

Re-Imagining
the Congregate
Meal Program:
Innovate!
Educate!

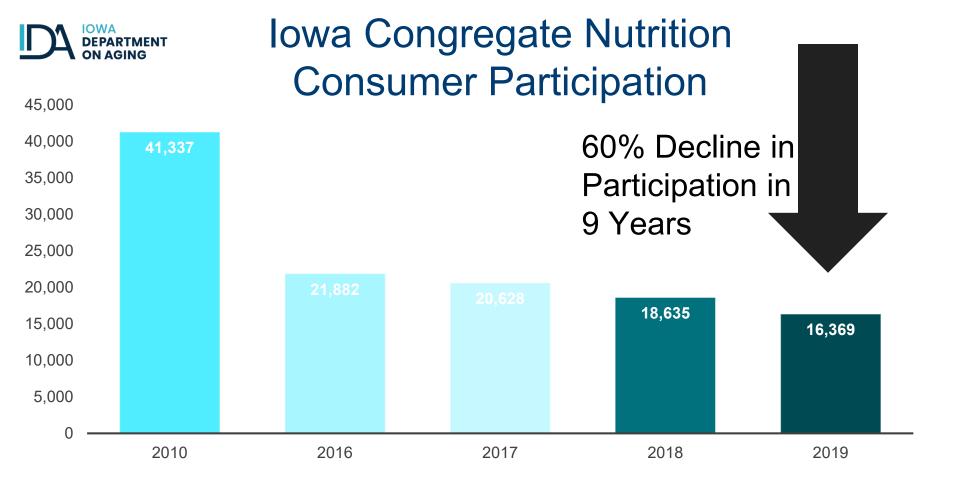
December 9, 2020



Hello!

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Condition of Iowa's Congregate Meal Program

- August, 2018-December, 2018
- · Identified barriers

Nutrition & Health Promotion Trainings

- April, 2019-April, 2020
- Addressing barriers through building new knowledge

Congregate Nutrition Revitalization Action Plan

- October, 2019-present
- Addressing barriers and using new knowledge to develop action plan.
- Addressing system issues
- Implement Mini Grants



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Barriers Expressed:

- Nutrition requirements: Strict nutrition and menu requirements
- Menus: Lack of choices. "Panera" vs. "Liver and Onion"
- Environment: Institutional environment. Stigma. Bullying/cliques.
- Funding: Limited and much needed
- Intake form: Long and people don't want to fill out
- Marketing: Lack of awareness



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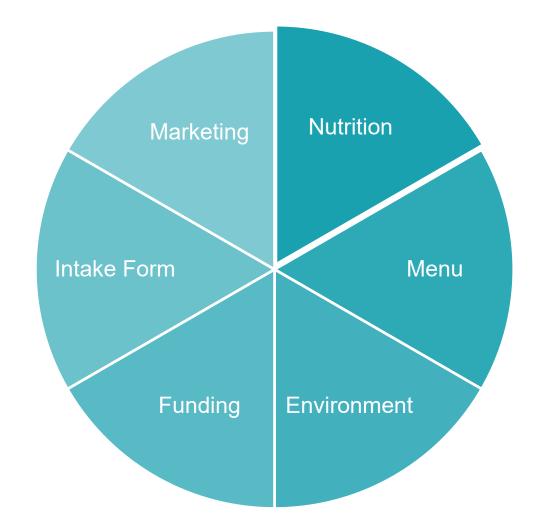
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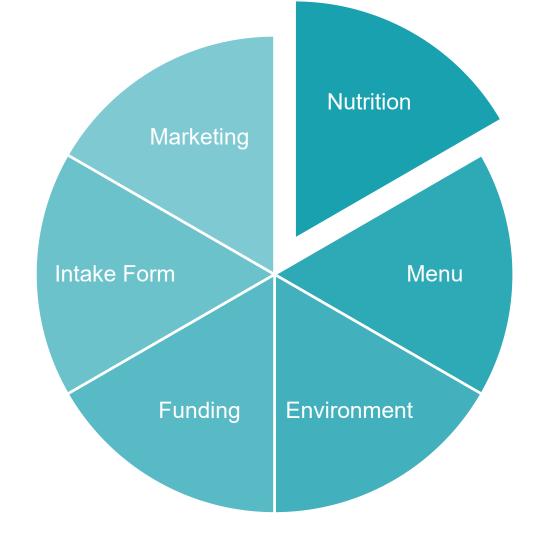
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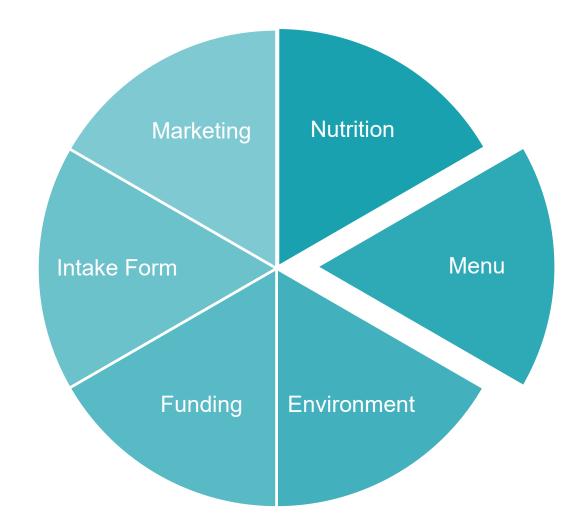








