pantry	Talkeetna	Once per month	60 adults
Willow Community Food Pantry	Willow	Once per month	Unknown
WASI	Wasilla	Pick-up available Twice per month	110-130 older adults
		<b>Total</b>	<b>253-278</b>

## The Emergency Food Assistance Program (TEFAP)

The Emergency Food Assistance Program (TEFAP) is a federal program that helps supplement the diets of low-income Americans by providing them with emergency food and nutrition assistance at no cost. The state of Alaska contracts with the Food Bank of Alaska to provide the food to local agencies to distribute the food to soup kitchens and food pantries that directly serve the public. **To be eligible, households must be at or below 185 percent of the current federal poverty guidelines or be eligible for programs such as Food Stamps, Temporary Assistance to Needy Families (TANF), Supplemental Security Income (SSI), or Low-income Energy Assistance Program.** Many older adults qualify for this program.

Agencies who provide prepared meals in a congregate setting such as a homeless shelter or soup kitchen are also eligible to participate in the TEFAP program. Organizations do not have to verify participant income, so long as the agency serves predominately needy people. Child Nutrition Services administers the congregate feeding sites. The researchers did not specifically ask which food pantries also provide the TEFAP boxes as the program does not target older adults, but it seems that most of the providers that provide the CFSP program also participate in TEFAP and this program can provide an additional resource to older adults.

## Opportunities and Challenges with the Food Box Programs:

Senior nutrition providers report that older adults are grateful for the boxes that they receive and that they meet the goal of providing additional senior nutrition. However, they also report that since older adults do not have a choice about what is included in the boxes, there is sometimes waste as they either do not like or do not know how to prepare the food that is provided. It was noted that often one spouse is responsible for the cooking and if that spouse passes away, the surviving spouse does not have the skills to cook food even if it is available.

### RECOMMENDATIONS:

- Ensure that all eligible older adults are signed up for CFSP and TEFAP.
- Provide opportunities for older adults to learn how to cook the foods they are provided.

# Food Pantries And Food Banks

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## Key Findings:

- Food pantries are serving a critical need.
- Narrowly defined opening times limits access.
- Transportation is a key challenge for individuals' access to food pantries.
- There is no coordinated food drive or centralized location for food collection.

Food pantries serve a critical need by providing food for individuals who do not have the resources to meet their nutritional needs in other ways.

It was challenging to get consistent information from all the pantries and food banks regarding older adults as many keep paper forms and do not specifically identify the number of older adults they serve. Table 15 illustrates the information researchers were able to obtain.

5 Loaves 2 Fish Kitchen, which is located within the Good Shepherd Church, also provides food, however, they produce meals for specific locations and deliver them. They deliver to: MY House targeted at homeless youth; Knik House targeted at recovery from alcohol and drug abuse; and Family Promise for families in transitional housing. They currently do not produce meals for any senior programs but are open to doing so.

There are also two food banks that serve Mat-Su – the Food Bank of Alaska and the Mat-Su Food Bank. The Food Bank of Alaska, located in Anchorage, is the primary source of food for many of the local Mat-Su food pantries. Mat-Su food pantries purchase food from the Food Bank of Alaska at 19 cents per pound. The greatest challenge expressed by many of the food pantries is that even with two weekly food distributions in Mat-Su by the Food Bank of Alaska, they must still often travel to Anchorage to shop for donated food. As previously mentioned, the Food Bank of Alaska expressed interest in working with organizations in Mat-Su to identify a local collection, storage and distribution facility.

The Mat-Su Food Bank is located in Wasilla and has a 5,000 square foot storage facility. It serves as a food bank primarily for smaller food pantries in the region. The Mat-Su Food Bank does not charge these pantries for the food that they distribute. In 2018, they received over 500,000 pounds worth of donated food.

Table 15: Food Pantries

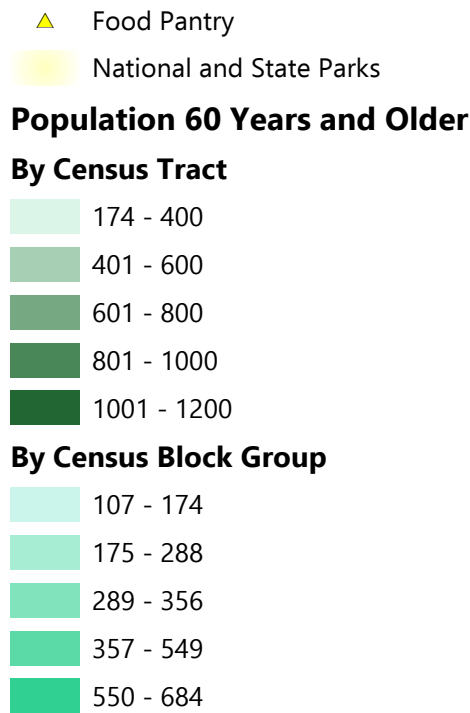
Organization	Location	Open	# of Older Adults Served
Big Lake Baptist Church	Houston: serves Big Lake and Houston	Call for appointment. Can access once per month	unknown
Big Lake Community Food Pantry	Big Lake	Thursday from 11:30am-1:30pm	Approx. 50 per week
Blood and Fire Ministry	Wasilla	Wednesday and Friday from 2:00-5:00pm	unknown
Hilltop Assembly of God	Houston: Serve Houston, Big Lake, Meadow Lakes, Willow	Call to set up appointment	Approx. 30 per year
Frontline Mission	Wasilla	Wednesday at 6p, Thursday from 10:30am-1pm and Friday from 10:30am- 1pm (congregate meal participants receive a food box)	Approx. 1,219 senior food boxes per year, not unique number
Mat-Su Food Bank	Wasilla: Serve entire Borough	Monday-Friday from 10am-1pm	2,924 per year
Palmer Food Bank	Palmer	Monday, Wednesday, Thursday, and Friday from 1-4pm	unknown
Salvation Army	Palmer	Monday, Tuesday, Wednesday, and Friday from 12-4pm	unknown
Society of St Vincent de Paul/ Our Lady of the Lake Church	Big Lake	Only for emergencies such as house fire	unknown
Sutton Food Pantry (Grace Bible Church)	Sutton	Thursday from 6-7pm	unknown
Upper Su Food Pantry	Talkeetna: Serve Upper Northern Su Valley	Wednesday from 12-3pm and Friday from 10am-4pm (older adults can access twice per month)	205 per year
Willow Community Pantry	Willow: Clients must live in Willow, Houston or Caswell Lake	Wednesday from 10am-2pm	Approx. 140 per year
		<b>Approximate annual total</b>	<b>4,568*</b>

\* Not an unduplicated number

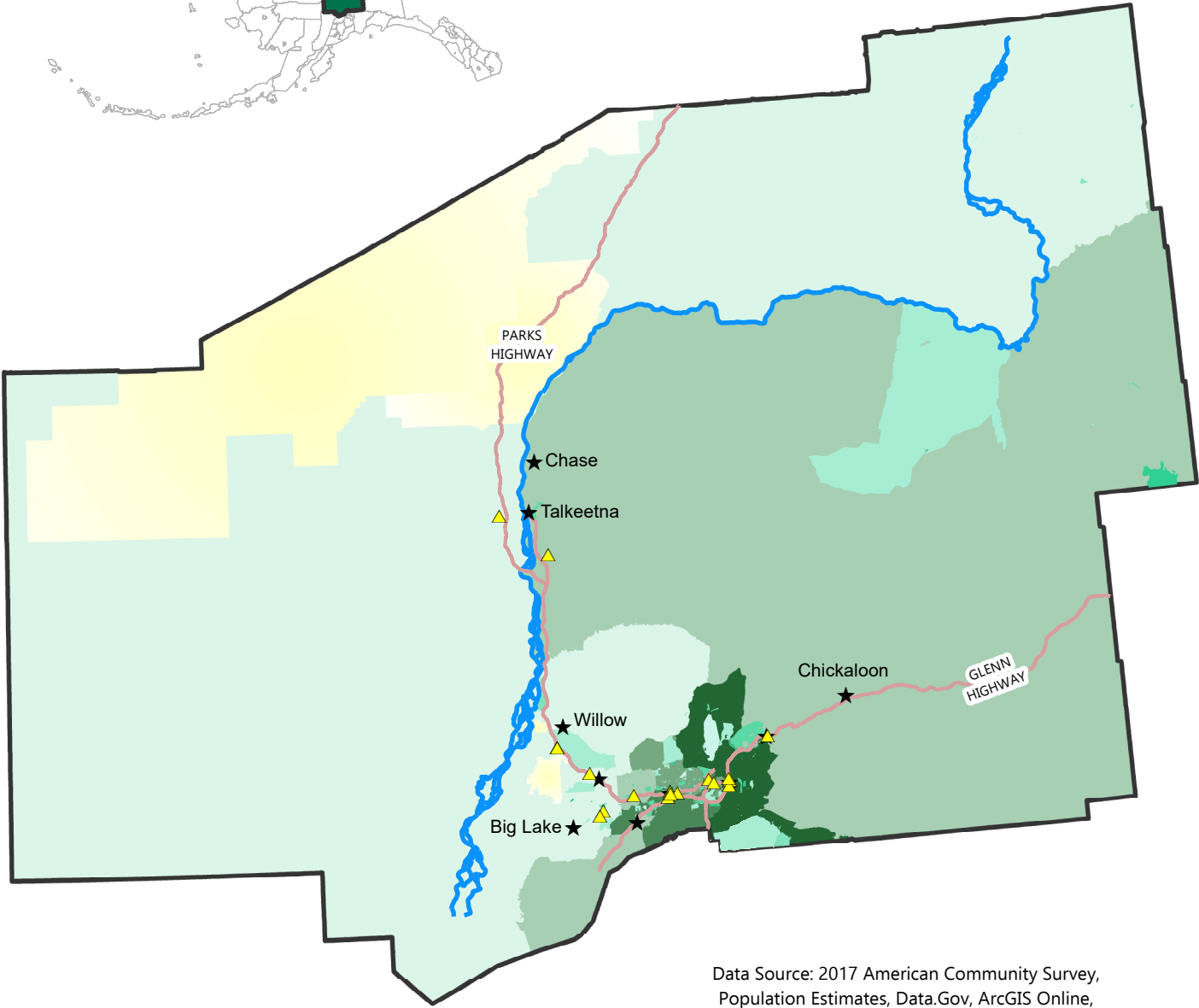
# Mat-Su Borough

## Food Pantries

Figure 8: Map of Food Pantries in Mat-Su

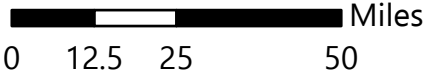


According to the 2017 ACS population estimates, the population of Mat-Su Borough is 101,135. Approximately 16% (16,358) of the population in Mat-Su is over 60 years old.



Data Source: 2017 American Community Survey, Population Estimates, Data.Gov, ArcGIS Online, 211 Alaska, LINKS/ARDC, Mat-Su Health Foundation

Map Created by Sarah Axe  
August 9, 2019





## Access

Almost all pantries are open for a limited number of hours and most are open only a few days a week. Only the Sutton pantry and Frontline Mission have evening hours. These limited opening times result in challenges for individuals to access services, especially older adults who may rely on family members who work to provide transportation.

## Transportation

As previously highlighted, transportation was identified as a primary barrier to accessing pantry services. Sunshine Transit is providing a partial solution in Upper Su by bringing individuals from Talkeetna, Trapper Creek, Willow, and Houston to the Upper Su Food Pantry once per week. However, there was acknowledgment from all pantry providers that many individuals have challenges getting to their services.

## Lack of Centralization

Each food pantry operates independently. In the survey of food pantries, almost all are purchasing food from the Food Bank of Alaska. Most of them also receive donations from local grocery stores: Walmart, Cubby's, Carr's and Three Bears were most frequently mentioned as donors. However, even with these contributions, most food pantries are using individual donations to purchase food in order to supplement the food that they receive so that they can meet demand. There are no coordinated food drives or a central location large enough to accept and distribute food at scale.

## RECOMMENDATIONS:

- Explore creation of a local collaborative food collection and distribution site
- Collaborate for community food drives and corporate partnerships.
- Explore if there are ways to extend or coordinate operating hours to increase access.

# Grocery Stores And Farmers' Markets

## Grocery Stores

The ability for older adults to access grocery stores depends on their location and transportation availability. In Upper Su, Cubby's is the primary grocery store, however, it is more expensive than stores in Wasilla and Palmer. Similarly, for residents of Glacier View and other rural areas there are very few grocery options. Both Sunshine Transit and Chickaloon Area Transit System are offering some transportation options to assist older adult access, however, these are limited. Participants in several focus groups expressed interest in exploring creation of a mobile grocery van program to address this.

## Farmers' Markets

The USDA supports the Seniors Farmers' Market Nutrition Program (SFMNP) which is designed to provide low-income older adults with access to locally grown fruits, vegetables, honey and herbs and increase the domestic consumption of agricultural commodities through farmers' markets, roadside stands, and community-supported agricultural programs. In Alaska, this program provides low-income older adults with coupons that can be exchanged for fresh Alaska-grown fruits, vegetables, fresh-cut herbs and honey at farmers' markets, and authorized farms and roadside stands.

Each eligible older adult receives six \$5.00 coupons that may be used from June 1 through October 31. Coupons for the SFMNP are provided to eligible low-income older adults through distribution agencies in areas with authorized farmers. The farmers send their coupons to United Way of Mat-Su. United Way of Mat-Su reports that this program is underutilized and each year they send back funds. When researchers asked farmers at Farmers' Markets in Wasilla and Palmer how well the program works for them, they reported that it is easy to report and be reimbursed and that they enjoy participating. Older adults are either not aware of the program or are not utilizing vouchers. Several organizations stated that they were not aware of the program. Upper Su programs said that they do not participate as there are no eligible farmers' markets in their area.



Table 16: SFMNP Income Eligibility Guidelines  
Effective from July 1, 2018 to June 30, 2019

Household Size	Annual Income	Monthly Income
1	\$28,083	\$2,341
2	\$38,073	\$3,173
3	\$48,063	\$4,006
4	\$58,053	\$4,838

SOURCE: Alaska Department of Health and Social Services, Division of Public Assistance, 2017-2019 SFMNP Income Eligibility Guidelines

## RECOMMENDATIONS:

- Explore the feasibility of a mobile grocery van.
- Publicize and maximize the use of the Senior Farmers' Market Nutrition Program.

