

COMMISSION ON MALNUTRITION PREVENTION AMONG OLDER ADULTS

DECEMBER 2023
YEAR 6 ANNUAL REPORT

Executive Office of Elder Affairs
One Ashburton Place, Boston, MA 02018



Maura T. Healey
Governor

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Introduction: MGL. Part 1. Title 2. Chapter 19A Section 42

Pursuant to [MGL Ch. 19A, Sec 42](#), the Commission on Malnutrition Prevention Among Older Adults submits this annual report to the House and Senate Chairs of the Joint Committee on Elder Affairs and Chairs of the Senate and House Committees on Ways and Means.

Membership

2023 Malnutrition Prevention Committee Members

Representing	Current Appointee
Secretary of Elder Affairs Designee (Chair)	Adriene Worthington, Chair Amy Sheeley, Recording Secretary
Commissioner of Public Health (Designee)	Diana M. Hoek
Commissioner of Transitional Assistance (Designee)	Penny McGuire
Commissioner of Agricultural Resources (Designee)	Rebecca Davidson
Member of the House of Representatives (Designee)	Representative Hannah Kane
Member of the House of Representatives (Designee)	Open
Member of the Senate (Designee 1)	Mary Giannetti
Member of the Senate (Designee 2)	Open
Physician	Open
University Researcher	Open
Community Based Registered Dietitian or Nutritionist Working with Program Funded by Older Americans Act	Margery Gann
Representative of a Hospital Integrated Health System	Kris M. Mogensen
Nurse Working in Home Care 1	Sameul Eyang
Nurse Working in Home Care 2	Open
Registered Dietitian or Nutritionist Working in Long-Term Care	Tina Reily
Registered Dietitian or Nutritionist Representing MA Academy of Nutrition and Dietetics	Open
Representative of MA Councils on Aging	Pamela Hunt

2023 Malnutrition Prevention Commission Meeting Minutes

In 2023, the Malnutrition Prevention Commission (MPC) held two virtual meetings on August 29, 2023, and November 30, 2023. Minutes from the meetings are shown below.

August 29, 2023

Welcome and Introductions

- Secretary Elizabeth Chen provided an introductory overview. She stated that 10 million meals served is also an opportunity for 10 million wellness checks and shared a story on the importance of the meal delivery program and its role in reducing food insecurity and isolation within the older adult population. She asked the group to think broadly about barriers to accessing appropriate levels of nutrition for older adults. Examples of barriers may include affordability, mobility, biopsychosocial changes affecting appetite, limited offerings in residential settings, etc.
- Adriene Worthington reviewed the definition of malnutrition, specifically with older adults, and reviewed the physiological changes as we get older that may impact one's nutritional status.
 - Diseases associated with malnutrition - cardiac, renal, cancer and poor dental health.
 - Protein-calorie malnutrition from hormonal changes, metabolism changes, and inadequate intake can lead to malnutrition, specifically muscle loss.
 - Estimated \$90 Million directly related to healthcare costs related to malnutrition in MA¹.

Mandate and History of Commission

- Review of Commission Mandates
- Review of primary activities from past years
 - Two workgroups were formed in 2018 to create recommendations for future Commission activities.
 - Data Collection and Management Work Group
Goals: (1) Consider the strategies needed to improve data collection and analysis to identify malnutrition risk; (2) assess the risk and measure the incidence of malnutrition occurring in various settings across the continuum of care and the impact of care transitions.
Recommendation 1: Massachusetts Executive Office of Elder Affairs will require all Area Agencies on Aging (AAA), Aging Service Access Point (ASAP) and nutrition service providers to include the Malnutrition Screening Tool (MST) in their intake process.
Recommendation 2: Encourage health care, primary care and other providers working in a spectrum of settings such as assisted living facilities, community health centers and other outpatient settings, and food banks to use the MST at intake to identify their clients/patients with high malnutrition risk.

1. Defeat Malnutrition Today coalition. (2020). *Advancing Policies for Quality Malnutrition Care in Older Adults: A Toolkit for State Legislators*. Retrieved from Defeat Malnutrition Today: https://defeatmalnutrition.today/wp-content/uploads/2023/05/ANHI-2020-National-Blueprint-Toolkit_State_Legislators_AUG_2022_update_0.pdf

Recommendation 3: Encourage hospital discharges to flag “malnutrition risk” and refer to nutrition counseling in community organizations (e.g., ASAP) using Academy of Nutrition and Dietetics MQII discharge protocol.

- Public Awareness Work Group

Goals: (1) Identify evidence-based strategies that raise public awareness of older adult malnutrition; (2) evaluate strategies used by community nutrition programs.

Recommendation 4: Introduce legislation to establish an annual Massachusetts Older Adult Malnutrition Awareness Week in May to align with the national Older Americans Month.

Recommendation 5: Encourage healthcare stakeholders to collaborate on conducting the Malnutrition Awareness Campaign at state legislative gatherings and community health promotion events.

Recommendation 6: Encourage all member agencies to publish and promote evidence-based malnutrition resources designed for older adults, care providers and professionals via websites, social media, and printed materials such as newsletters.

- 2019 Activities

- Malnutrition Screening Tool (MST) was added to ASAP Nutrition Intake Assessment for all new clients and was added to forms used for Medical Nutrition Therapy (MNT).
- Patient Ping introduced, providing patient data across continuum of care.
- 82 malnutrition prevention clinics during May (Older Americans Month), educated over 3,000 people on malnutrition awareness and 800 older adults screened; screened 200 homebound older adults with MST and Fatigue, Resistance, Ambulation, Illnesses, Weight Loss (FRAIL) screener.

- 2020 Activities

- Do a COVID-19 Check Campaign (April 2020)
- Be a Nutrition Neighbor Campaign
- Participation in Governor Baker’s Food Security Taskforce
- Malnutrition Awareness Week (May 2020)

Commission Goals for 2023 and Beyond:

- Led Commission members in a discussion about the work ahead and identified the following:
 - Samuel Eyong – Spread awareness on Malnutrition especially with primary care provider (PCP) and add to a list of diagnoses.
 - Tina Reilly - A lot of resources are available, but members may not be aware so more outreach and inclusion for our older adults. Include families and care teams. Have social workers be aware of resources.

- Margery Gann - Screening is happening but what we do with those results is important. Possibly partner with the Alzheimer's Association. Unintended weight loss is an early sign of cognitive decline. How can we leverage the screening data we already have?
- Penny McGuire - Working more collaboratively using existing resources in our respective agencies to minimize duplication and maximize impact.
- Rebecca Davidson from MDAR - Focusing on protein rich foods versus not just fruits and vegetables as incentives. Expand role of local protein sources.
- Jennifer Donnelly - How do we address the Supplemental Nutrition Assistance Program (SNAP) Gap better?
- Penny McGuire stated that there are over 100 SNAP Outreach Providers working with DTA and the agency is working on efforts to address the SNAP Gap. She can provide specific data at the next meeting.
- Tara Hammes stated that there are currently 30 Councils on Aging that are SNAP Outreach Providers.
- Tina Reilly asked if the group would be willing to have a booth at the MA Academy of Nutrition and Dietetics (MAND) Conference for outreach and education.

