PART I: MISSION, GOALS, AND EXECUTIVE SUMMARY

A. MISSION AND AREAS OF FOCUS

The National Policy and Resource Center on Nutrition and Aging works with the US Administration on Aging (AoA), US Department of Agriculture (USDA) and the Health Care Finance Agency (HCFA) to provide national leadership in Aging, Nutrition, Extension and Long-term Care Networks to reduce malnutrition, dehydration and food insecurity in older adults. The mission is to place food and nutrition services in the mainstream of home, community, extension and long-term care systems that serve older adults.

The National Policy and Resource Center on Nutrition and Aging focuses on:

- Expanding food and nutrition services in home and community based systems to reduce nutrition risk and health disparities in older adults;
- Broadening care management of older adults to include interdisciplinary nutrition risk reduction strategies to improve quality of life, promote independence, and decrease early and costly nursing home admissions and hospitalizations;
- Developing a nationwide applied nutrition and aging research network based on University/Community Agency partnerships to document Older Americans Nutrition Program outcomes on participants; and,
- Reducing malnutrition and dehydration among nursing home residents to improve quality of long term care (LTC).

The National Policy and Resource Center on Nutrition and Aging provides opportunities for faculty and graduate students to develop and implement outcomes based applied research while providing service to aging and nutrition networks in Florida and nationwide. The Center supports dissertation and thesis research projects that demonstrate the effectiveness of nutrition care with older adults. The Center is the sole center that addresses practical nutrition problems in meals-on-wheels programs and in nursing homes. Through its demonstration projects, the Center seeks to improve the food, nutrition and related services that are delivered in Florida and elsewhere to reduce Medicaid and Medicare expenditures by improving or maintaining the nutritional status of older adults. The Center coordinates the Graduate Certificate in Gerontology and Nutrition for the Department of Dietetics and Nutrition.

B. ORGANIZATION, EXTERNAL TRENDS AND STRATEGIC DIRECTIONS

1. Organizational issues:
   The National Policy and Resource Center on Nutrition and Aging is housed in the Department of Dietetics and Nutrition, School of Health, College of Health and Urban Affairs. Wellman is Center Director; Weddle, Co-Director. Wellman (Professor) and Weddle (Associate Professor) are full-time tenured faculty members in the Department of Dietetics and Nutrition. L. Rosenzweig, MS, RD, was hired in January 2000 as a full-time Associate Director of the Center on an A&P line.

2. Advisory Board member: NA

3. External Trends
   - Aging of America: 65+ group will grow from 34 million (13%) today to >53 million in 2020 and 70 million (20%) in 2030. Minority older adults will increase from 14% today to 27% of the 60+ population in 2030.
   - Older Adults Consume a Disproportionate Share of Health Care Resources: 13% of US population account for about one-third of health costs annually—$330 billion of the nation’s $1 trillion health tab.
   - Managed Care Reshaping Delivery of Health Services: increasing emphasis on home and community based services to contain costs; increasing numbers of frail homebound older adults at nutrition risk.
   - Importance of good nutritional status to health: nutrition as preventive medicine and high rates of nutrition risk among older adults are becoming more readily acknowledged.
3. External Trends, continued
   • Congressional appropriations for the Older Americans Act (OAA):
     • The OAA Title IV continues with a small appropriation, despite the national need for research and demonstration projects.
   • Nursing home residents are among the sickest and most vulnerable populations:
     • The Senate Select Committee on Aging and the GAO are concerned about the high incidence of malnutrition and dehydration in nursing homes. HCFA is putting more emphasis on LTC nutrition.
     • One-fourth of nursing homes nationwide have serious deficiencies, the majority of which are nutrition-related problems: unintended weight loss, dehydration, pressure ulcers, feeding assistance for non-independent eaters.

4. Strategic Directions and Areas of Emphasis.

Five years from now, the National Policy and Resource Center on Nutrition and Aging will:
   • Continue its advocacy for reducing nutrition risk and food insecurity among older adults by positioning food and nutrition services within the mainstream of home and community based social, health, long-term care and Extension systems;
   • Continue policy development, information dissemination, and training and technical assistance in cooperation with the federal Administration on Aging (AoA), the USDA Extension Program, state units on aging (SUAs), state Extension Programs, and tribal organizations, as well as local aging projects and programs;
   • Be involved in international nutrition and aging issues in this Hemisphere; and
   • Expand its focus on quality of care in long-term care facilities in relation to nutrition, dehydration and nutrition staffing.