# Funding For Senior Nutrition In Mat-Su

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## Key Findings:

- **The Nutrition, Transportation and Support Services (NTS) Grant funding for Mat-Su has grown slightly since 2017 but is the lowest per capita funding rate for any region in the state at \$33.33 per person age 60 and older.**
- The designation of the Mat-Su Borough as an urban area by the State Plan Advisory Committee to the Alaska Commission on Aging, impacts state funding available through the NTS Grant. Designating Mat-Su as rural would increase state investment in the area by more than \$100,000.
- In addition to the rural designation, ensuring the older adult community's maximum participation in the 2020 Census will be key to further maximizing Mat-Su's state allocation from the NTS Grant.
- Additional federal funding may be available for senior nutrition through Title XX of the Social Security Act which is currently focused on children's services in Alaska. Of the 52 states and territories that received Title XX funds in FY2016 (the most recent annual report available), 16 funded senior nutrition.
- State funding alone, even with potential increases, is not enough to fully fund senior nutrition services in Mat-Su.
- Outside of the Mat-Su Health Foundation and the Alaska Community Foundation, private funding for senior nutrition is minimal.
- By adopting a regional service approach, senior nutrition programs have an opportunity to successfully fundraise with individual donations.
- There is an opportunity for programs to maximize their participation in current senior nutrition programs including the Senior Farmers' Market Nutrition Program and the Emergency Food and Shelter Program.
- The change of focus of the Medicaid Waiver program from home-delivered meals to personal care attendant in-home prepared meals has decreased the opportunity for home-delivered meal providers to access these funds.

## Funding Landscape

A variety of funding sources exist and are available to Mat-Su programs to provide older adults with access to senior nutrition services. While many of these programs focus solely on adults age 60, or 65 and older (55 and older for Title VI programs), some are available for community members of all ages. In addition, many of these programs fund other services for older adults in addition to nutrition. For the purposes of this report, we will only focus on the nutrition services provided even though funding allocation amounts may include other services.

## Access to Prepared Meals

The following programs often fund a variety of services for older adults including prepared meals such as congregate meals where older adults, age 60 and older, can gather for a prepared meal. They also fund home-delivered meals otherwise known as Meals on Wheels.

Table 17: Nutrition, Transportation and Support Services (NTS) Grant

<b>Funding Source(s):</b>	Title III Older Americans Act – Grants for State and Community Programs on Aging, Alaska General Fund, and local match funds
<b>Administering Agency:</b>	Department of Health and Social Services (DHSS) – Division of Senior and Disabilities Services and Alaska Commission on Aging
<b>Nutrition Services Provided:</b>	Home-Delivered Meals, Congregate Meals, Nutrition Services Incentives Program (NSIP)
<b>Age:</b>	60+
<b>Other Requirements:</b>	Eligibility includes spouses and disabled dependents of eligible individuals, disabled adult in facility that serves congregate meals, volunteers that assist with meal service. Eligibility for home-delivered meals also includes homebound and congregate meal not available near residence.
<b>Providers in Mat-Su:</b>	Mat-Su Senior Services, Wasilla Area Seniors Inc., Upper Su Seniors
<b>FY20 Allocation to Mat-Su:</b>	\$427,655 (federal), \$220,045 (state) <sup>27</sup> \$134,792 (NSIP for MSSS and WASI in FY19)* <sup>28</sup>

NOTE: Allocations are not limited to nutrition services listed.

\* In FY20, the NSIP reimbursement payment dropped from \$1 per meal to \$0.70 per meal.

Table 18: Title VI Grants for Older Native Americans

<b>Funding Source(s):</b>	Title VI Older Americans Act – Grants for Older Native Americans
<b>Administering Agency:</b>	Administration for Community Living (federal)
<b>Nutrition Services Provided:</b>	Home-Delivered Meals, Congregate Meals
<b>Age:</b>	60+
<b>Other Requirements:</b>	Tribal organizations must represent at least 50 Native American* elders age 60 and over. Tribal organizations decide how to allocate funds and who qualifies as an older adult.
<b>Recipients in Mat-Su:</b>	Chickaloon Native Village, Knik Tribe, Southcentral Foundation***
<b>FY19 Allocation to Mat-Su:</b>	\$363,050 (A/B)**, \$23,443 (NSIP) <sup>29</sup>

NOTE: Allocations are not limited to nutrition services listed.

\*Includes American Indian, Alaskan Native, and Native Hawaiian populations.

\*\* Title VI Part A/B covers grants for Native Americans and Native Hawaiian programs and includes supportive services such as congregate and home-delivered meals, transportation, personal care, etc. Part C funding represents funding for caregiver support.

\*\*\* The Southcentral Foundation is included because its website states that it serves “Alaska Native and American Indian people living in Anchorage and the Matanuska-Susitna Borough, and nearby villages.”

Table 19: Home and Community-Based Medicaid Waivers

<b>Funding Source(s):</b>	Title XIX Social Security Act – Medicaid Waiver Program: Home and Community-Based Waiver Program
<b>Administering Agency:</b>	Department of Health and Social Services (DHSS) – Division of Senior and Disabilities Services
<b>Nutrition Services Provided:</b>	Home-Delivered Meals, Congregate Meals
<b>Age:</b>	21+
<b>Other Requirements:</b>	Meet Medicaid and level of care requirements
<b>Providers in Mat-Su:</b>	Mat-Su Senior Services, Wasilla Area Seniors Inc.
<b>FY15 Allocation to Mat-Su: *</b>	<b>\$51,800,000<sup>30</sup></b>

NOTE: Allocations are not limited to nutrition services listed.

\*This is the most recent year that funding was broken down by region.

Table 20: Emergency Food and Shelter Program (EFSP)

<b>Funding Source(s):</b>	Federal Emergency Management Assistance (FEMA), administered by United Way USA
<b>Administering Agency:</b>	United Way Mat-Su
<b>Nutrition Services Provided:</b>	Food, in the form of served meals or groceries
<b>Age:</b>	--
<b>Other Requirements:</b>	Needs based; local boards determine eligibility
<b>Providers in Mat-Su:</b>	Salvation Army, Wasilla Area Seniors Inc., Wasilla Food Pantry, Blood and Fire Ministries
<b>FY18 Funding for Food in Mat-Su: *</b>	<b>\$18,785.11<sup>31</sup></b>

\* This is the most recent year that funding was documented for Phase 35. Funding noted is for food, not necessarily senior nutrition. Total funding for Phase 35 was \$68,948. For Phase 36, the region has been awarded \$88,152.00 with an application deadline of 9/9/19.

## Access to Food Products

These programs fund a variety of services that provide food and groceries for adults age 60 and older.

Table 21: Commodity Supplemental Food Program (CFSP)

Funding Source(s):	Food and Nutrition Services (FNS) of the United States Department of Agriculture (USDA)
Administering Agency:	Department of Health and Social Services (DHSS)—Division of Public Assistance
Nutrition Services Provided:	Monthly USDA commodity food box
Age:	60+
Other Requirements:	Residency and income
Providers in Mat-Su:	Big Lake Food Pantry, Mat-Su Food Bank, Salvation Army (also delivers), Wasilla Area Seniors, Inc., Willow Community Food Pantry, Upper Su Food Pantry (also delivers)
FY19 Allocation: *	<b>\$130,438<sup>32</sup></b>

\*This grant is made to the Food Bank of Alaska and covers many regions in Alaska, one of which is the Mat-Su Borough. A specific breakout of Mat-Su funding was not included in the state grant report.

Table 22: USDA Food Program

Funding Source(s):	The Emergency Food Assistance Program (TEFAP) of the United States Department of Agriculture (USDA)
Administering Agency:	Department of Education & Early Development
Nutrition Services Provided:	Commodity foods
Age:	--
Other Requirements:	Income
Providers in Mat-Su:	Upper Su Food Pantry, Mat Su Food Bank, Willow Community Food Pantry
FY 19 Allocation for Food: *	<b>\$614,466<sup>33</sup></b>

\*This allocation is made to the State of Alaska for food and does not include administrative funds. Funding breakdown by borough was not available in the USDA report.



Table 23: Senior Farmers' Market Nutrition Program

Funding Source(s):	Food and Nutrition Services (FNS) of the United States Department of Agriculture (USDA)
Administering Agency:	Department of Health and Social Services (DHSS)—Division of Public Assistance and United Way Mat-Su
Nutrition Services Provided:	Six \$5 coupons that can be used at farmers' markets and farm stands selling Alaska-grown produce
Age:	60+
Other Requirements:	Income
Providers in Mat-Su:	Mat-Su Senior Services, Wasilla Area Seniors Inc.
FY19 Allocation to Mat-Su:	<b>\$65,23528<sup>34</sup></b>

## Access to Cash or Cash-Equivalent Benefit

These programs provide cash or a cash-equivalent benefit that allow older adults to purchase food. Not all benefits are limited to food purchases.

Table 24: Food Stamp Program

Funding Source(s):	Supplemental Nutrition Assistance Program (SNAP) of the US Department of Agriculture
Administering Agency:	Department of Health and Social Services (DHSS)—Division of Public Assistance
Nutrition Services Provided:	Funds for food provided on an Electronic Benefits Transfer (EBT) card
Age:	--
Other Requirements:	Income
Providers in Mat-Su:	N/A – this benefit is provided to individuals.
FY18 Benefits in Mat-Su:*	<b>Caseload: 5,865</b> <b>Benefit Amount: \$1,803,497<sup>35</sup></b>

NOTE: Information from focus groups indicated that many older adults choose not to apply for the Food Stamp Program because the amount of paperwork and the reauthorization process are not worth the minimum benefit of \$19 that many receive.

\*This data includes all age groups in Mat-Su.

Table 25: Veteran Directed Care Program

Funding Source(s):	Veteran Directed Care Program - Department of Health and Human Services (HHS) in partnership with the Veteran's Health Administration (VHA)
Administering Agency:	Alaska Veterans Affairs and Aging and Disability Resource Centers (ADRCs) in certain communities
Nutrition Services Provided:	Discretionary benefit. Services available for purchase include home-delivered meals.
Age:	65+
Other Requirements:	Veteran
Providers in Mat-Su:	This benefit provided to individuals via LINKS Aging and Disability Resource Center (ADRC) was only recently begun in Mat-Su.

Table 26: Senior Benefit Program

Funding Source(s):	Alaska General Fund
Administering Agency:	Department of Health and Social Services (DHSS)—Division of Public Assistance
Nutrition Services Provided:	Discretionary cash benefit
Age:	65+
Other Requirements:	Low-to-moderate income
Providers in Mat-Su:	N/A
FY18 Benefits in Mat-Su:	<b>Average Monthly Caseload: 1,611</b> <b>Average Monthly Benefit Amount: \$225,918<sup>36</sup></b> <b>Average Monthly Benefit per Individual: \$140</b>

NOTE: This program was originally vetoed by the Governor in July 2019. It was reinstated in August 2019 for one year.

Table 27: Adult Public Assistance

Funding Source(s):	Alaska General Fund
Administering Agency:	Department of Health and Social Services (DHSS)—Division of Public Assistance
Nutrition Services Provided:	Discretionary cash benefit
Age:	65+, younger if blind or disabled
Other Requirements:	Severe and long-term disabilities that impose mental and physical limitations on their day-to-day functioning
Providers in Mat-Su:	N/A – this benefit is provided to individuals.
FY18 Benefits in Mat-Su:	<b>Average Monthly Caseload: 2,702</b> <b>Average Monthly Benefit Amount: \$700,522<sup>37</sup></b> <b>Average Monthly Benefit per Individual: \$259</b>

## Other Funding Sources

In addition to the specific programs mentioned above, local governments and private foundations also provide some funding for senior nutrition services. These sources do not fund specific programs like the ones identified above. Rather they are available through requests or grant applications made by a provider directly to the funding source. For instance, at least one provider receives funding for its Meals on Wheels program from local community councils, and multiple providers receive private foundation grants for prepared meals and food pantry services.

The top three funders for senior nutrition services in the Mat-Su are:

Table 28: Top Three Funders for Senior Nutrition in Mat-Su

Senior Nutrition Program	United Way of Mat-Su (2019) <sup>38</sup>	Mat-Su Health Foundation (2019) <sup>39</sup>	Alaska Community Foundation (2017) <sup>34</sup> <sup>40</sup>
Upper Su Seniors	\$5,000	\$61,672	
Mat-Su Food Bank	\$2,000		
Upper Su Food Pantry	\$4,500		\$10,384
Sunshine Transit	\$5,000		
Salvation Army	\$5,000		
Wasilla Area Seniors Inc. (WASI)	\$5,000	\$112,541	
Mat-Su Senior Services (Palmer)		\$374,644	
Frontline Mission			\$10,000
TOTAL	\$26,500	\$548,857	\$20,384

NOTE: 2017 is the most recent report available for Alaska Community Foundation. Funding is for program and general operating support.

The following also provide funding to senior nutrition programs in the Mat-Su Borough:

- Rasmuson Foundation – \$19,947 in 2018<sup>20</sup>
- Jessica Stevens Foundation - \$2,000 in 2018<sup>21</sup>
- Matanuska Electric Association (MEA) Charitable Foundation - \$12,000 in 2017<sup>22</sup>
- Talkeetna Community Council
- Susitna Community Council
- Mat-Su Borough Human Services Matching Grant

**Outside of the Mat-Su Health Foundation, there are no significant local funding sources for senior nutrition. In addition, only a small number of local organizations give to the cause.** That is not to say that those are the only funding sources available. A review of private foundations that are located in or fund in Alaska showed a number of potential funding prospects for senior nutrition services in the Mat-Su. While not all foundations will choose to support the programs, investment of effort should be made to develop relationships with these funders, educate them about the need and services, and submit grant applications.

A list of identified private foundations that may be able to fund senior nutrition in the Mat-Su is listed in Appendix E. These foundations have been prioritized based on likelihood to fund the issue and likelihood to fund in the area.

## Federal Funding Opportunities

**Title XX of the Social Security Act** is also known as the Social Services Block Grant (SSBG) and it is directed towards achieving economic self-sufficiency; preventing or remedying neglect, abuse, or the exploitation of children and adults; preventing or reducing inappropriate institutionalization; and securing referrals for institutional care, where appropriate. Among the allowable services included in this funding are home-delivered and congregate meals to elderly and vulnerable populations.