Open Spots on Commission

- Discussed open positions and requested Commission members share names of people who they think may be a good fit for and interested in participation.

Upcoming

- American Society for Enteral and Parenteral Nutrition (ASPEN) Malnutrition Awareness Week (MAW) September 18-22, 2023
- [NutritionCare.com/MAW](https://www.nutritioncare.com/MAW) – Malnutrition Solutions Center for resources
- Diana Hoek reviewing the Governor's Proclamation for Malnutrition Awareness Week
- Executive Office of Elder Affairs will not be acting in the MAW ambassador role this year. Will focus on activities in May - Older Americans Month.

Future Meetings

- Group agreed to meet quarterly.
- Revisit workgroups to focus on projects prior to meetings.
- Next Meeting will potentially be the last week of November, Adriene will send a Doodle Poll.
- Adriene Worthington adjourned the meeting at 3:15 PM.

Meeting Materials

- [Meeting slide deck](#)

- A copy of [M.G.L. Part I Title II Chapter 19A Section 42: An act establishing a commission on malnutrition prevention among older adults.](#)

November 30, 2023

The meeting was called to order at 2:05 PM by Adriene Worthington.

Welcome and Introductions

- Adriene welcomed all attendees, participants who had not joined in the previous meeting introduced themselves.

A continuance of the discussion on Data Collection and Public Awareness activities

- Margery suggested working with Alzheimer's Association; unintended weight loss is an early sign of cognitive decline. Suggest a semi-cold call to Alzheimer's Association MA/NH chapter and hear their thoughts.
 - Change in appetite and weight loss isn't always well diagnosed by PCP, healthcare provider.
 - Mini-Cog (standardized screening tool to help detect early-stage dementia) is assumed to not be consistently done.
- Educational outreach targets
 - Physicians on importance of screening patients; may be difficult due to appointment time limitations, not yet part of pay for performance.
 - Include education in hospital grand rounds?
 - Overall agreement by the Commission that community organizations will be key partners to disseminate information.
 - Direct to clients and family members, caregivers
 - MA Councils on Aging
 - Community Health Workers
 - Discharge teams within hospitals
 - National Center for Equitable Care for Elders (Tara is on Advisory Board)
 - May be difficult to measure outcomes, track number of clients reached.
- SNAP Gap – people who are eligible for SNAP but not connected to the service.
 - Data share with EOE and DTA – ASAP clients who are enrolled in SNAP.
 - If they haven't used benefits in 30+ days, ASAP team to contact consumer to learn why, offer assistance where needed.
 - Depending on ASAP bandwidth and data availability potential outreach to consumers to discuss utilization of benefits and if assistance is needed.
 - Per DTA, client messaging is robust. Penny will connect with the Senior Outreach Unit to learn if there is additional older adult gap data to share.
- Public Awareness
 - Resources are available, but people may not be aware of them so more outreach and inclusion of older adults is needed.

- Create “information exchange” across state agencies to share resources, reduce duplicative activity, ensure language and messaging align.
 - Which agency would “own” this?
 - Rebecca D. mentioned Basecamp, platform for both state and non-state agencies where different teams can interact with same project; perhaps State Nutrition Action Council can create a team for this group for resource sharing.
 - Penny will reach out to see what can be done.
- Anything shared on exchange would already be approved and vetted by agency provider.
 - IT will need to review exchange to ensure security.
 - In terms of pooling data, that's a very long-term project because of requirements around it.
- Samuel- This loops back to the best way to share info with healthcare: trying to negotiate with hospitals, rehab facilities, to include malnutrition as a main diagnosis. Necessitates need to get resources into hospital, rehab, LTC facilities.
 - Margery – LTC has had to put emphasis on nutrition because DPH is putting emphasis on it.
- CMS is assessing Global Malnutrition Composite Score – is considering the transition after discharge, make sure nutrition care planning is included for people who return home.
 - Tina - Hebrew Senior Life does food insecurity screening; includes post-discharge care planning in MSW education.
 - Kris – Believes Global Malnutrition Composite Score is optional. People need timely screening, nutrition assessment, and care plan creation and implementation.
 - One challenge is providers not understanding how they can support patients in the transition from an acute setting to home.
 - RNs/MSW are understaffed and overloaded.
- Jennifer – could we connect with ACO MSW and RN staff working with patients on preventing readmission post-discharge?
- MA Academy of Nutrition and Dietetics (MAND) annual conference in March.
 - Good outreach opportunity to clinical and community nutrition practitioners.
 - Table would come at a cost (MPC has no budget), what if we pitch a session?
 - Describe MPC, describe current issues in this space, share resources.
 - Tina will reach out to MAND contact to learn more about these two options.

Consumer Satisfaction Survey (Older Americans Act Nutrition consumers)

- Annual survey available to all congregate dining participants and those who receive home delivered meals.
- Conversation ongoing with EOEI Evaluation team on creating a sample for evaluation purposes.
- Good information to include if we can do a presentation at the MAND conference.
 - Pam- What does the follow up look like at the ASAP/AAA level? If a high percentage of respondents indicate they need assistance, what is done?
 - Adriene - Surveys are completely anonymous so there isn't a way to assist individuals, however, would be interesting to see how ASAP/AAA use the data.
 - Adriene will follow up with ASAP nutrition directors to learn more about data usage.

May – Older Americans Month

- In 2019, during Malnutrition Screening Day, older adults were given a Malnutrition Screening Tool to fill out, after the scoring was described they were asked to bring the tool to their primary care practitioner., There was no data collection from this suggestion.
- Malnutrition screening event last done May 2019, plan for another screening day in May 2024: has frailty and prevalence changed from 2019?
 - Amy – screening data was compiled and listed in annual [MPC Annual Report from 2019](#).
- Screening day: at congregate sites, there was a goal number at each site, kickoff at one site with speaking program, was around lunchtime.
 - A lot of outreach was done around it
 - Unsure where the collected data would be
- In 2019, proclamation from Mayor Walsh.
 - Would Lt. Gov Driscoll be interested in providing a proclamation for 2024?
- Medicare only covers outpatient nutrition costs for diabetes and renal, not malnutrition, care will be challenging until CMS includes malnutrition as a billable service.
 - [Medical Nutrition Therapy Act](#) reintroduced on November 14, 2023.
 - 2024 screening data should be included in the annual report to legislature to encourage Medicare coverage of malnutrition as part of the White House National Strategy on Hunger, Nutrition, and Health.
 - Can/should MA Home Care be involved?
- Be a Nutrition Neighbor campaign – redo it for 2024?
- Publish a paper from Commission comparing the 2019 and 2024 screening data.