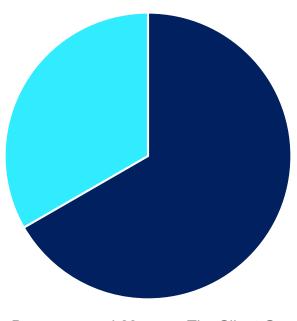






Why do we need to attract Baby Boomers?





■ Baby Boomers aged 60+ ■ The Silent Generation



Serving Two Generations

The Silent Generation



- Ages 75+
- "Liver and Onion"
- Roast Turkey
- Meatloaf
- Meat and Potatoes
- Mashed Potatoes
- Egg-salad sandwiches
- Grilled Cheese with Tomato Soup
- Green beans, peas, carrots

Baby Boomers



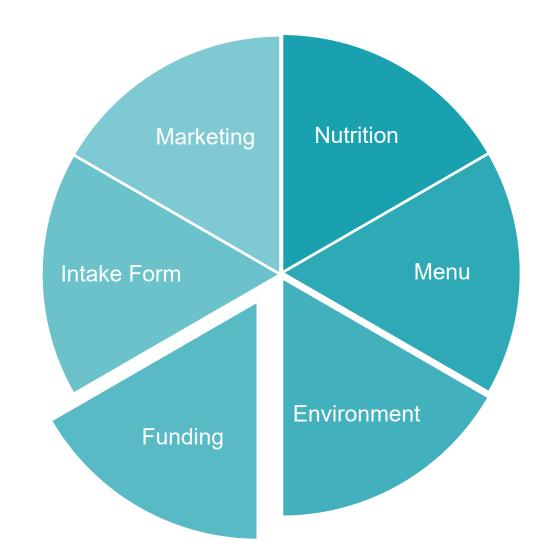
- Ages 53-74
- "Panera Seniors"
- Like traditional foods with a twist
- Beef items
- Sandwiches and Wraps
- Salads with ranch or Caesar dressing
- Seafood
- Tex-Mex
- Chinese food