States are allocated their share of funding based on a nationwide formula, each submitting a plan specifying how the funds will be used. Not all states offer the same services or have the same eligibility criteria. A review of Alaska's use of Title XX funds shows that in FY19 SSBG funds were estimated at \$3,625,187 and TANF transfers to SSBG were estimated at \$4.4 million. This grant is administered by the Department of Health and Social Services (DHSS) – Office of Children's Services and per its plan, all funds are directed toward social services and support systems to prevent and remedy child abuse and neglect.<sup>23</sup> According to records on SSBG allocations by the Administration for Children and Families, the state of Alaska has not allocated any SSBG funding to elderly and vulnerable populations between 2010, the earliest recorded report, and 2016, the most recently reported data.<sup>24</sup>

Of the 52 states and territories that received SSBG funding in FY2016, nine funded congregate meals and home-delivered meals, and an additional seven funded home-delivered meals only. Percentages of SSBG funding used for senior nutrition ranged from 0.4 percent to 21.7%. A table of FY2016 SSBG funding for senior nutrition by state/territory, can be found in Appendix G.<sup>25</sup>

### RECOMMENDATION:

- The Mat-Su Health Foundation should consider advocating that the State of Alaska include vulnerable and elderly populations, specifically congregate and home-delivered meals, in its Title XX (Social Services Block Grant) funding allocation.

## State Funding Opportunities

The Nutrition, Transportation and Support Services Grant is primarily a combination of Title III funding from the Older Americans Act and state funding. It is administered jointly by the Alaska Commission on Aging (ACoA) and the Division of Senior and Disabilities Services (DSDS) on behalf of the Department of Health and Social Services, Alaska's State Unit on Aging. Through recommendations made by the Alaska Commission on Aging's State Plan Advisory Committee (generally every four years), the ACoA reviews and recommends approval of the State Plan to the Department of Health and Social Services (DHSS), the Governor, and the Administration on Community Living (ACL). One part of the State Plan includes the funding formula used to distribute funding to regions across the state. Federal funding allocation is based on historical percentages and state funding allocations are based on the results of this formula.

For FY2020-FY2023 the funding formula includes five factors that are weighted and calculated to distribute the funds:

- Total Senior Population (age 60 and older)
- Minority Senior Population (Minority Factor)
- Senior Population at or Below the Poverty Level (Poverty Factor)
- Senior Population 80 and older (Frail Factor)
- Census Area Designation (Rural Factor)

The most discussed factor in the Mat-Su is the Census Area Designation or Rural Factor. To determine this, the Alaska Commission on Aging begins by using the Office of Management and Budget (OMB) designation. Then an Advisory Committee can adjust those designations based on local geography. For the purposes of this funding formula, a metropolitan designation by OMB would be considered urban by the committee and have a weight of zero, a micropolitan designation by OMB would be considered rural and weighted at 11.25, and a designation of "neither" would be considered remote and weighted at 22.5.

Currently, the Mat-Su Borough is considered metropolitan by the OMB and thus urban for this funding formula. Practically, that means it gets a score of “0” for this factor and as a result, its percentage of the state funding is 9.9 percent or \$220,044.50, compared to Mat-Su’s 14.4 percent of the state population. When reviewed on a per capita basis, the Mat-Su Borough receives \$33.33 in total funding per capita (older adults age 60 and older) making it the lowest for any region in the state.

Table 29: FY2020-FY2023 NTS Per Capita Funding  
2018 Population of Older Adults Age 60 and Older<sup>26</sup>

Funding Region	Census Areas in Region	Base Allocation (Federal) Per Capita (\$/#)	State General Fund Allocation Per Capita (\$/#)	Total Funding Per Capita (\$/#)
7	Bristol Bay, Dillingham, Kodiak, Lake & Peninsula	\$98.89	\$24.88	\$123.77
8	Nome, Northwest Arctic	\$89.32	\$33.51	\$122.83
1	Bethel, Kusilvak	\$72.68	\$34.11	\$106.80
3	North Slope Borough	\$70.11	\$30.01	\$100.13
6	Aleutians East, Aleutians West	\$36.12	\$31.89	\$68.01
9	Prince of Wales, Sitka, Skagway, Haines, Hoonah/ Angoon, Juneau, Ketchikan, Petersburg, Wrangell, Yakutat	\$42.26	\$23.12	\$65.38
5a	Kenai Peninsula, Valdez/Cordova	\$39.65	\$19.64	\$59.29
2	Fairbanks NSB, SE Fairbanks, Denali, Yukon-Koyukuk	\$30.48	\$14.42	\$44.89
4	Muni of Anchorage	\$23.38	\$13.04	\$36.43
<b>5b</b>	<b>Mat-Su</b>	<b>\$22.01</b>	<b>\$11.32</b>	<b>\$33.33</b>
Total		\$524.90	\$235.96	\$760.86

If, in its review, the Advisory Committee determines that Mat-Su is indeed rural, then it would receive a higher score, changing its state funding allocation to 15.1 percent or \$336,472.33, a difference of \$116,327.83, or an additional \$5.99 per capita.

In its draft state plan, the Committee had considered adjusting the designation for the Mat-Su to rural but decided to wait until after the 2020 Census to allow for more accurate data and a more thorough public process.

In addition to addressing the statewide funding formula, accurate population counts play an important role in the weighted scores for each borough. As a result, **the upcoming Census will be an important event that will affect future state funding.**

## RECOMMENDATIONS:

- The Mat-Su Health Foundation and the Coalition of Mat-Su Senior Centers should advocate for a change in the Mat-Su Borough’s Rural Factor designation of the Alaska Intrastate Funding Formula for the NTS Grant.
- Mat-Su Senior programs should actively engage in ensuring that all older adults in Mat-Su are counted in the 2020 census.

## Medicaid Choice Waiver Program

For many years, home-delivered meal programs received a significant number of direct referrals for home-delivered meals through the Medicaid Choice Waiver Program. The meals were reimbursed at a rate, approximately \$22 per meal, that was higher than other reimbursement rates and adequately covered all costs. However, beginning in approximately 2013, there was a move to utilize these funds more for personal care attendants who can also grocery shop and prepare meals. This shift in funding has resulted in home-delivered meal providers losing much of what was a consistent and regular source of funding.

## Local Funding Opportunities

Part of an organization's healthy revenue plan is to have diversified funding streams so that a drastic change in one funding source does not severely cripple an organization and the services it provides. The two largest nutrition programs in Mat-Su have a variety of revenue sources, but the largest sources appear to be program revenue and government grants. For both, program revenue appears to be attributed to rent from housing properties which covers expenses but may not provide additional profit for the organization to use. Revenue from private donations appeared low. Based on revenue noted in each organization's 2017 990s, fundraising events, contributions and grants accounted for one percent of total revenue for one organization and 14.5 percent for the other. However, when just looking at fundraising revenue relative to their nutrition budgets, fundraising accounted for 33 percent and 22 percent of each organization's revenue, respectively. Neither organization has a staff position dedicated to raising private funds for senior nutrition and other services.

A third nutrition provider's budget shows a 50-50 split between program revenue and private donations. This organization has a volunteer that is dedicated to writing grants and soliciting donations. However, even with dedicated fundraising, the organization still operates at a deficit and must use reserve funds to cover its annual expenses.

For all organizations, identified fundraising appeared to rely on grants and events. A review of foundations both in Alaska and outside the state identified a number that appear to be willing to fund senior nutrition programs. Dedicated staff for fundraising would allow individual organizations and perhaps the region an opportunity to cultivate additional grant prospects that may not yet fund senior nutrition services in the Mat-Su Borough.

For all organizations, there seems to be an opportunity to expand individual fundraising. Currently, programs accept donations for meals as part of their participation in the NTS grants, although donations are not required to receive a meal. It does not appear that the programs have an annual campaign program targeting individuals outside of older adult meal donations and special events. What is not clear is whether little has been attempted due to funding and time constraints or whether the community has not yet developed a culture of philanthropy.

Because of the size of individual communities, any individual fundraising initiative will be more successful if it occurs on regional basis. By adopting a regional service approach, senior nutrition programs will have an opportunity to successfully fundraise with individual donations. Regardless, systematically reaching out for community support through a combined mailing or a community giving day will be necessary if programs plan to grow to meet the increased need.

## RECOMMENDATIONS:

- The Mat-Su Health Foundation should actively support developing a community of giving in Mat-Su. This support could include participation in and/or matching support for community giving events.
- The Coalition of Mat-Su Senior Centers should consider collaboratively fundraising, which could include:
  - » Sharing a development director.
  - » Sharing the costs and benefits of direct mail solicitations to individuals in Mat-Su service area.
  - » Collaboratively submitting grants for senior nutrition services.



# Conclusions And Recommendations

More than 1,200 older adults in Mat-Su are currently food insecure and this population is expected to grow by 68 percent to 2,117 by 2030. The timing for this assessment is apt because enhancements to the system now can prepare the community for the significant increase in older adults, especially those who need critical services, in future years. Ultimately, the goal is to enhance the current senior nutrition system so that delivery of all necessary services is solid, sustainable, and most importantly, scalable.

When considering a comprehensive senior nutrition system, six elements are necessary for the system to offer:

- The right types of services,
- Enough of those services to meet the need,
- Good quality services,
- Access to those services,
- A sustainable funding model for those services, and
- Open transfer of communication among providers of those services.

Based on the results of our work, the senior nutrition system in Mat-Su has many of these elements, but, as with any system, improvements can be made.

**The Mat-Su Borough has the right types of senior nutrition services available to the older adult population.**

When considering the different categories of abilities for older adults to access nutrition options, Mat-Su offers services that address both the transportation needs and the cooking abilities of older adults.

Categories of Ability to Access Senior Nutrition Services

Can Cook, Have Transportation	Can Cook, NO Transportation
Grocery/Convenience Stores Food Banks/Pantries Food Boxes Congregate Meal Programs Congregate Meal Programs	Delivered Food Boxes*
CANNOT Cook, Have Transportation	CANNOT Cook, NO Transportation
Congregate Meal Programs	Home-Delivered Meal Programs

\*Delivery of food boxes is not done by all organizations and may not be accessible to all older adult Mat-Su residents.

**There are not enough services to fully cover the need in the Mat-Su Borough.**

While services and transportation needs are more regularly available in the Wasilla-Palmer area, many parts of Mat-Su do not have access to services, and when they do, they are not regularly available.

### Summary of Service Coverage for Senior Nutrition Services in Mat-Su

Can Cook, Have Transportation	Can Cook, NO Transportation
<ul style="list-style-type: none"> <li>• Not enough service in Upper Su or eastern part of the borough.</li> <li>• Only one congregate meal per week at Upper Su Seniors, Inc and Chickaloon Native Village.</li> <li>• Grocery stores are less available and more expensive outside of Wasilla and Palmer.</li> <li>• There are probably enough food pantries, but their limited hours and lack of transportation inhibit access.</li> </ul>	<ul style="list-style-type: none"> <li>• Not enough. Delivered food boxes only reach approximately 39-59 individuals.</li> </ul>
CANNOT Cook, Have Transportation	CANNOT Cook, NO Transportation
<ul style="list-style-type: none"> <li>• Not enough service in Upper Su or eastern part of the borough.</li> <li>• Only one congregate meal per week at Upper Su Seniors, Inc and Chickaloon Native Village.</li> </ul>	<ul style="list-style-type: none"> <li>• Not enough.</li> <li>• In Upper Su, meals are only delivered three days per week. In other areas, based on distance hot meals may only be delivered two or three times per week with frozen meals for the other days.</li> <li>• Many geographic areas of the borough do not receive service.</li> </ul>

#### For the most part, senior nutrition services offer good quality.

Satisfaction surveys, when offered, indicate that older adults enjoy the congregate meals and the food pantries. However, issues of choice and cultural and dietary needs are areas of improvement for all programs.

### Summary of Service Quality for Senior Nutrition Services in Mat-Su

Can Cook, Have Transportation	Can Cook, NO Transportation
<ul style="list-style-type: none"> <li>• Older adults would like greater variety and want food to better meet cultural and dietary needs.</li> </ul>	<ul style="list-style-type: none"> <li>• Food in boxes is of good quality but recipients cannot choose the food and so may have items that they do not like, and they may not know how to cook them.</li> </ul>
CANNOT Cook, Have Transportation	CANNOT Cook, NO Transportation
<ul style="list-style-type: none"> <li>• Older adults would like greater variety and want food to better meet cultural and dietary needs.</li> </ul>	<ul style="list-style-type: none"> <li>• Food is of good quality but there is not enough choice and meals are not meeting all cultural and dietary needs, especially for individuals with soft food needs.</li> </ul>

#### Access to services is one of the biggest hurdles faced by providers in the senior nutrition system.

Many of the access issues focus on the lack of reliable public transportation to deliver older adults to needed services. Programs often expend their resources to transport older adults to congregate meal programs and other services. When transportation is available, services are not always available or only available during limited times. In many cases, terrain makes serving certain areas extremely challenging. Ultimately transportation availability meets two important needs: access to nutrition and access to social interaction.

## Summary of Service Access for Senior Nutrition Services in Mat-Su

Can Cook, Have Transportation	Can Cook, NO Transportation
<ul style="list-style-type: none"> <li>Many food pantries are small and have very limited opening hours and can only be accessed on a limited basis, generally once per month.</li> </ul>	<ul style="list-style-type: none"> <li>All programs report a need for more investment in transportation options to assist older adults in accessing grocery stores, food pantries, and congregate meal sites. Two organizations are currently delivering food boxes. However, they are limited on their ability to provide this service and have limited geographic scope.</li> </ul>
CANNOT Cook, Have Transportation	CANNOT Cook, NO Transportation
<ul style="list-style-type: none"> <li>All programs report a need for more investment in transportation options to assist older adults in accessing congregate meal sites as well as supporting the overall programs.</li> </ul>	<ul style="list-style-type: none"> <li>Certain geographic areas have limited or no coverage including:               <ul style="list-style-type: none"> <li>» South of Trapper Creek and North of Willow</li> <li>» North of Talkeetna, especially Chase</li> <li>» End of KGB Road</li> <li>» Caswell Lake</li> <li>» Glacier View</li> <li>» Knik River Road</li> <li>» Butte</li> </ul> </li> </ul>

**Government funding will not be enough to sustain senior nutrition services to meet the current or future need; additional private investment will be a necessity.**

Programs receive funding from a variety of public sources to offer various senior nutrition services. A few programs such as the Commodity Supplemental Food Boxes and the Senior Farmers' Market voucher program report having additional capacity in their programs for more older adult clients. However, for many programs, especially those that prepare meals for older adults, government funding is not enough and must be supplemented by private donations. Even with changes to the NTS funding formula or the addition of Title XX funding, it is unlikely that government funding can keep pace with current need, much less future. In addition, an increased investment in the provision of senior nutrition also means an increased investment in transportation services to help older adults access that food.