Open Floor, Agency Updates

- Kris – serving on ASPEN board, working on a coding session with American Society for Nutrition, Academy of Nutrition and Dietetics, a medical coding society, and Defeat Malnutrition Today to write up guidelines on what Registered Dietitians, MD, etc., should be doing in this space and reviewing denials of malnutrition coding for

reimbursement. Discussions with CMS on how to communicate this with private insurance.

- February meeting topic ideas
 - Review grants that exist to provide patients with food provision upon discharge. Are there insurance companies that include this as a service?
 - If so, which ones, and is any a MA ACO?
 - MCO/ACO – ages 60-65 are only estimated group who have both ACO and MCO
 - Patient navigators – what is their role, is it robust?
- Nutrition incentives for protein foods
 - Inclusion of protein in the Healthy Incentives Program (HIP) would require a legislative change.
 - Some federal grant programs that support protein exist, DESE is working on purchasing foods from farmers in underserved communities.
 - Are there USDA programs that could help support the work we do by increasing the amount of local food provided to older adults?
 - Benefit to the consumer, the program, and the farmer.
 - Gus Schumacher Nutrition Incentives Program (GusNIP)?
- MCOA received an influx of SIG from legislature, \$500,000 for 8 topic areas: of 160 proposals, 20% nutrition-related.
 - Garden beds and garden accessibility were the top funding requests.
- N. Attleboro: Congregate meals are not what people want (soup and sandwich for lunch would be better), numbers have not returned to those seen pre COVID-19
 - Adriene suggested discussing the topic with the ASAP nutrition team directly.
- Restaurants and food trucks are set to participate in SNAP Restaurant Meals Program soon – three populations (older adults, people experiencing homelessness, people with disabilities) will be able to use their SNAP for meals.

Adriene adjourned the meeting at 3:55PM

MPC Member Agencies Report and Accomplishments

Executive Office of Elder Affairs (EOEA) Nutrition Program Report

Consumer Satisfaction Survey: Approximately 8,300 older adults participating in the Nutrition Program responded to a survey assessing the impact and quality of services. Meals are provided to adults aged 60 and over at meal sites or they are delivered to those at home who are isolated, frail, and/or homebound. Over 8.7 million meals were provided to approximately 51,000 older adults to help improve their nutrition and health, as well as reduce food insecurity and loneliness. These meal menus include medically tailored and culturally diverse meal types. Over 7,000 volunteers contributed approximately 45,000 hours to this program through the year. Other nutrition services provided include nutrition education, counseling, and MNT.

Promote Food Security

- Over 1/3 (34%) of home delivered meal respondents reported they would have a shortage of food in the house if it were not for the program.
- Approximately 2/3 (64%) said the meal contributes to half or more of their total daily intake.

Promote Quality of Life

- 83% of home delivered meal respondents reported that the meals help them to live independently.
- Approximately 80% of home delivered meal respondents receive five (5) or more meals per week, with 17% of respondents receiving a meal in addition to the lunch meals such as breakfast, supper, or weekend meals.
- 70 of the participants who completed surveys were 100 years old or older.

Promote Nutritional Health and Wellness

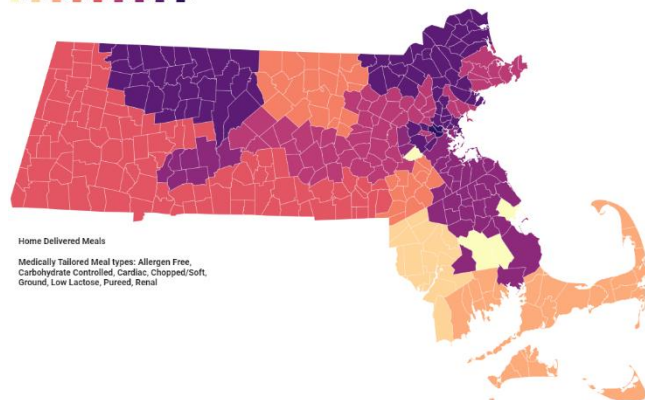
- All meals meet nutrition standards (1/3 dietary reference intake for protein, sodium, vitamins A and C, etc.), 92% of the programs offer medically tailored meals (e.g., cardiac, renal, carbohydrate controlled) and 100% offer some variation of texture modified meals (e.g., soft/chopped, ground, pureed).
- 90% of respondents reported eating healthier, 83% maintained weight, 82% improved health, and almost 50% reported the meals assist with managing blood pressure and blood sugar levels.

Medically Tailored Meals: There are eight types of medically tailored meals offered in the Commonwealth. Medically tailored meals allow older adults to manage their diet-related medical conditions while remaining independent in their community (see figures below).

- Heart-healthy and sugar-free desserts are offered in each program.
- Allergen-free, carbohydrate controlled/diabetic friendly, cardiac, chopped/soft, ground, low lactose, pureed, and renal meals are offered in certain regions.

Medically Tailored Meals (MTM) 2023

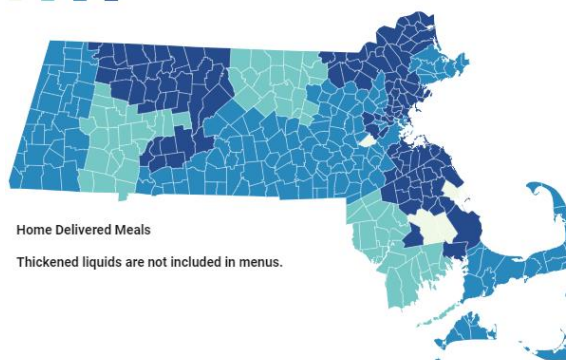
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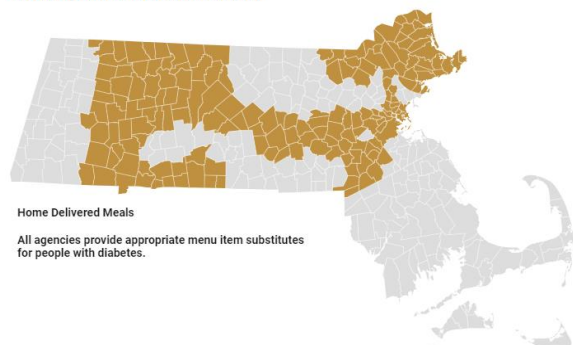
Texture Modified Menu