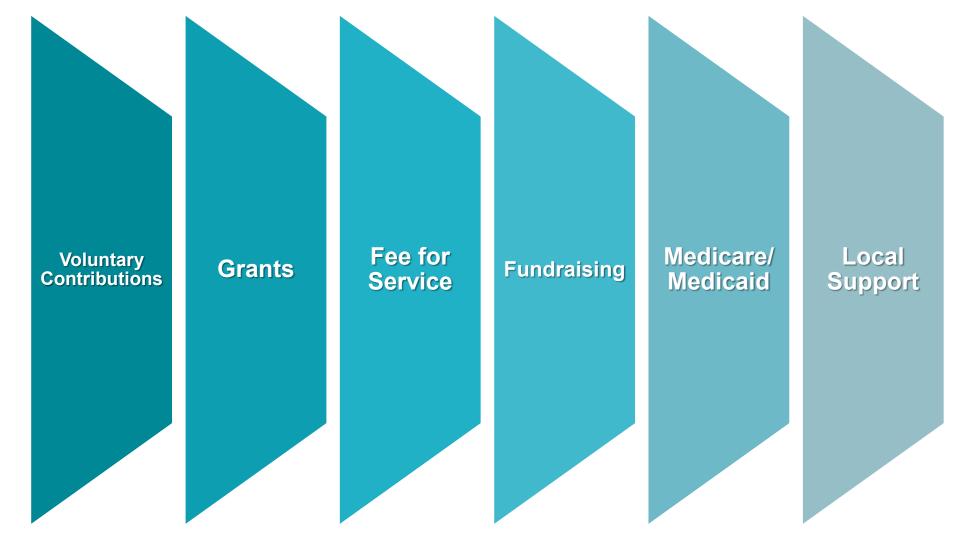


"Just because there is a space where a meal is provided does not mean people will attend."

Nutrition Marketing Menu Intake Form **Funding Environment**





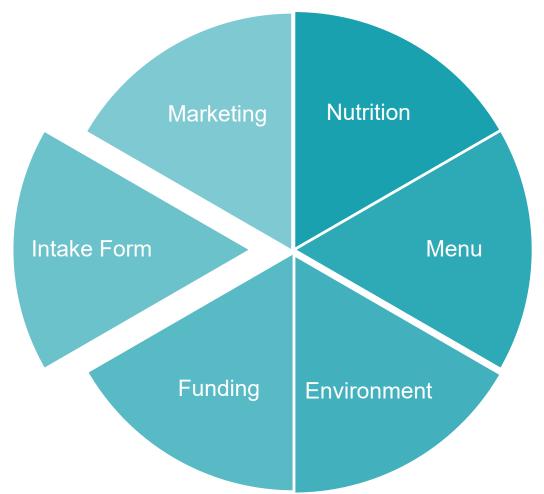




- 1. Start a Plan
- 2. Identify Assets
- 3. Pick a Strategy
- 4. Marketing
- 5. Go!









AGING & DISABILITY SERVICES INTAKE FORM

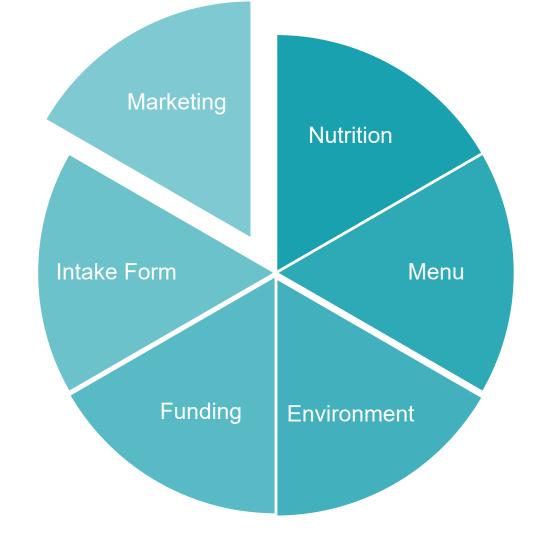
The service you are receiving is paid for entirely or partially by funds from the federal Older American's Act and the State of Iowa. Your responses on this form are confidential. The Department on Aging uses this information to comply with reporting requirements and research the needs of older Iowans. Thank you.