**While current senior nutrition providers appear open to collaboration and regional service provision, past experiences with competition for funding and clients may make initial open transfer of communication challenging.** This will mean that a process of trust building and determination of shared goals and vision will need to take place. This will be best done in a facilitated conversation.

Overall, Mat-Su is fortunate to have senior nutrition providers who can provide services to meet the range of nutrition needs of older adults. Its current service gap is of manageable size and can be addressed with better coordination and increased private funding. However, with the impending growth of the older adult population, there will need to be better coordination and less competition in the provision of senior nutrition services and the fundraising needed to make that possible. We believe Mat-Su has the people and programs in place to make this happen.

- Providers are in place to serve the continuum of nutrition services for older adults.
- There is commitment from leadership to improve the overall system.
- Leadership transitions provide an opportunity to make changes.
- There is a diversity of strengths among the senior nutrition providers which provides an opportunity for peer learning and best practice sharing.
- There are opportunities to better engage the local community for volunteerism and local fundraising.

As a result of these conclusions, we offer the following recommendations which fall into six categories:

1. Conduct regional coordination and planning for senior nutrition programs in Mat-Su.
2. Increase Investment in senior nutrition programs.
3. Expand awareness of senior nutrition programs.
4. Improve program quality.
5. Increase access to senior nutrition programs.
6. Engage the community in supporting senior nutrition.

Within these broad categories, specific recommendations were made throughout the report.



## **1. Conduct Regional Coordination and Planning for Senior Nutrition Programs in Mat-Su.**

There are currently two main coordinating bodies that impact senior nutrition. The Mat-Su Food Coalition that focuses on all food related issues in the region and the Coalition of Mat-Su Senior Centers. Since the Coalition of Mat-Su Senior Centers is focused on specifically on senior nutrition and currently engages leadership from its respective organizations, it is recommended that the Coalition of Mat-Su Senior Centers be enhanced to include leadership from all related senior nutrition programs in Mat-Su and serve as the core entity for coordination and planning of senior nutrition. This coalition will need to formally determine:

- Agreed vision and purpose,
- Process for decision making,
- Leadership structure,
- Scope,
- Areas of focus,
- Short-term and long-term projects that can be worked on together, and
- Measures that will be used to determine success.

Because of the potential complexity of developing a regional system and historic competition among programs, an independent, outside facilitator should be engaged to lead them in this process.

Other recommendations related to regional coordination:

- Strengthen the coordination of all senior nutrition programs to provide greater public awareness, volunteer engagement, fundraising, and advocacy.
- Create a common screening and intake tool and explore a common database to reduce the number of times individuals are asked to share personal information.
- Invest in ADRC's ability to provide screening and referral
- Explore and share best practices for data collection and program management.
- Identify technology that can easily be used to track and manage volunteers.
- Determine how to provide community level reports to demonstrate the impact of all services.
- Explore creation of a local collaborative food collection and distribution site.

Home-delivered meal providers specifically:

- Explore a structure such as Meals on Wheels Mat-Su whereby all home-delivered meal providers work together to achieve common goals and identify opportunities for alignment such as bulk vehicle or food purchases or vehicle maintenance agreements and incorporation of best practices.
- Create a plan to ensure all residents in need of home-delivered meals, receive access to a minimum of one hot meal five days a week.
- Establish service areas and determine if there is a more efficient way to deliver services. (Any changes in service should be made through client attrition so that no new clients are accepted outside service areas and current clients can continue to receive service.)
- Review the unserved areas and identify a plan for serving them.
- Explore feasibility of participation in Medicare Advantage Programs.

## **2. Increase Investment in senior nutrition programs.**

- Senior nutrition programs and the Mat-Su Health Foundation should advocate collectively to increase state resources for senior nutrition in Mat-Su.
- The Mat-Su Health Foundation and the Coalition of Mat-Su Senior Centers should advocate for a change in the Mat-Su Borough's Rural Factor designation of the Alaska Intrastate Funding Formula for the NTS Grant.
- The Mat-Su Health Foundation should consider advocating that the State of Alaska include vulnerable and elderly populations, specifically congregate and home-delivered meals, in its Title XX (Social Services Block Grant) funding allocation.
- Senior nutrition providers should adopt a regional approach to private and corporate fundraising and volunteer engagement within the Mat-Su Borough, which could include:
  - » **Sharing a development director.**
  - » **Sharing the costs and benefits of direct mail solicitations to individuals in Mat-Su service area.**
  - » **Collaboratively submitting grants for senior nutrition services.**
- Senior nutrition providers should collaborate for community food drives and corporate partnerships.
- Senior nutrition programs should actively engage in ensuring that all older adults in Mat-Su are counted in the 2020 census.
- The Mat-Su Health Foundation should actively support developing a community of giving in Mat-Su. This support could include participation in and/or matching support for community giving events.
- The Mat-Su Health Foundation should invest in expanding transportation options.
- The Mat-Su Health Foundation should make a long-term investment in Connect Mat-Su.
- Home-delivered and congregate meal providers should review and identify their full cost of providing a meal so that they can accurately identify what additional investment is required.

## **3. Expand awareness of senior nutrition programs.**

- Senior nutrition providers should create a plan for ensuring that all eligible older adults are aware of and able to access senior nutrition programs.
- Ensure that older adults are aware of the congregate meal programs.
- Senior nutrition providers should publicize and maximize the use of the Senior Farmers' Market Nutrition Program.
- Mat-Su Health Foundation and senior nutrition providers should optimize and publicize Connect Mat-Su.
- Home-delivered meal providers should jointly participate in community awareness such as the national March for Meals, coordinated by Meals on Wheels America, to increase community awareness about senior nutrition, recruit volunteers, and engage local businesses.
- Provide volunteer drivers with a metallic car sticker that indicates they are providing Meals on Wheels.
- Senior nutrition providers should partner with local businesses to consider promotional opportunities such as sponsoring meals or wrapping all organizational vehicles with their information.
- Utilize current participants and volunteers as program ambassadors. Arm them with information that they can share with their peers and family members.

## **4. Improve program quality.**

- Home-delivered meal and congregate meals providers should identify ways to enhance meal choice so that therapeutic, medical, and culturally appropriate meals can be provided.
- Senior nutrition providers should engage and invite multi-generational community members to the meals. It was noted that Chickaloon Native Village is already doing this and could serve as a model.
- Senior nutrition providers should provide opportunities for older adults to learn how to cook the foods they are provided.
- Mat-Su Health Foundation should explore the feasibility of a mobile grocery van.

## **5. Increase access to senior nutrition programs.**

- Senior nutrition providers should ensure that all eligible older adults are signed up for CFSP and TEFAP.
- Create a transportation plan to assist older adults' ability to access senior nutrition.



**6. Engage the community in supporting senior nutrition.**

- Centralize or coordinate recruitment of volunteers (volunteers are often the first steps to cultivating donors).
- Hold joint volunteer appreciation celebrations.

All the issues identified in this report can be addressed with coordination, planning, and deeper investment. Mat-Su has the assets in place to address the nutrition needs of its older adults.

## Appendix A: Endnotes

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- 1 Ziliak, J. and C. Gundersen. 2019. The State of Senior Hunger in America 2017: An Annual Report. Report submitted to Feeding America.
- 2 2013-2017 American Community Survey (ACS) 5-year Estimate, Demographic Profile for the Matanuska-Susitna Borough
- 3 2013-2017 ACS, Demographic Profile for the State of Alaska
- 4 Comparison of 2013-2017 ACS to 2006-2010 ACS 5-Year Estimate, Demographic Profile for the Matanuska-Susitna Borough and the State of Alaska
- 5 Alaska Department of Labor and Workforce Development, Alaska Population Projections 2017 to 2045, Mat-Su Borough/Census Area
- 6 2016 Senior Environmental Scan
- 7 2013-2017 ACS, Demographic Profile for the Matanuska-Susitna Borough, Race Alone or in Combination
- 8 Comparison between 2011-2015 and 2013-2017 ACS, Demographic Profile for the Matanuska-Susitna Borough, Race Alone or in Combination.
- 9 2013-2017 ACS 5-Year Estimate, Demographic Profile for the Matanuska-Susitna Borough, Race alone or in combination for American Indian and Alaska Native
- 10 2011-2015 ACS, Demographic Profile for the Matanuska-Susitna Borough, Race Alone or in Combination
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- 17 Evaluation of Dine-Out Programs. Prepared by Suburban Area Agency on Aging (SAAA) and Community Nutrition Network. August 9, 2000. Contact: Diane Slezak, Deputy Director, Suburban Area Agency on Aging: 708-383-0258, [diane.slezak@s3a.com](mailto:diane.slezak@s3a.com)
- 18 Commodity Supplemental Food Program. (n.d.). Retrieved from <http://dhss.alaska.gov/dpa/Pages/nutri/csfp/default.aspx>
- 19 <http://dhss.alaska.gov/dpa/Documents/dpa/programs/Nutrition/CSFP/CSFP-Application.pdf>
- 20 <https://www.rasmuson.org/grants/past-grantmaking/>. Search by Southcentral Region in 2018.
- 21 <https://jessicastevenescf.org/grants/>
- 22 Mat-Su Electrical Association Charitable Foundation, 2017 Form 990 Public Redacted, Schedule O -Supplemental Information, Return Reference – List of Grants and Similar Amounts Paid (Part I, Line 10)
- 23 State of Alaska Title XX – Social Services Block Grant Pre-Expenditure Report for State Fiscal Year 2019, Office of Children’s Services, Department of Health and Social Services, p. 1.

- 24 Social Services Block Grant Annual Report (FY2010 – FY2016 individual reports), Administration for Children and Families, Office of Community Services Division of Social Services, State Data Pages (locations vary). These reports can be found at: <https://www.acf.hhs.gov/ocs/resource/ssbg-annual-reports>
- 25 Administration for Children & Families, Office of Community Services Division of Social Services, Social Services Block Grant FY2016 Annual Report, State Data Tables, pp. 91-143.
- 26 State of Alaska, Department of Labor and Workforce Development, Research and Analysis, 2018 Population Estimates by Borough, Census Area, and Economic Region
- 27 Draft Alaska State Plan for Senior Services 2020-2023 Appendices, State of Alaska, Department of Health and Social Services, Alaska Commission on Aging, Appendix B, p. 36.
- 28 Email from Kristin Cox, Health Program Manager, Department of Health and Social Services, Division of Senior and Disabilities Services
- 29 Administration for Community Living FY2019 Annual Title VI Part A/B, Part C, and NSIP Cash Awards (By Region)
- 30 Alaska Medicaid 2015 Annual Report, State of Alaska, Department of Health and Social Services, HCB Expenditures, pp. 62-64.
- 31 Interview with Stephani Allen, Executive Director, United Way of Mat-Su, July, 16, 2019.
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- 34 FY2019 Operating Grants, State of Alaska Department of Health and Social Services, p. 123.
- 35 Statewide Profile SFY 2018, Alaska Department of Health & Social Services, Division of Public Assistance, Average Monthly Caseloads & Benefits by Census Area, p.3
- 36 Ibid.
- 37 Ibid.
- 38 <http://unitedwaymatsu.org/wp-content/uploads/2019/07/2018-Impact-Grantees.png>
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# Appendix B: Detailed Methodology

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## METHODOLOGY

### Demographics Research

Multiple sources were used to research the demographic trends and understand the challenges accessing senior nutrition within the Mat-Su Borough. These include:

- American Community Survey [https://factfinder.census.gov/faces/nav/jsf/pages/community\\_facts.xhtml](https://factfinder.census.gov/faces/nav/jsf/pages/community_facts.xhtml)
- The State of Alaska Department of Labor and Workforce Development reports <http://live.laborstats.alaska.gov/pop/>
- United States Department of Agriculture (USDA) Economic Research Service (ERS) “Food Access Research Atlas Data Download 2015” <https://www.ers.usda.gov/data-products/food-access-research-atlas/download-the-data/>
- USDA ERS Food Access Research Atlas Documentation <https://www.ers.usda.gov/data-products/food-access-research-atlas/documentation/>
- Mat-Su Senior Environmental Scan <http://www.healthymatsu.org/Learning/MSHF%20Reports/Senior-Scan-2016.pdf>
- MSB Coordinated Human Services Transportation Plan 2018-2022 [http://www.healthymatsu.org/images/events/20181206%20Coordinated%20Human%20Services%20Transportation%20Plan\\_Final%20Adopted.pdf](http://www.healthymatsu.org/images/events/20181206%20Coordinated%20Human%20Services%20Transportation%20Plan_Final%20Adopted.pdf)
- 2016 Community Health Needs Assessment Supplemental Data Resource <http://www.healthymatsu.org/Learning/MSHF%20Reports/2016-CHNA-supdata.pdf>
- Alaska State Plan for Senior Service FY 2020-2023 Draft [http://dhss.alaska.gov/acoa/Documents/ACoA\\_StatePlan\\_FY2020-2023\\_draft.pdf](http://dhss.alaska.gov/acoa/Documents/ACoA_StatePlan_FY2020-2023_draft.pdf)
- Alaska Economic Trends <http://labor.alaska.gov/trends/jun19.pdf>

The following limitations should be noted. First, this list of sources may not be exhaustive. Other reports may exist that discuss demographics and challenges for the senior population in Mat-Su. Second, the most recent data available was used at the time research was conducted. More current data may be available by the time this report is released.

### Programs and Funding Research

Together with the Mat-Su Health Foundation (MSHF), we identified a group of direct senior nutrition service providers and ancillary service providers. We conducted website research to learn more about each provider and then scheduled telephone interviews to learn more about the services they offer including their service area, the type of food they provide, and the number of people that utilize their service. Additional research was conducted using provider 990s to determine funding levels and types of funding that each provider was accessing. In some instances, follow up calls were made to providers to get more information on finances and funding. In other instances, additional information was gathered during in-person site visits.