Chopped/Soft, Ground, Pureed

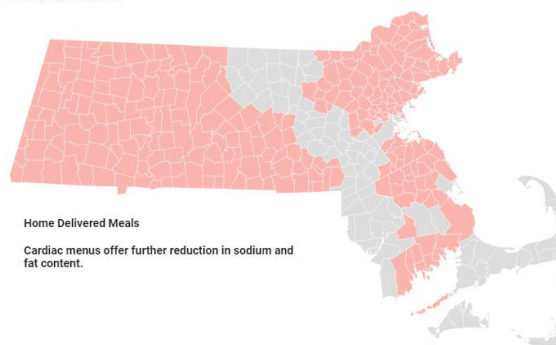
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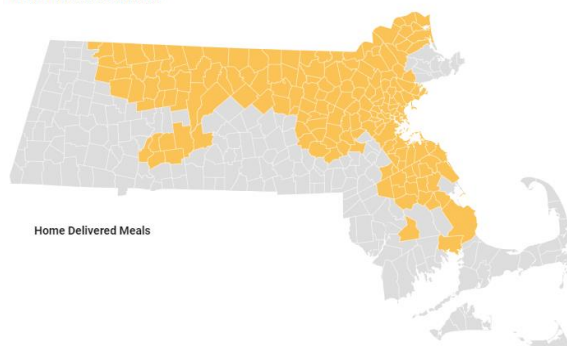
Carbohydrate Controlled Menu



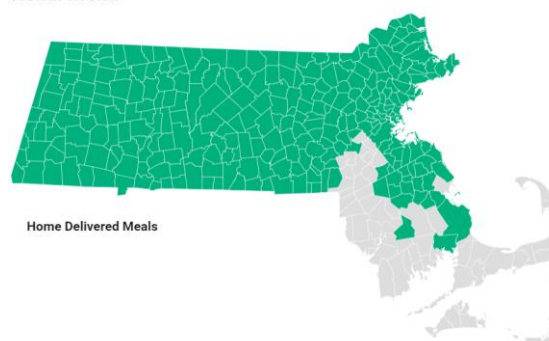
Cardiac Menu



Low Lactose Menu

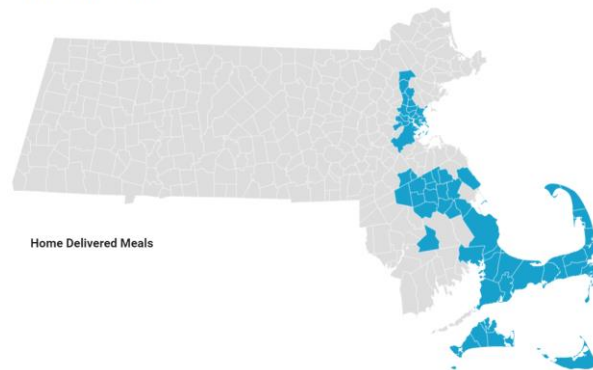


Renal Menu

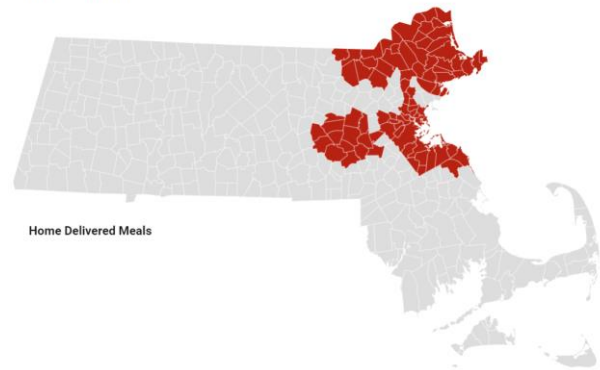


Culturally Relevant Meals: Several nutrition programs offer culturally relevant meals to their consumers, types offered are based on the populations in their service areas. These menus include Caribbean, Chinese, Haitian, Indian, Kosher, Latino, Portuguese, Russian, Southern, Vegetarian, and Vietnamese (see figures below).