Reflecting national and state health cost containment trends the National Policy and Resource Center on Nutrition and Aging will continue to emphasize:
   • Expanding food and nutrition services in home and community based systems to reduce nutrition risk and health disparities in older adults;
   • Broadening care management of older adults to include interdisciplinary nutrition risk reduction strategies to improve quality of life, promote independence, and decrease early and costly nursing home admissions and hospitalizations;
   • Developing a nationwide applied nutrition and aging research network based on University/Community Agency partnerships to document Elderly Nutrition Program outcomes on participants; and,
   • Reducing malnutrition and dehydration among nursing home residents to improve the quality of long term care.

C. ANNUAL AND LONG RANGE GOALS

GOAL 1: Document relationships among nutritional status, health, independence and quality of life in older adults. (Addresses University Goal III)
   Assessment Criteria (Measurable Outcome): Dissemination of outcome data via journal articles and other publications to encourage nationwide implementation of best practice models that reduce elder malnutrition risk in home and community based care systems.
   2000-2001 Objective: Design and implement outcome evaluations and feasibility studies on expanded food and nutrition services in home and community based service systems.
   Accomplishment: Morning Meals on Wheels Pilot Project completed and Final Report published online.

GOAL 2: Promote the expansion of food and nutrition services across the continuum of home, community and long term care systems for older adults. (Addresses University Goal III)
   Measurable Outcome: Improved outcomes in state-reported NAPIS Nutritional Checklist Scores through targeted interventions for older adults at nutritional risk.
   2000-01 Objective 1: Develop national policies, position statements and congressional testimony on nutrition
risk reduction that includes nutrition screening, assessment, interventions and care management in home, community and long-term care systems.

**Accomplishment**: Assembled a national collection of policies and procedures from all State Units on Aging. Began to develop the “Best Practices Toolkit” per the Cooperative Agreement with our grant agency.

**2000-01 Objective 2**: Development of a new nutrition risk survey to document performance outcome measures for Elderly Nutrition Programs nationwide.

**Accomplishment**: Center participated as a consultant to Westat on the development of POMP on nutrition, per request of the US Administration on Aging.

**2000-2001 Objective 3**: Facilitate the implementation of the Nutrition 2030 Expert Advisory Council strategic initiatives.

**Accomplishment**: Funding limitations decreased activities in this area.

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**GOAL 3** Train Aging, Nutrition, Extension Network and LTC professionals to provide a continuum of food and nutrition service in home, community, long-term care systems. (Addresses University Goal IV)

**Measurable Outcome**: Greater numbers of persons with special knowledge and skills to address multifaceted aspects of nutrition risk in older adults.

**2000-2001 Objective**: Expand the capacity of rural Extension Programs to target the most nutritionally needy older adults.

**Accomplishment**: Negotiations underway with three state Extension programs to develop model projects.

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**GOAL 4** Serve as the applied gerontological food and nutrition resource for the Aging, Nutrition, Extension Networks and LTC professionals nationally. (Addresses University Goal IV)

**Measurable Outcome**: Increased interactions with Network professionals and numbers of visitors to the Center’s website.

**2000-2001 Objective**: Disseminate nutrition and aging information online and via traditional means, with an increased emphasis on the role of nutrition in reducing health disparities and achieving health equity in older adults.

**Accomplishment**: Center website re-organized and expanded. Center website promoted on various listserves and in national publications.

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**GOAL 5**: Continue to attract external support for Center activities. (Addresses University Goal VI)

**Measurable Outcome**: Increased external support for Center programs, projects and other activities.

**2000-2001 Objective**: Compete successfully for core support of Center through federal OAA Title IV and attract other support, including industry and community funds; encourage graduate assistants to apply for scholarships and grants.

**Accomplishment**: The FFY1999 special report language in the Senate Appropriations Committee lauded the Nutrition 2030 work of the FIU Center and funding continued with an award of $197,000 for 2/1/99-1/31/00. In FFY2000, the Center did not have a federal earmark but worked closely the federal Administration on Aging staff to plan for another cooperative agreement.

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**D. 2001-2002 ANNUAL GOALS**

**GOAL 1**: Document relationships among nutritional status, health, independence and quality of life in older adults. (Addresses University Goal III)

**Measurable Outcome**: Dissemination of outcome data via journal articles and other publications to encourage nationwide implementation of best practice models that reduce nutrition risk in older adults in home and community based care systems.