### Mapping

To identify the landscape of senior nutrition in the Mat-Su Borough, we researched food outlets such as grocery and convenience stores, food pantries, food banks, farmers’ markets, and congregate meal locations and senior centers. Individual outlets were identified using the following:

- Mat-Su Health Foundation list of senior nutrition services
- Google searches for each outlet type
- 211 Alaska website
- Alaska LINKS/ADRC website
- Mat-Su Valley Resource Guide by United Way of Mat-Su

We also researched senior housing to understand where the senior population was located. We concentrated on independent living residences with the assumption that other living facilities such as residential communities or assisted living may have nutritional services that seniors living on their own would not otherwise have. We used the following resources to identify housing:

- Mat-Su Senior Environmental Scan
- Alaska ADRC/LINKS website

Some phone calls were made to confirm locations and characteristics of housing.

Addresses and corresponding latitude and longitude were used to map the locations on Geographic Information System (GIS) software. When addresses were not available or could not be used to map, we attempted to visit the location during our site visit for more precise mapping information. In some instances, services were mapped in the city center when more detailed information could not be located.

This list of services may not be exhaustive. There may be some that we failed to find in our search, and some may have opened or closed while this report was being written.

## Focus Groups and Site Visits

During a weeklong visit to the Mat-Su Borough, consultants had an opportunity to visit directly with service providers to tour their facilities, learn more about their programs, and better understand the distances between service sites. Consultants visited the following programs and areas:

- Upper Su Senior Center (Talkeetna)
- Upper Su Food Pantry (Talkeetna)
- Mid-Valley Seniors Inc. (Houston)
- Wasilla Area Seniors Inc.
- Mat-Su Senior Services (Palmer)
- Frontline Mission (Wasilla)
- Chickaloon Native Village

In addition to our site visits, the consultants also held multiple focus groups with senior service providers, community nutrition providers, and prepared meal providers. The purpose of these focus groups was to understand the community's level of knowledge of available senior nutrition options, gaps in service, and how providers might work together to ensure seamless services for the region's older adults. The following focus groups were held:

- Food Coalition
- Congregate Meal Recipients
- Hospital Social Workers
- Ancillary Service Providers
- Direct Senior Nutrition Service Providers

## Food Pantry Survey

The purpose of this survey was to gain a better understanding of the food pantry system in Mat-Su. Food banks and food pantries were identified by the Mat-Su Health Foundation. These organizations were sent an electronic survey with questions related to organizational operations, i.e. hours of operation and individuals served, and the strengths and weaknesses of the Mat-Su Borough's senior nutrition system. The specific survey is located in Appendix D.

There are limitations of this survey that should be noted, including that only some of the food banks and food pantries in the Mat-Su Borough were surveyed. Though the responses of those that completed the survey are valued, these findings may not be comprehensive of all food pantries and food banks in the region. Additionally, though individuals were contacted via email, phone calls could have been pursued to ensure a higher response rate.

## Best Practices

During our site visits, service providers shared areas in which they would like to learn more from other organizations with senior nutrition programs. We began by conducting a literature review to gather a basic understanding of best practices. Next, we identified ten senior nutrition organizations that included those in Alaska, those with terrain and population size similar to the Wasilla-Palmer area, and those well-known for their programming. Phone interviews were conducted with these programs. The interview guide used can be found in Appendix C. Of the ten organizations identified, we interviewed nine:

- Catholic Community Service (Juneau)
- Salvation Army (Anchorage)
- Fairbanks Senior Center
- Sunshine House (Alpine, TX)
- Area Agency on Aging, Flathead County (Kalispell, MT)
- Volunteers for America (Denver, CO)
- Moscow Senior Meal Site and Senior Center, Operated by Friendly Neighbors Senior Citizens, Inc. (Moscow, ID)
- Lutheran Social Services (Dickinson, ND)
- Inter-Lakes Community Action Partnership (Watertown, SD)

The detailed results from these interviews can be found in Appendix F.

## FUNDING SOURCES

This project attempted to identify both government and private funding available for senior nutrition in the Mat-Su Borough.

### Government Funding

For government funding, we identified historical funding amounts for Title III and Title VI of the Older American's Act and Title XIX and Title XX of the Social Security Act. When available, we separated this information by census tract or region.

- Title III funding was identified using The Alaska State Plan for Senior Services FY2016-2019 and the Alaska State Plan for Senior Services 2020-2023. We also used the DHSS FY19 Operating Grants document. This information was broken down by census tract. Census tract level data for NSIP funds associated with Title III was provided by state officials.
- Title VI funding was identified from a list of 2019 Grantees from the Administration for Community Living. This listing broke down funding by Alaska Native Village. We included the Chickaloon Native Village, the Knik Tribe, and a portion of the Southcentral Foundation funding for Mat-Su.
- Title XIX funding was identified using the Alaska Medicaid 2015 Annual Report, the most recent report that broke down Medicaid funding by service and by area. We focused on Home and Community-Based Expenditures. This information was reported by senate district and not by census tract.
- Title XX funding information was identified using the Social Services Block Grant Fiscal Year 2016 Annual Report (published in 2019).

We also analyzed this funding against various population data to determine per capita funding amounts. Associated census tract data was used for this calculation. Regional breakdowns of funding was not uniform across funding sources, so in some cases census data was combined to best reflect the regional breakdowns used by a particular funding source.

### Private Funding

To identify private funding potentially available for senior nutrition services, we conducted research on the Foundation Directory website to identify private foundations that fund in Alaska and have a focus related to older adults, Alaska Native People, nutrition and/or poverty. These foundations were then analyzed to determine actual funding practices and prioritized according to their historical funding in Mat-Su and/or Alaska, and toward programs and services surrounding older adult nutrition. In addition, we identified significant private funders in the Mat-Su Borough and reviewed a list of their grantees, grant purpose, and funding amount. A detailed listing of these foundations can be found in Appendix E.



# Appendix C: Best Practice Interview Questions

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## QUESTIONS FOR BEST PRACTICE INTERVIEWS

Purpose: To gather information from other organizations focused on senior nutrition that are similar in size, geography, or are known for good practices. These interviews will focus on specific domains identified by the Mat-Su Senior Nutrition focus group.

### 1. About your program:

- How many home-delivered meals and/or congregate meal participants do you average per day?

### 2. Outreach to ‘hard to reach’ senior resident populations; increase/expand participation in congregate meals:

- What barriers have you encountered in your outreach efforts to the broader older adult resident population in your region?
- What outreach strategies have you found to be particularly successful in reaching those otherwise “hard to reach” older adult resident populations?
- Are there challenges specific to maintaining the participation of these “hard to reach” older adult residents?
  - » If so, what strategies have you employed to maintain their participation in your program?
  - » If not, what general challenges do you experience in maintaining older adult resident participation?
  - » What strategies have been successful in maintaining older adult resident participation in your program?
- How does outreach for congregate meals differ from your general outreach?

### 3. Volunteer recruitment:

- Approximately, how many volunteers do you have annually?
- How do you recruit volunteers?
- How do you maintain volunteers?
- Do you engage volunteers in congregate meal delivery or home-delivered meals? If so: What activities are performed by these volunteers (e.g., dining service, meal delivery, food processing)?
- Are there particular recruitment or maintenance strategies that have been successful?
- What challenges have you experienced in both recruiting and maintaining volunteers?

### 4. Engagement of program participants and their voice:

- What mechanisms of feedback do you use to engage your program’s participants? (i.e. surveys, informal feedback/word-of-mouth)
  - » What strategies have been particularly successful in ensuring that your clients’ feedback is implemented in service delivery?
- Do you engage program participants on your board?

### 5. Building and sustaining a collaborative vehicle/structure; building and sustaining durable networks over time:

- Tell us about your collaboration/network. What tasks/services does the collaborative conduct together? (i.e. intake forms, joint purchasing, shared leadership, reports)
- What steps did you take to build a collaborative for senior nutrition (including both congregate meals and home-delivered meals)?
- What are the benefits of a shared network/association?
- What challenges emerged throughout the process of creating a network/association (generally, and for a geographic area that is more spread out, if applicable)?
  - » What steps did you take to deal with those challenges (both generally, and specifically for the remote geographic area, if applicable)?

## Appendix D: Food Pantry Survey

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### Mat-Su Valley Food Survey

#### Online Survey for Food Banks & Food Pantries in Mat-Su Valley

This survey is being conducted by Woollard Nichols and Associates as part of a study of senior residents' access to nutrition in the Mat Su Valley sponsored by the Mat-Su Health Foundation.

Seniors in this study are defined as residents who are 60 years old and above.

**Purpose:** The purpose of this survey is to better understand the food system strengths and opportunities in the Mat-Su Valley with regard to meeting the nutrition needs of senior residents.

**Time to Complete:** The average time for completion of this survey is 5 - 10 minutes.

**Content Overview:** This survey will ask you general questions about your organization or program's capacity and operations. We would also like to know your perspective on the food system in Mat-Su Valley, generally.

# Mat-Su Valley Food Survey

## Your Information

### 1. Address

Name	
Name of Program	
Address	
Address 2	
City/Town	
ZIP/Postal Code	
Email Address	
Phone Number	

### 2. Comment (optional, if you would like to provide us context for any of the information provided above):

## Mat-Su Valley Food Survey

### Capacity Questions

First, we would like to ask a few questions about your organization.

**3. What food related services does your organization provide for senior residents?  
Check all that apply**

- ☐ Food pantry (individuals pick up food)
- ☐ Food bank (distribute food to other community entities)
- ☐ Commodity Supplemental Food Program (CSFP) - **Delivery option**
- ☐ Commodity Supplemental Food Program (CSFP) - **Pick up option**
- ☐ Other (please specify):

**4. What days and hours is your program open to the senior residents?**

**5. Please describe your service area (identify if there are limits on geography for someone to be eligible for your services).**

**6. What is your eligibility criteria for food-related services? (e.g., location of residency, age, income)**

**7. How many unduplicated/unique individuals did you serve in your last fiscal year? (if not known, please provide us an approximate number of persons served).**

**8. Approximately what percentage of the total number of residents you served in the last fiscal year were 60+ years old?**

**9. How many unduplicated/unique seniors do you serve on a weekly basis? (If this number is not known, please answer "000")**

**10. Where do you get the food that you provide to recipients? (e.g., another organization [include name], donations, buy ourselves, other [explain]).**

**11. Does your organization have a waiting list for any of the services it provides? If so, what is the number?**

☐ No

☐ Yes (please specify)

**12. Other than additional funding, what one other resource would help you serve more senior residents? (e.g., additional volunteers, storage space)**

**13. What is your total annual budget?**

# Mat-Su Valley Food Survey

## System Questions

Finally, we are interested in understanding your perspective of the food system in Mat-Su Valley, generally. The "food system" is what allows food distribution to happen for seniors across the borough including:

- The source of food
- the places it is given out
- the delivery of food to the distribution sites
- the way that seniors get to the distribution sites; delivery options
- How site coordinate with one another
- the policy & funding that regulate the whole process

14. What do Mat Su Valley providers do well to ensure senior residents have access to food?

15. How well are current senior food programs coordinating with one another?

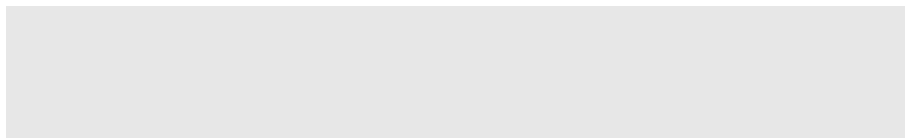
Extremely well.	Very well.	Somewhat well.	Not so well.	Not well at all.
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Additional comments (optional):

16. What are the most common barriers that senior residents run into when trying to access the nutrition system in your region?

17. In what way(s) could the current food system improve to increase access to nutrition for senior residents?

**18. What suggestions or ideas do you have regarding how to improve senior residents' access to food in the Mat-Su Valley?**



**19. Are there specific areas, that you know of, in the Mat Su Valley where senior residents do not have access to food?**

☐ No.

☐ Yes (please specify)





## Mat-Su Valley Food Survey

### Thank You!

On behalf of the Mat-Su Health Foundation, we are grateful for your participation!

If you have any additional questions about this study or would like to provide us additional comment on your responses or the food system, generally, please feel free to contact **Megan Cole**, [megan.e.cole@outlook.com](mailto:megan.e.cole@outlook.com)

# Appendix E: Foundation List

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## FOUNDATION FUNDING RESULTS

To be considered a prospective funder, a foundation must:

1. Have funded in Mat-Su in the past
2. Have funded in Alaska in the past
3. Focus on nutrition
4. Focus on seniors
5. Focus on low-income populations
6. Focus on basic needs
7. Have funded a specific program in Mat-Su (i.e. funded WASI)
8. Have funded a specific service (i.e. funding a food pantry or food bank)

### PRIORITY GROUP A

To be included in this group, prospective funders must have funded in Mat-Su (required) and either funded a specific program or service in a key area such as basic needs, low-income, seniors, or nutrition.

- Rasmuson Foundation
- Wells Fargo Foundation
- Ludlow Foundation
- ALASKA COMMUNITY FOUNDATION, (Including Jessica Stevens Community Foundation Grant Program and Palmer Community Foundation Grant Program)
- Igloo No. 4 Foundation
- The Carr Foundation, Inc.
- BP Foundation, Inc.
- ExxonMobil Foundation
- Richard L & Diane M Block Foundation
- MTA Foundation
- Alaska Airlines
- MEA Charitable Foundation (Matanuska Electrical Association Co-Op)
- AT&T Foundation
- W.K. Kellogg Foundation
- AmazonSmile Foundation

## PRIORITY GROUP B

To be included in this group, prospective funders must have funded in Mat-Su, but not necessarily in a key area, OR funded a specific program or service in a key area such as basic needs, low-income, seniors, or nutrition somewhere in Alaska.

- The Sholton Foundation
- Langston Family Foundation
- John C. Hughes Foundation
- The Skaggs Foundation
- Chugiak Area Business Association, Inc.
- Kroger Co. Foundation
- MDU Resources Foundation
- KeyBank Foundation
- Marni and Morris Propp II Family Foundation
- The Robert Wood Johnson Foundation
- The Wal-Mart Foundation, Inc.
- Frances & David Rose Foundation
- Dan and Gwen Ramras Charitable Trust
- The Usibelli Foundation
- Enterprise Rent-A-Car Foundation
- Helen W. Bell Charitable Foundation
- American Endowment Foundation
- Perkins Coie Foundation
- Atwood Foundation, Inc.
- McCune Charitable Foundation
- Halcro Family Foundation

## PRIORITY GROUP C

To be included in this group, prospective funders must have funded in Alaska, but not necessarily in a key area, OR funded a specific program or service in a key area such as basic needs, low-income, seniors, or nutrition somewhere in the United States.