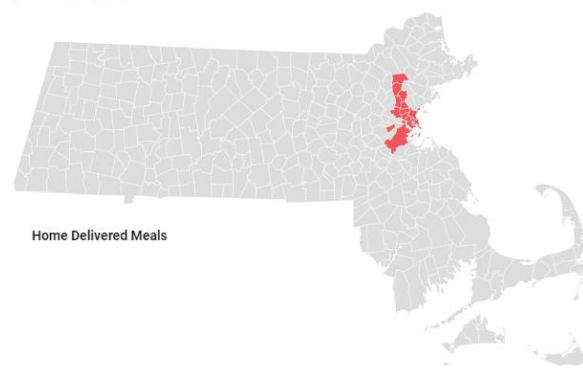
Caribbean Menu



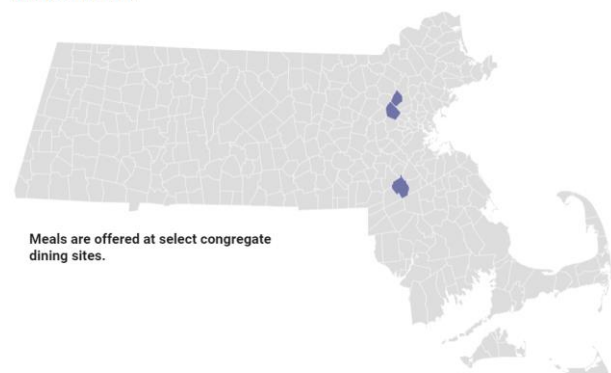
Chinese Menu



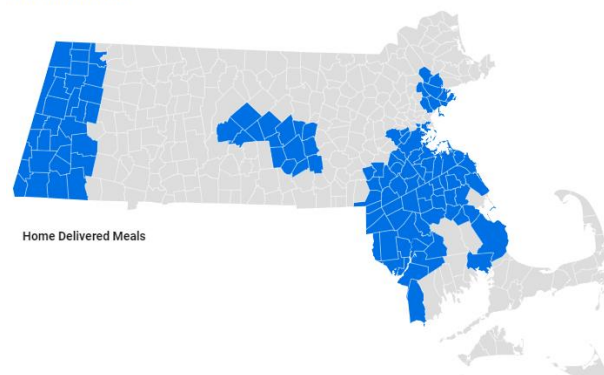
Haitian Menu



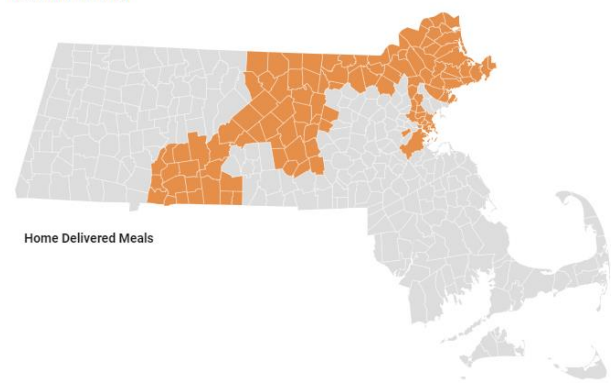
Indian Menu



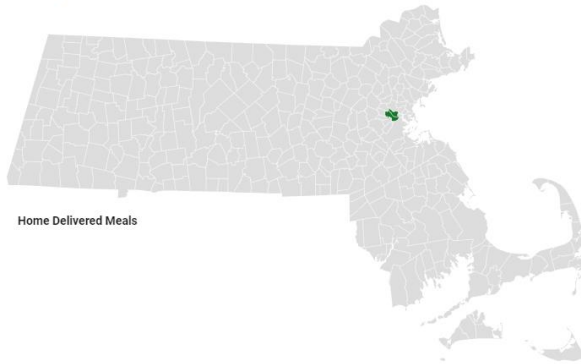
Kosher Menu



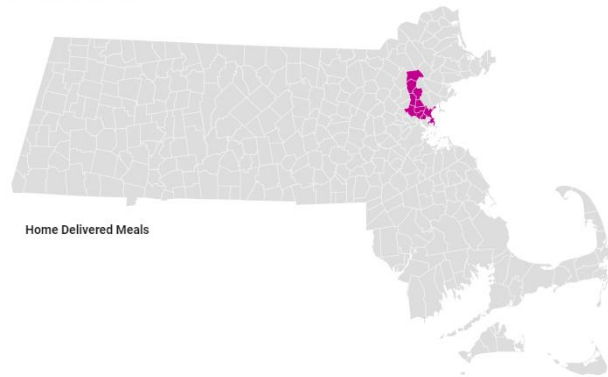
Latino Menu



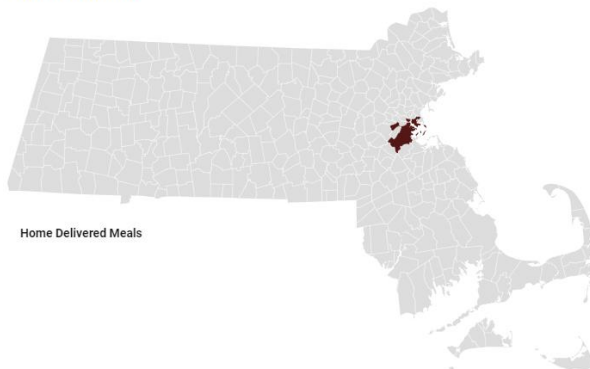
Portuguese Menu



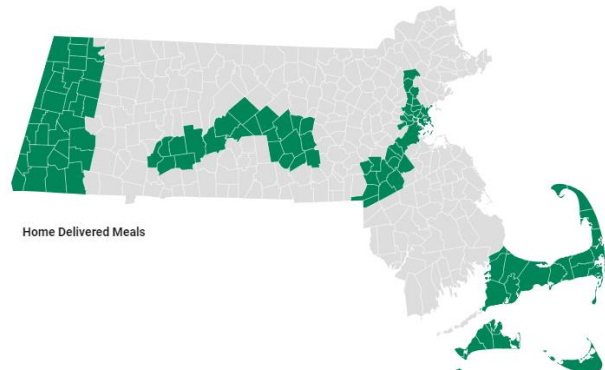
Russian Menu



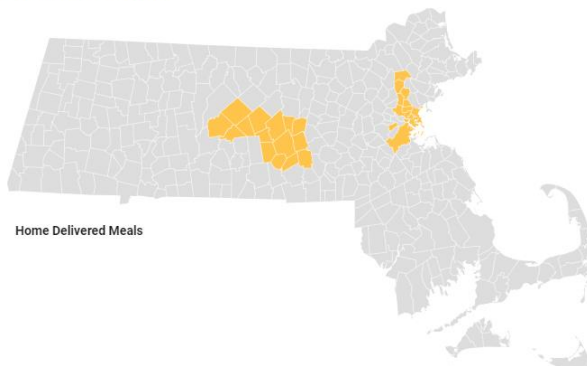
Southern Menu



Vegetarian Menu



Vietnamese Menu



Aging Service Access Points (ASAPs) and Area Agencies on Aging (AAAs)

AgeSpan

- AgeSpan served over 960,000 meals over this past year, benefiting over 6,900 older adults in 28 cities and towns.
- AgeSpan offered culturally appropriate Latino and Chinese home delivered meals (5) five days a week.
- In FY23, AgeSpan added a Carbohydrate Controlled/Diabetic Diet to the list of therapeutic diets.
- AgeSpan was awarded a three-year Replication Grant from ACL to provide a Restaurant Voucher Program targeting the underserved refugee population of Southeast Asians in Lowell and the Latino Population in Lawrence to help combat social isolation and food insecurity. AgeSpan developed a Local Food Access Guide for both communities. AgeSpan was spotlighted on the Executive Office of Elder Affairs' podcast series, [Reimagining Aging](#), for this pilot project.
- AgeSpan's home delivered meals continued in 28 cities with volume exceeding 3,200 meals served per day. AgeSpan continued offering congregate/hybrid Grab and Go services and began re-opening in person congregate dining in many of its locations that were temporarily closed due to Covid.
- AgeSpan distributed 2,250 Senior Farmers Market Nutrition Program coupon books, as well as fresh produce to 200 homebound older adults.
- AgeSpan held 25 nutrition education sessions attended by 300 older adults. The ASAP provided 33 nutrition counseling sessions, attended four health fairs to promote local nutrition information.

Elder Services of Berkshire County, Inc. (ESBCI)

- Elder Services of Berkshire County's Nutrition Program aims to raise public awareness about the importance of proper nutrition for older adults. The quality of life and nutritional status of older adults in community settings can improve by individualized nutrition approaches. Good nutrition supports healthy aging and supports independence. Poor nutrition or malnutrition leads to poorer health outcomes, frailty, and disability.
- ESBCI uses evidence-based strategies to reduce the rate of malnutrition and improve ramifications related to malnutrition. A registered dietitian assesses, evaluates, and recommends appropriate nutrition interventions according to an individual's medical condition, desires, and rights to make health care choices.
- Agency summary totals for June 1, 2022 – May 31, 2023:
 - 225,807 meals per year of which:
 - 7,878 Grab and Go