Today's Date:	First Name:	MI:	_ Last Name:					
Address:	City:		State:	Zip:				
Home Phone: ()	Cell Phone: ()	Email:					
Date of Birth://	or Age:							
Total number of people in your household (including yourself):								
Do you live alone?	Yes No							
Check Your Annual Total H	lousehold Income Range:							
\$0 - \$12,490 \$21,331- \$25,750 \$34,591- \$39,010	\$25,751 - \$30,170	\$30	,911 - \$21,330 ,171 - \$34,590 ,431 - or Above					
Veteran Status: Not a Veteran Veteran Veteran Spouse/Dependent								
Gender: Female	Male Other							
Check the racial category or categories that apply to you:								
White African American/Black American Indian/Alaskan Native Asian								
Native Hawaiian/Other Pacific Islander								
Are you Hispanic or Latino? Yes No								
Primary language? English Other:								
Does Medicaid pay for some of the services you receive in your home, such as homemaker, transportation, organizing your medications, bathing assistance, or meals? Yes No Don't Know								
In the past 30 days, how often were these statements true?								
I have worried whether my food would run out before I got money to buy more.								
Often Sometimes Never The food that I bought just didn't last and I didn't have money to get more.								
	ometimes Never	i i nave mon	ey to get more					

28	Meiahborhood cafe
	Sign up today to enjoy wholesome meals with friends!

Today's Date: / /	Prefer	Preferred Phone: ()					
First Name:	Last Name:			MI:			
Date of Birth: / /	Email:	Email:					
Address:	City:		State:	Zip:			
The following data is asked by our funders and will not be disclosed by name.							
Gender: ☐ Female ☐ Male ☐ Other Primary Language: ☐ English ☐ Other:							
Check the racial category that applies to you:							
☐ White ☐ Asian ☐ African Ame	rican/DI	ack 🗖 Americar	Indian/Alas	kan Nativo			
Wille L Asian L Amcan Ame	ricari) bi	ack 🗖 American	i iliulali/Alas	kali Native			
□ Native Hawaiian/Other Pacific Islander □ Other:							
Are you Hispanic or Latino?		Are you a veteran? Yes No					
Do you live alone?							
If Yes, is your annual household income more than \$12,760?			☐ Yes	□ No			
If No, is your annual household income more than:							
If 2 people, is your annual household income more than \$17,240?				□ No			
If 3 people, is your annual household income more than \$21,720?			☐ Yes	□ No			
If 4 people, is your annual household income more than \$26,200?							
If 5 people, is your annual household income more than \$30,680?							
If 6 or more people, is your annual household income more than \$35,160?							
Are you interested in learning about any other services?							
□ Nutrition & Meals □ Transportation □ Legal Assistance □ Caregiver Support							
☐ Health and Fitness Classes ☐ Options to stay at home ☐ Options to return to home							







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Mini Grant Projects:

- Salad Bars
- Panini Press and Soup Café
- Re-Branding
- Marketing and Outreach
- Restaurant Voucher Programs
- Choice Menu Options
- Re-locate to a beautiful, historic location
- Creating a Diner-style site



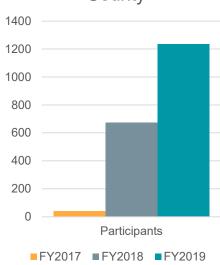


A Second Call to Enhance Your Health

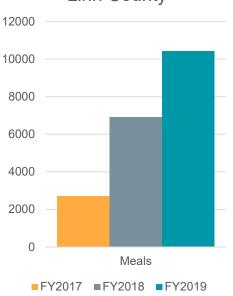
- Four pop-up, catered sites in community buildings: Library, Senior Center, Church, and Parks Building
- Salad Bars & Choice Menus
- Flexible Serving time 11:30am-12:30pm
- Evidence-Based Programming and Nutrition Education offered
- Successful Project Partners



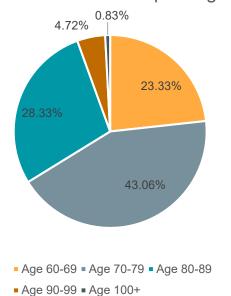




Congregate Meals Linn County



Encore Café Participant Age



What's next?

Take advantage of visibility now!

Strengthen those community partners and plan for re-opening stronger.







Thanks!

Any questions?

Alexandra Bauman, RD LDN Contact: alexandra.bauman@iowa.gov