- The Christensen Fund
- Juneau Community Foundation
- General Mills Foundation
- The PG&E Corporation Foundation
- Charles A. Frueauff Foundation, Inc.
- Gottstein Family Foundation
- Curties-Measres Foundation
- Anchorage Alumni Foundation
- Frontier Foundation, Inc.
- Alaska Kidney Foundation, Inc.
- The Homer Foundation
- S.L Gimbel Foundation Advised Fund at The Community Foundation
- ConocoPhillips
- Benito and Frances C. Gaguine Foundation
- COMMUNITY FOUNDATION ALLIANCE
- Floyd Hooker Foundation
- The Conner Family Foundation

## Appendix F: Best Practice Interview Results

### Congregate Program and Outreach Information

Organization Name	About your program	Barriers Encountered, Successful Outreach Strategies	Challenges Maintaining “Hard to Reach” Population, Strategies Employed	General Challenges Maintaining Participation, Successful Strategies	How Outreach for Congregate Differs from General Outreach
<b>Catholic Community Service (CCS),</b> Juneau  (Combo of 2 interviews)	130 participants per day; HDM - deliver on average 70/day; Congregate – on average 40/day, 12 meals sent to bridge center, 12 meals sent to church in Douglas	<p><b>Barriers:</b> HDM - hard time getting in touch with clients if they aren’t home; the clients don’t have a phone. This is rare.</p> <p>Congregate - Generally no barriers. Stigma around it being for the poor was mentioned, but CCS works to dismantle.</p> <p><b>Successful:</b> HDM - go by the clients house and visit with them; contact people that know the client and see if they can reach the client; Contact place of residence; get them excited for meals by giving them a free meal ticket and signing them up for the caravan (if they’re not homebound).</p> <p>Congregate - on the radio, on the street, HDM drivers encourage clients to go to congregate meals if able.</p>	<p><b>Challenges:</b> HDM - Getting in contact with them can be a challenge. Other than that, no challenges for HDM.</p> <p>Congregate - No but does matter that participants receive checks.</p> <p><b>Strategies:</b> For individuals that can be hard to reach, a strategy is to reach out to individuals involved with the client, i.e. caregiver, family members.</p>	<p><b>Challenges:</b> Congregate - The timing of when participants receive checks. If participants have less money, will still be served at the meal site if they can’t donate.</p> <p><b>Successful:</b> Providing a meal that is affordable, especially with funding cuts.</p> <p>Talented cook. Works to make alternatives to those that have allergies, cooks good food.</p>	<p>Outreach differs</p> <p>HDM- a lot of calls come from referrals (i.e. doctors or caregivers)</p> <p>Congregate- CCS has many different programs, and the meals is one of the many programs. Work to encourage coming to meals for socialization aspect.</p>

Organization Name	About your program	Barriers Encountered, Successful Outreach Strategies	Challenges Maintaining “Hard to Reach” Population, Strategies Employed	General Challenges Maintaining Participation, Successful Strategies	How Outreach for Congregate Differs from General Outreach
<b>Fairbanks Senior Center</b>	<p>HDM= 54,000 meals/year</p> <p>Congregate = 12,574 meals/year</p> <p>230 individuals total</p> <p>150-160 hot meals a day, 17 frozen</p>	<p><b>Barriers:</b> Access to a computer, borough size and volume. Senior Center is also not on bus route system, so participants must travel to site themselves. Winter is a challenge.</p> <p><b>Successful:</b> Work with other partners and create satellite stations; go to the caregiver and senior fair to conduct outreach on programs.</p>	<p><b>Challenges:</b> Yes. HDM – Challenges to reach people outside of their normal delivery range. Volunteers required to deliver food and maintain these participants’ participation. Conditions of roads. People that live far out, live there for a reason. They want to be off the grid, even as they get older.</p> <p>Congregate- transportation difficulties, and time of year (winter has less participation).</p> <p><b>Strategies</b> (specifically about the participants that want to be off the grid/radar):</p> <p>HDM – People that serve these individuals, they serve them as a whole and help them as they can (bring water if necessary), they don’t judge.</p> <p>Congregate- environment that is inviting and welcoming. Include a salad bar (fresh produce) which people like.</p>	<p>Challenges: N/A</p> <p>Successful: N/A</p>	<p>Doesn’t differ. When they conduct outreach, they do outreach for all programs.</p>

Organization Name	About your program	Barriers Encountered, Successful Outreach Strategies	Challenges Maintaining “Hard to Reach” Population, Strategies Employed	General Challenges Maintaining Participation, Successful Strategies	How Outreach for Congregate Differs from General Outreach
<b>Salvation Army,</b> Anchorage	HDM – generally 360-420/month  Congregate- 86/day	<b>Barriers:</b> None. Only organization in Anchorage doing HDM, so they are well known. Rehoused seniors that used to be homeless so can be hard to reach because clients are not used to being home, and they must be home to receive their meal.  <b>Successful:</b> Work with homeless shelters and staff from other agencies to let them know. Outreach between agencies.	<b>Challenges:</b> Yes, related to rehoused homeless population. If they are not home for three visits, their services are temporarily stopped.  <b>Strategies:</b> Work with the individuals serving these clients (i.e. case managers and wraparound services).	Challenges: N/A  Successful: N/A	Congregate meals are held at housing complexes, so the outreach is conducted when new people move into the housing site.  Other information: HDM is done at senior centers if person cannot get to congregate meal location, physically.
<b>Sunshine House,</b> Alpine, TX	HDM – 135-140/day  Congregate – 35-40/day	<b>Barriers:</b> HDM – Lack of social media, lack of computer, lack of TV.  Congregate meals, a hospital nearby also hosts meals and has a senior circle, therefore competition is apparent.  <b>Successful:</b> HDM – Radio station, target outreach on family members.  Congregate- Put information in a newsletter that goes to people that go to Sunshine; local business announces menu over radio every day.	<b>Challenges:</b> HDM – For individuals that live farther out, have family members/ individuals pick their meals up for them. If that individual doesn’t pick up the meals that day, Sunshine House cannot reach them. Generally, no challenges with individuals to whom they can deliver.  Congregate – The competition from the hospital is a challenge.  <b>Strategies:</b> Congregate- Radio ads, host bingo after meal on Wednesdays.	<b>Challenges:</b> HDM – Generally none.  Congregate- Only one meal served per day and some people don’t enjoy the meal served. Also had challenges with participation in their old building that was dark, but new building is nicer and with windows, and participation has increased.  <b>Successful:</b> Improve food appearance, increase number of meals tailored to Hispanic culture.	Does not differ a lot.  Do see congregate participants more, so the relationship is more personal.  Volunteer delivering HDM may know information about clients to whom they deliver.

Organization Name	About your program	Barriers Encountered, Successful Outreach Strategies	Challenges Maintaining “Hard to Reach” Population, Strategies Employed	General Challenges Maintaining Participation, Successful Strategies	How Outreach for Congregate Differs from General Outreach
<p><b>Volunteers of America, Denver, CO</b></p> <p>NOTE: This interview was intended to be more focused on Golden, CO, but Director of Senior Nutrition focused on Denver.</p>	<p>HDM- 23,000 meals/day</p> <p>Congregate- 700-900/day</p> <p>30 different congregate meal sites for seniors in seven counties. This is all out of Denver. There are 16 different regions in the state of Colorado. Each has their own AAA. And each AAA does their own MOW and Congregate. VOM serves one of the 16 regions (and they are the largest program). ONLY serve Denver. Work with the AAA in Denver.</p>	<p><b>Barriers:</b> HDM - More difficult reaching these clients. Not sure if client is receiving outreach if aside from TV, radio. Barriers include the physical disconnect from clients, language-some speak languages other than English, &amp; lack of marketing abilities electronically, lack of social media.</p> <p>Congregate – Typically still drive and see things around the community.</p> <p><b>Successful:</b> Support from the local media- TV/newspaper stories; Local TV has a show that talks about a volunteer and a program each day. More calls received after that program is aired, for HDM, congregate, and volunteering.</p> <p>Outreach conducted through the partners and other programs. Focus on providing wrap-around services, so if someone comes in for a different program, they will talk to that client about the other services (i.e. congregate meals) that they could receive. This works better for congregate because people are coming in.</p>	<p><b>Challenges:</b> Generally, no. Some challenges with scheduling or stopping services due to medical reasons.</p> <p><b>Strategies:</b> N/A</p>	<p><b>Challenges:</b> Weather, specifically in the winter.</p> <p><b>Successful:</b> HDM- Ensure that clients are receiving information and resources; they provide a newsletter monthly that has recipes, tips on safety, trivia, etc.</p> <p>Congregate – Hanging up the menus. Include other programs with the congregate meal (i.e. nutrition education, safety presentations with the handyman program Volunteers of America has, Bingo, exercise classes). The sites that are more successful for congregate meals offer other services in addition to a meal.</p>	<p>Outreach is more written (i.e. put flyers on boards, provide the menu/ nutrition information). This outreach occurs more at the senior housing facilities that have an area for dining, or at a partner agency (i.e. church). Word-of-mouth outreach is also used here.</p>



Organization Name	About your program	Barriers Encountered, Successful Outreach Strategies	Challenges Maintaining “Hard to Reach” Population, Strategies Employed	General Challenges Maintaining Participation, Successful Strategies	How Outreach for Congregate Differs from General Outreach
<b>Inter-Lakes Community Action Partnership,</b> Watertown, SD  NOTE: This interview was supposed to focus on Watertown, SD but ICAP serves more than just Watertown.	HDM and Congregate = 800 meals/day. Approximately 60/40 split.  Summer- HDM clients make travel to congregate sites. ICAP doesn’t require that HDM be completely home-bound.  ICAP is in ten counties and 14 counties. Services vary by community. Many service areas are small rural towns with only 200-300 people. Town may not have a senior center, so ICAP uses restaurants and other locations to hold congregate meals. Also use restaurants for “star card”, offered for seniors and used for a set menu across different locations. Younger seniors use the star card more than older seniors.	<p><b>Barriers:</b> Belief that the program is only for those in need; even though try to educate. Also, individuals don’t like to ask for help. Often wait until it is too late before asking for services.</p> <p>Watertown – Interviewee assumes the barriers are similar, but that community is well educated about ICAP’s programs.</p> <p><b>Successful:</b> Health fairs, such as a health fair specific to caregivers.</p> <p>Watertown – Outreach at the senior center. This is where the meal occurs but conducting outreach to seniors that come in for other reasons (i.e. games) is a tactic. Being present at the senior center was noted as an outreach strategy.</p> <p>For HDM- Mainly referral. Discussion of incorporating younger seniors in programs earlier on, so that when they reach the age to need HDM, they already know about it. Word of mouth; educating other service providers (i.e. hospitals) of their services.</p>	<p><b>Challenges:</b> For HDM- Challenges with clients realizing/ understanding they need the service. Also, because HDM clients wait, once they start the service, their health normally gets bad and they have to leave their place of residence.</p> <p>Congregate – Food quality, and ensuring it is good at each location. Also, the weather in the winter is a challenge. Also affects star card participants.</p> <p><b>Strategies:</b> Keep communicating with clients, keep engaging clients. Have kids sing at restaurants to bring clients in, have events so the clients continue to participate. Advertise, include information (i.e. menu) on the radio and in newspapers. Strategies are different among the different communities.</p> <p>During MOW March for Meals, engage the community and ask if they can deliver meals.</p>	Challenges: N/A  Successful: N/A	<p>For congregate, do outreach at meal sites (i.e. senior center). Have posters at sites, have brochures at sites. Keep the website updated and interactive to reach younger seniors. Word-of-mouth.</p> <p>Work well with caterers/ partners so that the image is positive and both parties want to continue working together.</p>
<b>Lutheran Social Services,</b> Dickinson, ND	N/A – This program provides volunteers and does not provide services directly.	<p>Barriers: N/A</p> <p>Successful:</p>	<p>Challenges: N/A</p> <p>Strategies:</p>	<p>Challenges: N/A</p> <p>Successful:</p>	N/A

Organization Name	About your program	Barriers Encountered, Successful Outreach Strategies	Challenges Maintaining “Hard to Reach” Population, Strategies Employed	General Challenges Maintaining Participation, Successful Strategies	How Outreach for Congregate Differs from General Outreach
<b>Friendly Neighbor Senior Citizens, Inc.,</b> Moscow, ID	HDM- 20/day Congregate- 50-60 people/day	<p><b>Barriers:</b> No barriers. He later talked about how there are seniors that do not know about their program, so there may be challenges that he did not discuss.</p> <p><b>Successful:</b> Referrals through members. People coming to meals bring someone. If someone that is a member knows someone that needs HDM (i.e. a neighbor), they will inform them</p>	<p><b>Challenges:</b> No challenges (refer to barriers notes).</p> <p><b>Strategies:</b> N/A</p>	<p><b>Challenges:</b> Interviewee said they were good at maintaining participants.</p> <p><b>Successful:</b> Meals are good, they offer a salad bar. Entertainment at meals on occasion.</p> <p>For HDM specifically, delivery drivers check on clients, and if client is having an issue, they let AAA know.</p>	<p>Interviewee said outreach does not differ.</p> <p>For HDM- he does outreach on it wherever he goes. Noted that they have flyers for HDM</p>