- 25,431 Medically Tailored Meals (modified, puree, cardiac, renal, vegetarian)
 - 1,347 Cultural Kosher Meals
 - 26,824 Congregate Meals
- Approximately 98% of congregate meal respondents stated the meals help them to save money on food demonstrating the beneficial financial impact of the meals.
- 23% of home delivered meal respondents reported they would have a shortage of food in the house if it were not for the meals.
- 94% of consumer respondents reported they would recommend the meal to others.
- 99% of respondents rated the drivers and meal site staff as excellent or good.
- 84% of respondents rated the overall meal quality as excellent or good.
- Promoted ASPEN Malnutrition Awareness Week and Massachusetts Be a Good Neighbor campaigns.
- ESBCI promoted nutrition education and disease management through the following:
 - Berkshire Senior TV:
 - Smart Shopping Tips and Techniques
 - Healthy Ingredient Swaps
 - Guide to the Farmers Market
 - Berkshire Senior Newspaper
 - Our Lanesboro Kitchen
 - COA Education
 - Smart Shopping Tips and Techniques
 - Healthy Ingredient Swaps
 - Menu Back Education
 - Healthy Ingredient Swaps
 - Smart Shopping
 - Cutting Back on Sodium
 - Eat a Rainbow of Colorful Fruits and Vegetables
 - Adding Dietary Fiber

Ethos

- The increase in the value of the Farmers Market coupons increased the popularity and nutritional impact of the program. Ethos distributed 2,300 coupon booklets at 65 sites in the City of Boston, maximizing the distribution to low income, older adults who do not have personal transportation. Ethos was also given funding to provide 1,000 homebound, low income, and older adults fresh produce and their model of multiple, small deliveries maximizes utilization of the benefit while minimizing waste.
- Ethos registered dietitian completed 372 individual nutrition assessments with recommendations, and another 157 reassessments. Many of these are targeted

to older adults with food allergies and sensitivities and provide useful information well beyond the home delivered meal arena.

- Nutrition messages on the back of home delivered meal menus continued to provide a single, “pop” of nutrition education. Menu backs provide 12,000 messages each year. The community cafes had nutrition education programming that included Smart Shopping, Nutrition Fact or Fiction, Nutrition Bingo, and Nutrition Jeopardy. The goal is to provide sound nutrition information in an engaging manner.
- Ethos’ nutrition outreach program marketed the home delivered meals and congregate program through ads in bus shelters, radio spots in various languages on stations that appeal to a variety of consumers. A major goal of the outreach is to promote equity to traditionally underserved populations.

Greater Springfield Senior Services, Inc. (GSSSI)

- Greater Springfield Senior Services, Inc. provided Nutrition Counseling and MNT services that include a comprehensive screening to test for malnutrition.
- GSSSI’s monthly menu backs included nutrition education topics in both English and Spanish that reach 1,200 consumers each month.
- The Senior Farmers Market Nutrition Program reached 1,500 older adults in their catchment area and included information on how to access HIP.
- GSSSI provided various menu types, including Renal, Cardiac, Diabetic/Carbohydrate Control, Modified Dessert, Latino, and Puree.
- The RDN conducted community nutrition education at Councils on Aging and with other community partner sites upon request. Topics included Lactose Intolerance, Healthy Eating on a Budget, Cooking for One, and Easy, Nutritious Meals Made in the Microwave.
- GSSSI had social media posts on healthy eating.
- The RDN attended ASPEN Malnutrition Awareness Week education sessions.
- Nutritional supplements were provided by GSSSI to eligible consumers free of charge.
- GSSSI’s Community Services Director attended MOW conference.
- The Nutrition Program Director attended National Association of Nutrition and Aging Service Programs conference and networked with community partners to create connections and identify needs in the community.

Making Opportunity Count (MOC), nutrition provider for Central MA Area Agency on Aging (CMAA)

- Meal offerings were expanded through a grant from CMAA allowing MOC to provide culturally competent meals for Hispanic older adults throughout the service area and focusing on at-risk older adults in local housing authorities.

- MOC continued drive-up, to-go programs providing older adults with healthy meals who were not yet ready to return to group dining.
- MOC conducted nutrition education presentations, increasing accessibility to older adults via local cable as well as in-person nutrition education group presentations.
- Nutrition messages published with menus provided nutrition information addressing nutrition needs of older adults including Cardiovascular Health, Low-cost/High Nutrient Foods, Malnutrition Self-Screening, Food Safety, Foods to Boost Immunity, Sorting Out Nutrition Quackery, Nourishing Foods for Healthy Skin and Wound Healing.
- MOC's RDN conducted malnutrition outreach activities through community health fairs and National Nights Out reaching older adults and their extended families by increasing awareness of malnutrition in terms of knowing the causes, signs and how to get help.
- The Senior Farmers Market coupon and home delivered produce program proved to be another successful nutrition outreach event providing 1,051 older adults with coupon booklets and an additional 288 individuals with produce delivered in two separate distributions reaching a total of 1,339 older adults.

Minuteman Senior Services (Minuteman)

- Minuteman Senior Services provided nutrition messages on menu backs as an effective way to share nutrition information. A few examples include utilizing seasonal produce, food safety, foods for a healthy heart, and Alzheimer's Brain Awareness Month information.
- The Farmers Market coupon program continued to be an excellent opportunity for outreach about nutrition and Minuteman provided 275 older adults with coupons.
- Minuteman provided in-person nutrition education on food safety and smart shopping for older adults.
- Minuteman Registered Dietitian provided fifty individual nutrition counseling sessions. These sessions focused on the individual's nutritional needs and increased their ability to choose a healthier diet.

SeniorCare (SC)

- SeniorCare's RDN gave presentations on malnutrition awareness and screening at a few of their congregate luncheon programs.
- This year, SC was able to distribute fresh local produce to 420 consumers through Senior Farmers Market Nutrition Program coupons and delivery to homebound older adults.
- A part of the success this year can be attributed to the increase in value of \$25 to \$50 in coupon booklets which were distributed to 270 older adults and fresh

local produce which were delivered to 150 homebound consumers. Home delivered meal drivers and COAs delivered the produce to 150 home consumers on August 9th and August 30th, 2023. Each consumer received 2 boxes from Farmer Dave's valued at \$25 each. In addition to sending the Centers for Disease Control and Prevention (CDC) Steps to Safe & Health Produce, the reverse side included easy cooking tips for vegetables.

Somerville Cambridge Elder Services (SCES)

- In addition to Home Delivered and Congregate meals programs, SCES offered additional programs in the community:
 - 916 cases of the nutrition supplement Ensure were delivered in Somerville and Cambridge to over 125 residents.
- The Cambridge Council on Aging re-opened their scratch-cooking lunch program.
- A Multicultural Meals and Arts Program was launched with the Somerville Council on Aging, funded by an American Rescue Plan Act grant from the city of Somerville, meals from four Somerville restaurants will be served 8 times per month in addition to a monthly performer. Cuisines served include Haitian, Chinese, Portuguese, and Italian.
- Over 1,000 Commodity Supplemental Food Program deliveries were made to over 100 residents. This program, in partnership with The Greater Boston Food Bank, provides shelf-stable groceries, fresh produce, and cheese.
- In addition to distributing 1,225 Farmers market coupons and 60 boxes of produce as part of the Senior Farmers Market Program, and additional 90 boxes of fresh produce were delivered to residents thanks to a grant provided by New Entry Sustainable Food Project.
- SCES offered 15 types of meals including medically tailored and multicultural meals to meet the needs of residents.