**2001-2002 Objective**: Design and implement outcome evaluations and feasibility studies on expanded food and nutrition services in home and community based service systems.
GOAL 2 Promote the expansion of food and nutrition services across the continuum of home, community and long term care systems for older adults. (Addresses University Goal III)

**Measurable Outcome:** Development of SUA Best Practices Toolkit

**2001-2002 Objective:** Complete and post online a Toolkit to promote best practices at the state level.

GOAL 3 Train Aging, Nutrition, Extension Network and LTC professionals to provide a continuum of food and nutrition service in home, community, long-term care systems. (Addresses University Goal IV)

**Measurable Outcome:** Develop pilot projects across the continuum of care that have the potential to improve the nutritional status of older adults who are served in federal nutrition assistance programs and in extended care settings.

**2001-2002 Objective:** Publication of journal articles that describe research projects.

GOAL 4 Serve as the food and nutrition resource for the Aging, Nutrition, Extension Networks and LTC professionals nationally. (Addresses University Goal IV)

**Measurable Outcome:** Increased interactions with Network professionals and numbers of visitors to the Center’s website.

**2001-2002 Objective:** Implement a listserv and distribution list and begin bi-weekly posting of timely information to nutrition and aging policymakers and practitioners

E. EXECUTIVE SUMMARY

1. **Major Activities - Prior Year 2000-2001**

   The National Policy and Resource Center on Nutrition and Aging continued working to help the Aging Network develop and implement a comprehensive, coordinated (a.k.a. seamless) national system to increase the quality and years of healthy life by matching food and nutrition needs with culturally appropriate services in later years. The Center is one specific way that the Older Americans Act is beginning to build a food and nutrition infrastructure for its Older Americans Nutrition Program.

   In the policy area, the Center monitors and disseminates information about emerging evidence on nutrient needs (RDAs/DRIs) and dietary guidance for older adults, develops and promotes cost accountable ways to improve nutrition screening, assessment and services and assists in advocacy efforts to justify increased revenues and expand outreach. The Center is helping position nutrition in primary prevention and health promotion, interpreting eligibility requirements to improve outreach to the most needy, especially among minorities and in rural areas, promoting the delivery of meals beyond five nutritious lunches per week based on individualized need and encouraging menu adaptations for chronic diseases and cultural sensitivity. The Center is working to help the Older Americans Nutrition Program minimize home delivered meal program waiting lists, increase volunteer resources and funding, maximize available dollars through Medicaid and private pay clients, improve coordination with other community services such as home care, friendly visiting, shopping assistance, CSFP-food packages, adult day care, and improve program accountability through technology-assisted administrative management and budget planning.

2. **Major Activities - Coming Year 2001-2002**

   The National Policy and Resource Center on Nutrition and Aging continues with its mission of helping Older Americans Nutrition Program participants improve their quality and years of healthy life. The goal is to help Programs meet the challenge of reducing health disparities in their participants through improved outreach and culturally sensitive nutrition services. The objectives are to improve nutrition-related outcomes in Program participants, especially minorities, and to increase programmatic accountability. A special project seeks to improve nutrition care in nursing homes to reduce malnutrition and dehydration. This year, the abbreviated LTC project will focus on nutrient, calorie and fluid intakes and the accuracy of their measurement in Long Term Care (LTC) facilities to reduce malnutrition and dehydration in nursing homes residents. The Center, through Nutrition 2030, will continue to support the Older Americans Nutrition Program through training, technical assistance, information dissemination, knowledge building and policy analysis, outcomes measurement and partnership building.

   Expected outcomes are improvements in (1.) Perceived value of Older Americans Nutrition Program nutrition services by the Aging Network, including Indian Tribal Organizations, and other programs serving minority populations, (2.) Access to timely practical nutrition and aging information and resources, (3.) Use of age-
appropriate Dietary Reference Intakes and Dietary Guidelines, (4.) Marketing and measuring outcomes in congregate programs and provision of culturally competent nutrition services, (5.) Nutrient, calorie and fluid intakes and the accuracy of their measurement in Long Term Care (LTC) facilities to reduce malnutrition and dehydration in nursing home residents.

Major products will include (1.) Expansion of Center’s Website with NAN Listserve and LTC Institute; (2.) 4 Meetings: 2 Issue Panels, SUA Administrators/Nutritionists, N4A Intensive; (3.) Outcomes Workshop on culturally competency; (4.) 6 journal and 8 newsletter articles, 5 sets of meeting backgrounders, proceedings, recommendations, 8 presentations at Aging Network, LTC groups; (5.) Recommendations for nursing homes regarding menus and a method to more accurately measure food intake.