Organization Name	About your program	Barriers Encountered, Successful Outreach Strategies	Challenges Maintaining “Hard to Reach” Population, Strategies Employed	General Challenges Maintaining Participation, Successful Strategies	How Outreach for Congregate Differs from General Outreach
<b>Area Agency on Aging,</b> <b>Kalispell, MT</b>	<p>HDM - 46,658 meals /year</p> <p>Congregate - 31,857 meals/year</p> <p>Total of 1538 older adult congregate meal participants last fiscal year. Serve older adults and non-seniors in congregate. For congregate, on average 100-110 congregate meals/day just at the AAA. Also contract with four other organizations to serve meals at senior centers. Support one other organization, with food, but not meals.</p> <p>Total of 401 HDM clients last fiscal year. They serve meals at the AAA, and then have The AAA building is located in Kalispell, MT, but they serve all of Flathead County.</p>	<p><b>Barriers:</b> HDM – The rural aspect of their area. Outreach difficult and if you do recruit clients, can be difficult to deliver to them. Additionally, older adults in this area do not like to ask for help/services.</p> <p>Congregate – Challenges with misconception that the meals are for those that are old and low-income. Challenges with finding staff and leadership for senior centers, and with transforming business model to something that is more community focused. Also, because some of the areas are resort towns, senior centers may be less of a focus, as compared to visitors.</p> <p><b>Successful:</b> For HDM, building trust with the community. Work with community organizations in that rural community and try to build relationships. Referrals via hospitals, rehab facilities, etc. Outreach in housing complexes for older adults and subsidized housing; word-of-mouth. Regular radio spot; outreach coordinator; senior centers are encouraged to do outreach. Also working to update their website and social media for younger seniors and working with volunteers that work with individuals discharged from the hospital. The interviewee noted that she thinks information should be everywhere at all times, because people don’t listen to the information until they need it.</p> <p>For congregate- Holding meals at somewhere that is not just for seniors so that when people go to a congregate meal, it reduces the stigma of it being for older people. If you include individuals of all ages, more older adults may come.</p>	<p>Challenges: HDM- Generally, if they’re within a delivery area, then there’s no challenges. For individuals that live farther away and have a representative (i.e. family member or caregiver) get their frozen meals, there have been challenges. For example, ensuring that a representative can pick up the meals is a challenge. Weather can also be a challenge, specifically in the winter.</p> <p>Congregate- transportation is challenging, especially for those that can physically go to congregate meals. There are some transportation options, depending on where the client lives, because AAA also handles public transportation. In addition, individuals may not want to take public transportation or other transportation options, because they may be uncomfortable. Assisted transportation has been having difficulties finding attendants to do the transportation, thus increasing the transportation challenges.</p> <p>Strategies: HDM - Asking the remote client to identify a backup representative is a strategy. Also placing the pickup meals at the closest location to the client has helped. Additionally, they work with/notify the Adult Protective system if they feel their client is not safe. The ability to deliver depends on if there is someone that can deliver to that geographic area (i.e. if a volunteer lives near them), because everyone in the county is eligible for services, technically.</p> <p>Congregate- AAA has changed their transportation to do shorter, fixed routes.</p>	<p>Challenges: N/A</p> <p>Successful: N/A</p> <p>NOTE: A question was asked on the community survey of if you receive services, and a lot of surveys from a congregate meal site said they don’t receive services. This shows that these participants don’t think they receive services.</p> <p>It was discussed in the interview that the location of the AAA building, and the movement of people of all ages through the buildings/ area has helped with senior center participation.</p>	<p>Site managers are located at the senior centers, and these site managers conduct the outreach, in that specific area, for congregate meals. These site managers know the community more and could have more connections within the communities.</p> <p>Other outreach tactics for congregate meals are incentives to bring them to the meal; and an activity that occurs at the site around the lunch, which allows the meal to be promoted when they promote the activity.</p> <p>Congregate meal outreach is more focused on the ability to be social/have socialization. Outreach is more focused on this than the meal.</p>

## Volunteer Recruitment/Maintenance

Organization Name	# volunteers annually	How do recruit volunteers?	How do you maintain volunteers?	Activities in which volunteers participate	Successful recruitment and maintenance strategies	Challenges recruiting and maintaining volunteers
<b>Catholic Community Service (CCS),</b> Juneau  (Combo of 2 interviews)	60 drivers; 25 drivers have a regular route, the others are subs  Congregate- ten volunteers	Hang up signs around town asking if people want to volunteer, commercials, websites.  Don't do a ton of recruiting. Will talk when at social events, some recruitment occurs on radio.	Appreciate them and let them know that they appreciate them; hold a lunch for them; give them gifts such as soap or jam.  Congregate- provide meals to volunteers each time they volunteer.	HDM drivers; serve lunch (congregate), clean lunch area (congregate)  Congregate- some clean/mop, serve meals, clean tables, play piano, someone cleans seniors' feet	Signs around town; express appreciation; provide certificates. Volunteers most likely do it for the seniors.  Treat well. Volunteers are receiving satisfaction through the services they are doing.	Generally, no.  Could use more volunteers.
<b>Fairbanks Senior Center</b>	60	Facebook posts, "Just Serve", word of mouth, radios and talk shows, refer within different agencies.	Hold events to appreciate volunteers (BBQ, Christmas party, etc.). Give them thank yous. Train them for their roles (i.e. critical incidence reporting); reimburse individuals for miles.	Chop food, cut food, and bag it; work with a volunteer-based transportation program.	Says all strategies are successful	Weather in the winter; finding volunteers that are passionate can be difficult; the population is aging so the demand is higher than the number of volunteers they have/may have.
<b>Salvation Army,</b> Anchorage	7 weekly; thanksgiving- 50 people to cook and provide hot meal	There is a volunteer coordinator employed by Salvation Army. Volunteers are recruited through website.	Does not know. Interviewee had these volunteers when they started the position	Pack meals for delivery	N/A	N/A

Organization Name	# volunteers annually	How do recruit volunteers?	How do you maintain volunteers?	Activities in which volunteers participate	Successful recruitment and maintenance strategies	Challenges recruiting and maintaining volunteers
<b>Sunshine House,</b> Alpine, TX	70-75 for HDM  Congregate does not have volunteers.	Volunteers recruit/bring friends; Facebook; Interviewee asks own friends; offer other volunteer tasks if individual says they don't want to drive.	Have difficulty with this. Provide gifts during volunteer week, make them feel appreciated/special; banquet for volunteers.	Office tasks, pack sandwiches, HDM drivers	March for Meals- invite people that are typically in management to volunteer, and this also brings in other volunteers.  Maintenance- benefit the volunteer feels for doing what they do.	Maintenance - Volunteers get sick, move, or get a job.
<b>Volunteers of America,</b> Denver, CO  NOTE: This interview was intended to be more focused on Golden, CO, but Director of Senior Nutrition focused on Denver.	HDM- 800 Congregate- 600	Outreach, and media. Have staff specifically focused on volunteers. Use Facebook and other platforms to recruit volunteers. Also put information in newspapers or other local media. Provide information on the website of how to contact.  For congregate, staff that work with the 30 different congregate sites to help recruit and manage volunteers.  Other organizations and corporations work with them to volunteer.	Recognize if a volunteer has done extra with a gift card or something similar, hold events to recognize volunteers, recognizes the top three longest volunteers. Also, going to sites and thanking them face-to-face.	HDM- delivery. VOA staff do delivery too, so volunteers pick up routes that staff have dropped. The routes are kept short, typically only take about an hour.  Congregate- Can perform many different tasks- setup and clean up for meals, serve food, serve food to client's tables, check people in.	Sharing that there is a need for volunteers. Created magnetic stickers for the VOA vans that advertised volunteering, and this increased calls.  Communicate with other organizations and individuals and let them know they need more volunteers.	Schedules are often changing because they age out or get a new job and this can affect their ability to volunteer.

Organization Name	# volunteers annually	How do recruit volunteers?	How do you maintain volunteers?	Activities in which volunteers participate	Successful recruitment and maintenance strategies	Challenges recruiting and maintaining volunteers
<b>Inter-Lakes Community Action Partnership,</b> Watertown, SD  NOTE: This interview was supposed to focus on Watertown, SD but ICAP serves more than just Watertown.	Around 2,000 for the entire 60 + program	Volunteers are often participants (either congregate or star card). Contact other organizations or partners for volunteers (i.e. churches, banks).  Watertown - During March for Meals, the site manager will work with other organizations and businesses to recruit volunteers.  Partner and work with businesses- their employees will volunteer.	Communicate with volunteers, make sure they are happy. Appreciate the volunteers and make them aware of the appreciation. Work to fix issues that the volunteer may have.	Take phone calls for a specific site on number of people attending the meal and relay that information to restaurant. (In areas with no site manager or office building.) Distribute information at meals sites (i.e. menus, nutrition info). Handle bank deposits in areas where there's no office. Sell star cards, help with packing meals.	Word of mouth (i.e. current volunteers bring other individuals interested in volunteering).  Volunteers often stay a while.  To maintain volunteers, open communication is key to make sure the volunteer is enjoying what they are doing.	Volunteers that are younger may have jobs that are more demanding at times, which could affect their volunteer abilities. ICAP works to be flexible in events such as these.
<b>Lutheran Social Services,</b> Dickinson, ND	HDM- 84 unduplicated volunteers/year	Current volunteers recruit new volunteers; use the host sites to help recruit volunteers.	Generally, not very difficult. Must ensure volunteer feels like what they are doing is meaningful. Concerns about the volunteers being older, and if they get hurt or sick, then they don't have volunteers.	Meal delivery, talk with the client	Use host sites to help recruit volunteers; current volunteers recruit new volunteers.  For a volunteer to continue volunteering, they must find what they are doing to be satisfying/fulfilling.	Aging volunteer population, and their ability to drive (esp. during winter).  If bad weather is coming, volunteers will deliver extra meals that clients can freeze, so delivery does not need to occur during the bad weather.

Organization Name	# volunteers annually	How do recruit volunteers?	How do you maintain volunteers?	Activities in which volunteers participate	Successful recruitment and maintenance strategies	Challenges recruiting and maintaining volunteers
<b>Friendly Neighbor Senior Citizens, Inc.,</b> Moscow, ID	Around 31	Volunteers are typically members. They ask the members to volunteer.	Tell the volunteers to inform them of problems; treat the volunteers well; ensure volunteers have all they should need.	Delivery drivers for HDM, meal set-up and take down, donated food pick-up, welcome desk, help with general things.	Not particularly. They let volunteers choose what activities they want to do.  Noted that they have a “volunteer of the year” award, and this is a way volunteers are recognized.	No challenge, generally.
<b>Area Agency on Aging,</b> Kalispell, MT	110-120, which includes all of the sites; and this includes congregate and HDM.	Word of mouth; conduct outreach for volunteers when doing general outreach; recruit on the radio spot.  Interviewee noted that people will come up to her and tell her “I’m retiring in six months; I can’t wait to volunteer for MOW”.	Make volunteers feel part of the team/ family – the secret to maintaining volunteers. Before volunteer shifts, they provide cookies and coffee, and volunteers can hang out with each other. Volunteers understand the importance of their job. This is for both HDM and congregate volunteers.  Also have a nice annual luncheon for volunteers and volunteers are acknowledged at all public events.	HDM delivery  Serve food, cash register, help with the sign-in area, direct meal participants on where to go, clean the tables, serve meals to people at congregate sites, entertainment (i.e. play the piano), help with holiday meals, help with meal events.	Maintaining volunteers- mentioned previously (treating like family).  Recruiting- word-of-mouth and keeping the reputation of your organization positive within the community. Reimburse mileage for volunteers.  Note- almost all volunteers are older adults.	Generally, none.



## Engaging Program Participants

Organization Name	Mechanisms of feedback used to engage program participants. What strategies have been successful?	Are program participants engaged on board?
<b>Catholic Community Service (CCS),</b> Juneau  (Combo of 2 interviews)	<b>Mechanisms:</b> Survey to senior population; informal feedback (talk with participants and get feedback).  <b>Successful strategies:</b> Survey and informal feedback. Survey has comment boxes, allowing participants to leave their thoughts, etc. Find that comments are more specific. Findings from survey are given to staff so staff can adjust if needed.	Yes
<b>Fairbanks Senior Center</b>	<b>Mechanisms:</b> Suggestion boxes located at congregate meals, newsletter that encourages feedback, quarterly surveys, phone number posted on website.  <b>Successful Strategies:</b> Individualized feedback through calls and suggestion box.	No, they don't have a say in the board.
<b>Salvation Army,</b> Anchorage	<b>Mechanisms:</b> Surveys, informal feedback, word-of-mouth. Have separate surveys for MOW, transportation, senior center, and Homemaker. Also do an exit interview for people leaving HDM services.  <b>Successful Strategies:</b> All of the strategies above are successful. Comments on survey are helpful in gathering feedback/information. Allow participants to talk with them and share information. Also encourage staff to sit with congregate meal participants and talk with them, and for staff to go to congregate meals and assess how it's going.	Believe so.
<b>Sunshine House,</b> Alpine, TX	<b>Mechanisms:</b> Survey; calls (informal feedback).  <b>Successful Strategies:</b> Survey- good comments provided by survey.	No

Organization Name	Mechanisms of feedback used to engage program participants. What strategies have been successful?	Are program participants engaged on board?
<p><b>Volunteers of America,</b> Denver, CO</p> <p>NOTE: This interview was intended to be more focused on Golden, CO, but Director of Senior Nutrition focused on Denver.</p>	<p><b>Mechanisms:</b> Surveys, informal feedback, word-of mouth. Contact information to reach multiple individuals is given to a new HDM client. HDM clients can also provide feedback to the driver that delivers their meal. Surveys are yearly, and this survey is for all the programs under Volunteers of America. Another yearly survey is for specific programs funded by the state (i.e. HDM, congregate).</p> <p><b>Successful Strategies:</b> Bi-monthly internal meetings to discuss the programs. Site coordinators or managers also can fix/help with something at the site if it is immediate. Feedback provided informally and via surveys helps with menus and concerns about meals.</p> <p>Part of the survey asks what resources the individual is receiving and using, and this informs VOA of what resources to continue sending their client, so they don't continue sending resources that the client does not use.</p>	<p>Not on executive board. Clients are on advisory committees or review committees.</p>
<p><b>Inter-Lakes Community Action Partnership,</b> Watertown, SD</p> <p>NOTE: This interview was supposed to focus on Watertown, SD but ICAP serves more than just Watertown.</p>	<p><b>Mechanisms:</b> Surveys, informal feedback, word of mouth. Surveys are done annually, same survey for HDM and congregate. Star card survey may be different. Have open-ended questions to allow participants to expand.</p> <p>Word of mouth occurs when they go to sites and talk with participants, when they deliver meals and talk with participants, will call participants and see how everything is going. Sometimes they receive calls with feedback. If someone decides to stop HDM, ICAP will ask about reasoning.</p> <p>Have a binder of feedback received from all of these sources.</p> <p>If a site closes, they will work with the participants in that area to identify a new site.</p> <p><b>Successful Strategies:</b> Word-of-mouth is most successful. The word-of-mouth feedback is more often. Surveys occur less often.</p>	<p>There is potential, they do engage participants. Unsure if they currently have a participant on the board.</p>
<p><b>Lutheran Social Services,</b> Dickinson, ND</p>	<p><b>Mechanisms:</b> N/A – This program provides volunteers and does not provide services directly.</p> <p><b>Successful Strategies:</b></p>	<p>N/A</p>