Springwell

- Springwell held education sessions for older adults and individuals with disabilities at Councils on Aging and Housing Authorities with the focus on promoting healthy nutrition on a budget.
- Springwell sent a nutrition-based newsletter in March which was distributed to more than 9,000 subscribers: [The Springwell Source – March 2023](#)
- Springwell participated in the Belmont Food Assistance Information Fair at Belmont Farmers' Market

Massachusetts Food System Caucus (FSC)

Overview: The Massachusetts Food System Caucus is a group of 158 legislators in both the House and Senate who are committed to supporting the local food system in Massachusetts by addressing food insecurity, protecting farmland, and promoting economic development. In 2023, the Co-Chairs are Representative Hannah Kane, Representative Paul Schmid, Representative Andy Vargas, Representative Mindy Domb, Representative Dan Donahue, Senator Jo Comerford, and Senator Sal DiDomenico.

Food Security Accomplishments

The FY24 budget included several FSC priorities. \$12,872,860 went toward the elder nutrition program, with \$750,000 of that amount allocated to the Senior Nutrition Program's home delivered meals. The FSC also supported \$4,904,705 for programs to increase the SNAP participation rate, \$36,425,000 for the Massachusetts Emergency Food Assistance Program (MEFAP), \$250,000 for grants for local food policy councils, \$25,100,000 for the Food Security Infrastructure Grant (FSIG) program, and \$300,000 for the Massachusetts Food Trust Program. The Healthy Incentives Program (HIP) received \$5,050,000 for FY24, with an \$8.8 million carryover from the previous year.

In response to the February deep freeze, May frost, and July floods, MDAR's Natural Disaster Recovery Program has made \$15 million available to farmers impacted by these events. Additionally, the Healey-Driscoll administration partnered with the United Way of Central Massachusetts to create the Massachusetts Farm Resiliency Fund, which raised more than \$3 million in donations from individuals and businesses. These programs will provide much-needed financial relief to farmers who lost crops due to adverse weather events, making the Commonwealth's food system more resilient in the face of climate change. (<https://www.mafoodsystemcaucus.com/>)

Massachusetts Department of Transitional Assistance (DTA)

In May of 2023, the Federal Government announced the end of the Public Health Emergency (PHE). The economic impact of the COVID-19 pandemic continues to affect all corners of the Commonwealth, including elevated levels of food insecurity among many of our communities and is increasing DTA's food and economic assistance caseloads. As of August 2023, the Commonwealth's Supplemental Nutrition Assistance Program (SNAP) caseload was at more than 661,000 households, an increase of 211,000 from pre-pandemic levels when the average monthly SNAP caseload was 450,000 households. Currently, one in six Massachusetts residents receive SNAP benefits, including more than 244,000 recipients who are age 60 or older.

DTA has addressed increased food insecurity in many ways, including utilizing an equity framework when partnering with vendors on various programs. In 2022, this approach

was used in the expansion of Healthy Incentives Program (HIP) vendors. In 2023 it was used for the selection of the Restaurant Meals Program (RMP) vendors. The RMP will allow older adults (60+), homeless individuals and families, and people with disabilities to buy prepared food at authorized restaurants and food trucks across the Commonwealth using their electronic benefit transfer (EBT) card.

In the RMP procurement, DTA's vendor selection process placed a strong emphasis on equity by giving high priority to communities with elevated levels of food insecurity. Before issuing the Notice of Opportunity (NOO) in 2022, DTA identified 20 priority communities characterized by high rates of food insecurity. A critical part of the vendor evaluation process was to ensure that a substantial number of selected vendors were from these priority communities. Out of 128 applications, a total of 27 restaurants and food trucks were selected as part of the RMP pilot. Additionally, accessibility, cultural competencies and meal value were among the other components used to evaluate and make the selections.

The Department also continues to expand on its SNAP Outreach Partnership program and continues to work with Councils on Aging across the Commonwealth to improve access to SNAP benefits for older adults. During FY23, a total of 27 contracted senior centers supported 643 older adult households with SNAP applications along with Boston Age Strong (a division of the City of Boston).

SNAP Nutrition Education provided nutrition education programming to older adults at Councils on Aging, health centers and farmers markets through DTA's contracted vendors. Efforts were focused on fostering individual behavior change leading to improved decision-making skills around food and physical activity. Workshops also focused on areas such as following a healthy dietary pattern using United States Department of Agriculture (USDA)'s MyPlate, preparing healthy meals, gardening, cooking for one, shopping on a budget, safe and effective exercise for older adults and interactive activities that build healthy connections to food, self, and community. SNAP Education supported Malnutrition Awareness Week (September 19-23) by sharing information on the SNAP Education website <https://masnaped.org/>.

DTA continues to participate in a bi-monthly cross-Secretariat workgroup. This workgroup identified action steps to advance current food security priorities and developed two tracking tools to support the on-going work being done. In addition, the group is working on a strategic plan in collaboration with the Food Policy Council and Project Bread.

Massachusetts Department of Agricultural Resources (MDAR)

Overview: MDAR's mission is to cultivate a robust and equitable agricultural economy, promote a safe and resilient food system, and preserve a healthy environment for Massachusetts farmers, animals, and consumers.

Healthy Incentives Program

DTA and MDAR partnered on the Healthy Incentives Program which provided SNAP recipients with a rebate when they purchased fruits and vegetables at Farmers markets, farm stands, mobile markets, and community supported agriculture programs (CSA). From January through August 2023, an estimated 53% of SNAP participants using HIP were from a household with a recipient age 60+.

Senior Farmers Market Nutrition Program

In 2023, MDAR received an award from USDA to double the Senior Farmers Market Nutrition Program benefit from \$25 to \$50. MDAR, EOE, and partnering Senior Nutrition Programs distributed close to \$1,223,500 worth of Senior Farmers Market Nutrition Program (SFMNP) Coupons to 24,470 Massachusetts older adults for the purchase of fresh, locally grown, fruits, vegetables, and fresh cut herbs at participating locations. Through the SFMNP, MDAR, EOE, and partnering Senior Nutrition Programs 4,138 homebound older adults received \$206,900 worth of local produce. The 28,608 older adults participating in the SFMNP received information on seasonal recipes, how to find farmers' markets, and resources on food assistance. MDAR [developed a webpage](#) to list the nutrition education materials that have been provided to older adults through the Farmers' Market Nutrition Program since 2016. To help serve all older adults in the state, nutrition education materials have been translated into Chinese, Portuguese, and Spanish.