Organization Name	Mechanisms of feedback used to engage program participants. What strategies have been successful?	Are program participants engaged on board?
<b>Friendly Neighbor Senior Citizens, Inc.,</b> Moscow, ID	<p><b>Mechanisms:</b> Survey (different for HDM vs. congregate). Participants also fill out a survey when they start receiving services. This asks about food allergies, etc.; word of mouth from congregate participants.</p> <p><b>Successful Strategies:</b> Surveys, including open comment portion at end of survey. Interviewee and cook look at responses and see how they can incorporate feedback.</p>	Yes
<b>Area Agency on Aging,</b> Kalispell, MT	<p><b>Mechanisms:</b> Different surveys (HDM, congregate, and community). Surveys are/will be yearly.</p> <p>Word of mouth feedback received at congregate meals; word of mouth feedback received by delivery drivers for HDM clients. They receive calls and word of mouth feedback that way. Also, if an individual receives multiple services, a resource specialist visits the client once a month, and they receive HDM feedback that way as well.</p> <p>Transportation-related feedback is collected from the Transportation Coordination Plan.</p> <p><b>Successful Strategies:</b> The portions of the survey where clients can give feedback are helpful. All survey comments are recorded. The nutrition manager also receives comments. Nutrition manager also meets with the site managers monthly (the site managers are not AAA employees), and feedback from clients can be discussed at the meetings.</p> <p>Most successful strategies - informal feedback and comments.</p>	Yes

## Building and Sustaining a Collaborative Vehicle

Organization Name	About the collaborative	Steps taken to build a collaborative for senior nutrition	Benefits of shared network/association	Challenges throughout process of creating a network/association	Steps taken to deal with challenges
<b>Catholic Community Service (CCS), Juneau</b>  (Combo of 2 interviews)	MOW Juneau functions separately. May work with other meal programs under CCS occasionally, and work with a senior center/bridge meals, but not a collaborative. Most of the time they work by themselves.				
<b>Fairbanks Senior Center</b>	Meals are aligned at Fairbanks Senior Center. The senior center has their own congregate program, and then makes food for the Fairbanks Native Association, and delivers food to the Fairbanks Resource Agency. These organizations must report the number of units back to Fairbanks Senior Center. Surveys also go to these sites.	This network/ collaboration was already established. Interviewee has worked to strengthen/adjust it.	Without this network, Fairbanks Senior Center couldn't serve Fairbanks Native Association participants because they don't have the space. They can also provide meals to adults in the adult daycare, which alleviates burden from the caregivers (Fairbanks Resource Agency). More people can be served. Can provide a lot of calories to those receiving the meals; can support the independence of older adults.	Units not being reported was a challenge, but not many challenges otherwise.	In terms of units- increase communication and be consistent. Also change of personnel in charge.  Overall note: Working with other organizations that provide other services, and using ADRC/LINKS, were noted in the interview.
<b>Salvation Army, Anchorage</b>	N/A				
<b>Sunshine House, Alpine, TX</b>	N/A				

Organization Name	About the collaborative	Steps taken to build a collaborative for senior nutrition	Benefits of shared network/association	Challenges throughout process of creating a network/association	Steps taken to deal with challenges
<p><b>Volunteers of America,</b> Denver, CO</p> <p>NOTE: This interview was intended to be more focused on Golden, CO, but Director of Senior Nutrition focused on Denver.</p>	<p>Shared reporting, surveys and menus are aligned. All of the meals are produced in VOA's kitchen, for both HDM and congregate meals. What actually occurs between the VOA and the site varies. Typically, VOA is responsible for the meals and providing the meals, and the partner organization is responsible for other aspects, such as distributing the meals.</p> <p>There are also other organizations that they partner with, that just include the partner agency referring clients to VOA and vice versa (Project Angel Heart).</p> <p>Described as a "web". They have the 30 congregate sites (subcontractors under the "30", I think), and other partners. Generally, VOA prepares the meals, and the organizations take care of distributing.</p>	<p>Discussion of reducing duplicative efforts and working together instead. Must get out there and talk with partners. This work has been occurring for 45 years.</p> <p>Congregate - VOA identifies sites where a meal could be held to reach seniors. The site fills out a pre-survey, and if they pass and agree to participate, they become a congregate meal site. Congregate sites are also identified through HDM- if multiple HDM clients live at a senior housing site, may try to start a congregate meal there.</p> <p>The Denver Council Regional Government holds quarterly meetings where everyone meets, including those involved in this collaborative and those that are not. Therefore, the regional government somewhat facilitates the network (not completely).</p>	<p>Ability to reach more individuals. Create relationships that can lead to other benefits. For example, if you gain a new partner, they may also be able to get volunteers from them, donations from them, referrals from them, etc.</p>	<p>Staff of partner organizations leave after working with them for a long time- difficult if the priorities of the new staff are different. Also, difficult if a site that is farther out (or is an area where one coordinator covers a lot of ground) and the program coordinator for that specific partner leaves, then the program stops.</p>	<p>VOA has assigned a coordinator to counties, so that if staff turnover among partner agencies occurs, that VOA coordinator picks up the work.</p> <p>Utilize volunteers that are flexible and can adapt to changes. Make sure to discuss this with the volunteer initially.</p>

Organization Name	About the collaborative	Steps taken to build a collaborative for senior nutrition	Benefits of shared network/association	Challenges throughout process of creating a network/association	Steps taken to deal with challenges
<p><b>Inter-Lakes Community Action Partnership,</b> Watertown, SD</p> <p>NOTE: This interview was supposed to focus on Watertown, SD but ICAP serves more than just Watertown.</p>	<p>Surveys are aligned, intake form (includes DOB), site managers are ICAP staff that work with 5-6 towns each.</p> <p>Sounds like the different partners vary. For example, in Watertown, ICAP rents a portion of the senior center and has ICAP staff there. If they use a restaurant, the restaurant does the work and ICAP handles the paperwork, etc.</p> <p>For HDM for example, in Watertown, the senior center makes the HDM meals there.</p> <p>For a smaller town that uses a restaurant, the restaurant makes the HDM and congregate, and then a volunteer is used for delivery.</p>	<p>Interviewee believes that counties started contacting each other to work together. For smaller areas and towns, ICAP tries to educate them and engage the town, but even then, the town may know about ICAP. In addition, a board member may be from a small town they are trying to engage and can help.</p>	<p>Having one office helps with connecting people to services. With such a big network, staff at ICAP can help clients get connected to other services. ICAP has opportunity to direct people to services, etc.</p>	<p>Interviewee has only been there for about three years, but she assumes that challenges of starting this network included: identifying and determining how many staff are needed as the organization expanded, what the expectations are for the staff (i.e. how far they will travel). Additionally, ensuring the organization has vehicles for transportation.</p> <p>Challenges with working in a collaboration: traveling can be a challenge since they serve such a large area. This can be worse with bad weather. Communication among employees can be hard with so many employees. Also challenges with having many programs, and employees may not know about other programs offered.</p>	<p>In terms of understanding the number of staff needed, they created the board then, and conducted needs assessments or administered surveys. Assumes that as counties were added, the organization grew and thus support grew.</p> <p>For handling working in a collaborative: Interviewee discussed taking notes, asking questions, and working with others to determine exact job role.</p> <p>To handle travel issues, planning travel ahead of time has been helpful, and communicating has helped as well.</p>

Organization Name	About the collaborative	Steps taken to build a collaborative for senior nutrition	Benefits of shared network/association	Challenges throughout process of creating a network/association	Steps taken to deal with challenges
<b>Lutheran Social Services,</b> Dickinson, ND	N/A	N/A	N/A	N/A	N/A
<b>Friendly Neighbor Senior Citizens, Inc.,</b> Moscow, ID	N/A	N/A	N/A	N/A	N/A



Organization Name	About the collaborative	Steps taken to build a collaborative for senior nutrition	Benefits of shared network/association	Challenges throughout process of creating a network/association	Steps taken to deal with challenges
<b>Area Agency on Aging, Kalispell, MT</b>	<p>For the organizations that AAA is contracted with, the meals are prepared centrally at the kitchen (although the senior centers have the opportunity to also offer other food items); surveys are centralized and senior center distributes them; volunteers for the other senior centers that are working for the meal program must apply through AAA.</p> <p>For the organization that AAA provides food to (but not meals), they receive the survey as well.</p> <p>The senior centers that AAA works with are their own entities, but the meal program is contracted out through AAA.</p> <p>AAA handles the HDM.</p>	<p>Unknown. Interviewee believes that these contracts with other organizations/agencies has been occurring for a while.</p>	<p>Increased outreach, increased involvement. Create allies; presence is extended to other communities. Able to reach people closer to their place of residence.</p> <p>It was noted that more effort and energy is needed for this collaborative work.</p>	<p>Logistics can be difficult. Also, with the funding from AAA comes requirements for the senior centers, and this can create challenges/difficulties. Additional challenges are added if the senior center has to hire staff to meet the needs of their AAA funding requirements. Also, some boards for organizations in contract with AAA may not have members that have experience with being on a board, working with contracts, etc.</p>	<p>Adjustments have been made to the contracts to ensure they are comprehensive and detailed. AAA meets with the boards each year to go over the contract, and quarterly reports are required from the organizations. Site visits are conducted once a year by the nutrition manager, and this is followed by a meeting with the board. Also, AAA works to attend board meetings for these organizations.</p> <p>AAA has required trainings for boards of each organization, and have made other resources available to the organizations, including additional time with a non-profit consultant if desired.</p> <p>For each of the organizations, their main source of funding is from AAA</p>

## Appendix G: Social Security Block Grant Expenditures

SSBG Expenditures and Percentages for Senior Nutrition by State  
FY2016

	Congregate Meals	Home-Delivered Meals	Total Senior Nutrition	Total SSBG Expenditures*	%
Alabama	\$0	\$0	\$0	\$24,453,248	0.0%
Alaska	\$0	\$0	\$0	\$3,640,366	0.0%
Arizona	\$100,918	\$1,050,718	\$1,151,636	\$30,607,876	3.8%
Arkansas	\$362,333	\$1,147,823	\$1,510,156	\$22,698,215	6.7%
California	\$0	\$0	\$0	\$191,023,020	0.0%
Colorado	\$0	\$0	\$0	\$25,932,266	0.0%
Connecticut	\$0	\$450,000	\$450,000	\$19,131,102	2.4%
Delaware	\$0	\$59,405	\$59,405	\$4,063,133	1.5%
District of Columbia	\$0	\$0	\$0	\$4,969,641	0.0%
Florida	\$0	\$0	\$0	\$100,886,880	0.0%
Georgia	\$0	\$0	\$0	\$49,893,342	0.0%
Hawaii	\$0	\$0	\$0	\$12,452,875	0.0%
Idaho	\$0	\$0	\$0	\$8,881,348	0.0%
Illinois	\$0	\$0	\$0	\$64,845,969	0.0%
Indiana	\$35,296	\$632,157	\$667,453	\$42,253,785	1.6%
Iowa	\$0	\$0	\$0	\$15,301,277	0.0%
Kansas	\$0	\$0	\$0	\$14,348,525	0.0%
Kentucky	\$0	\$0	\$0	\$22,026,998	0.0%
Louisiana	\$0	\$0	\$0	\$24,684,515	0.0%
Maine	\$0	\$385,421	\$385,421	\$7,113,166	5.4%
Maryland	\$0	\$0	\$0	\$29,530,830	0.0%
Massachusetts	\$0	\$0	\$0	\$33,293,069	0.0%
Michigan	\$0	\$0	\$0	\$48,967,028	0.0%
Minnesota**	\$54,437	\$86,281	\$140,718	\$36,484,755	0.4%
Mississippi	\$0	\$1,215,094	\$1,215,094	\$12,710,152	9.6%
Missouri	\$179,177	\$357,991	\$537,168	\$29,961,804	1.8%
Montana	\$0	\$0	\$0	\$5,038,600	0.0%
Nebraska	\$33,811	\$141,111	\$174,922	\$9,296,948	1.9%
Nevada	\$0	\$0	\$0	\$13,567,036	0.0%
New Hampshire	\$0	\$1,521,290	\$1,521,290	\$6,996,384	21.7%
New Jersey	\$23,169	\$165,337	\$188,506	\$46,912,180	0.4%
New Mexico	\$0	\$0	\$0	\$10,305,302	0.0%
New York	\$0	\$0	\$0	\$96,426,133	0.0%
North Carolina	\$0	\$15,101	\$15,101	\$48,767,538	0.0%
North Dakota	\$0	\$0	\$0	\$3,653,954	0.0%
Ohio	\$868,628	\$83,298	\$951,926	\$54,189,658	1.8%
Oklahoma	\$0	\$0	\$0	\$19,162,359	0.0%
Oregon	\$0	\$0	\$0	\$20,253,475	0.0%
Pennsylvania	\$0	\$0	\$0	\$64,854,652	0.0%
Puerto Rico	\$0	\$0	\$0	\$8,195,172	0.0%

	Congregate Meals	Home-Delivered Meals	Total Senior Nutrition	Total SSBG Expenditures*	%
Rhode Island	\$0	\$0	\$0	\$6,369,960	0.0%
South Carolina	\$0	\$0	\$0	\$23,878,428	0.0%
South Dakota	\$0	\$0	\$0	\$3,637,219	0.0%
Tennessee	\$0	\$0	\$0	\$31,147,709	0.0%
Texas	\$0	\$15,864,471	\$15,864,471	\$131,694,234	12.0%
Utah	\$31,824	\$148,706	\$180,530	\$14,322,309	1.3%
Vermont	\$0	\$0	\$0	\$3,095,990	0.0%
Virginia	\$0	\$0	\$0	\$40,947,938	0.0%
Washington	\$0	\$0	\$0	\$34,892,677	0.0%
West Virginia	\$0	\$0	\$0	\$9,145,134	0.0%
Wisconsin	\$0	\$0	\$0	\$28,449,475	0.0%
Wyoming	\$0	\$0	\$0	\$2,886,437	0.0%
<b>TOTAL</b>	<b>\$1,689,593</b>	<b>\$23,324,204</b>	<b>\$25,013,797</b>	<b>\$1,618,242,086</b>	<b>1.5%</b>

SOURCE: Administration for Children & Families, Office of Community Services Division of Social Services, Social Services Block Grant FY2016 Annual Report, State Data Tables, pp. 91-143.

\*Total SSBG Expenditures include SSBG funds only across all service areas and do not include TANF transfers unless otherwise noted.

\*\*Minnesota total for Congregate and Home-Delivered Meals and their Total SSBG Expenditure includes their TANF transfer amount because TANF money was used to fund either congregate or home-delivered meals.