Local Food Purchase Assistance Program (LFPA)

MDAR received the Local Food Purchase Assistance Program (LFPA) Grant in the spring of 2022. Through a competitive RFR process, MDAR awarded just over \$7.2 million to 16 organizations across the state to fulfill 3 key goals of the project. These goals are: (1) Provide an opportunity for States and Tribal Governments to strengthen their local and regional food system; (2) Help to support local and socially disadvantaged farmers/producers through building and expanding economic opportunities; (3) Establish and broaden partnerships with farmers/producers, the food distribution community, and local food networks, including non-profits, to ensure distribution of fresh and nutritious foods in rural, remote, or underserved communities. Now, just over a year into the program, it is clear to see that the LFPA program is meeting its goals and learning new systems for outreach and collaboration along the way.

The LFPA grant has two key stipulations for recipients: (1) At least 51% of the received funds are to be used for food purchases, with the goal of 40% of food purchases from self-identified socially disadvantaged farmers/producers; and (2) there be no conditions

to receive the food. These requirements have led to organizations implementing many creative, and effective, procurement and distribution strategies and partnerships. Free CSA boxes, weekly distributions to food pantries, free fridges/markets, mobile markets, meal kits, and cooking classes are just a few of the myriad of ways these 16 organizations are creating new channels for fresh, local produce to reach MA residents in low-income areas across the state.

Since the start of the grant contracts in the fall of 2022 through June 30, 2023, 100 new farmer connections were made, with 49 of these new purchases being made with socially disadvantaged farmers. These are counted as the number of unique buyer-seller connections that did not exist before this program. Since food purchases began in earnest in January 2022, \$1,506,584.20 has gone to 172 unique farms with 80 of these farms considered to be socially disadvantaged. MDAR and the recipient organizations are continuing outreach to create new connections and increase the buyer base for the life of the grant and beyond. On the distribution side, 39 new partnerships have been formed across the life of the grant, with all new partnerships in underserved areas. In total, \$1,186,294.26 worth of LFPA food went to 388 total unique distribution sites, 385 of them in underserved areas.

Looking ahead, Massachusetts was awarded federal funds through the LFPA Plus program, a continuation of the current work being done under the LFPA grant. MDAR has received, reviewed, and chosen winners for this next round of funding. These projects are similar in nature and goals to the original round, though there are different requirements and restrictions for allowable expenses compared to the LFPA program. No funds have been awarded as of yet, but contracts are being finalized and the projects are expected to start by the end of 2023.

The Massachusetts Food Trust

The Massachusetts Food Trust Program brings capital into the Commonwealth's food sector in underserved areas. The Commonwealth of Massachusetts launched this state-funded initiative in 2018 in partnership with MDAR. The program's low interest loans and grants for technical assistance support businesses and projects that would expand access to healthy food through marketing opportunities in underserved areas across the Commonwealth while at the same time supporting our farmers. In FY23, nearly \$1.1 million dollars was awarded to 14 retail market owners in low to moderate income communities. The funding impact in FY23 improved fresh food access to 68,000 individuals, created over 200 jobs and 100% of these businesses accept Special Supplemental Nutrition Program for Women, Infants and Children (WIC) and SNAP.

Urban Agriculture Program

The Massachusetts Urban Agriculture Program (MUAP) provides grant funding to support projects on commercial farming operations to increase the production, processing, and marketing of produce grown and sold in urban centers across the Commonwealth. Funded projects increase access to affordable, fresh food for urban

residents, address the challenges of small-scale farming in densely populated centers, and create direct markets in low-moderate income neighborhoods. The FY24 funding cycle for the MUAP awarded a total of 7 grants to organizations, totaling \$109,073. Since the program's inception in 2014, MUAP has supported 103 projects, totaling nearly \$3.5 million dollars.

Funded urban agriculture projects include land-based outdoor and greenhouse cultivation, rooftop open air and greenhouse production, hydroponics, aquaculture, aquaponics, and beekeeping. Each project represents a long-term, capital investment by MDAR such as infrastructure improvements, building upgrades, purchase of computer software and systems, land procurement, or purchase of farm equipment. Projects were chosen that foster youth development, small business development, and job training directly related to commercial urban farming. The Program also supports municipal agencies and non-profits for the development of urban food production projects for community benefit, urban community gardens, or infrastructure for existing urban community gardens to implement climate change tools/infrastructure.

Massachusetts Department of Public Health (DPH)

DPH worked to address food insecurity as a member of the Food Security Work Group (FSWG), a cross-secretariat collaboration involving ten different state agencies across five Secretariats. DPH food security-related program efforts included:

- The Mass in Motion Municipal Wellness & Leadership Initiative built local capacity to reduce the specific barriers to healthy food access (and physical activity) while programs like the Root Cause Solutions Exchange and the Determination of Needs Community Health Initiative sought to improve conditions to make healthy food more accessible.
- Three new federal (CDC) chronic disease grants provided an opportunity to support health system screening for Health-Related Social Needs (HRSNs) and link patients with needs to support services in the community. This involved assessing community resources and gaps, as well as tracking HRSN referrals and outcomes.
- WIC, a nutrition program that provides healthy foods, nutrition education, breastfeeding support, and referrals to healthcare and other services, free of charge, to Massachusetts families who qualified.
- The Bureau of Family Health and Nutrition (BFHN) Growth and Nutrition program provided multidisciplinary services, including referrals to food resources, to infants and children experiencing failure-to-thrive (poor growth).
- Efforts through the BFHN Essentials for Childhood grant developed root cause preventative strategies that will ultimately impact social determinants of health.

- In addition, DPH used social media to raise awareness of malnutrition during Malnutrition Awareness Week September 18 – 22, 2023. The DPH Nutrition Division tweeted throughout the week to highlight the impact of malnutrition on vulnerable populations.

Mass General Brigham Integrated Health System

Brigham and Women's Hospital continues to use the Malnutrition Screening Tool (MST) to screen all new admissions to the hospitals. The nurses complete the MST along with all other required admission screening tasks and a "Best Practice Alert" is generated if patients have a score of 2 or greater. The nurses may decide not to put in a consultation if the patient is not ready for a full nutrition assessment or if there are concerns that the patient is at the end of life and a nutrition consult would be inappropriate.

The nutrition team receives consults for patients with pressure injuries; it is important to note that older age and malnutrition are risk factors for development of pressure injuries. Clinical nutrition is also consulted as part of a clinical pathway in place for older adults who are admitted after falls. Nutrition works closely with the Clinical Documentation Improvement Specialists to improve documentation and coding of malnutrition to assure appropriate recognition of the impact that malnutrition has on outcomes in hospitalized patients and to work to improve reimbursement in this area. They are currently working on determining the best definitions of cachexia, which is a clinical concern in many patient populations, especially those with heart failure and malignancy.

Two publications related to malnutrition this year:

1. Guenter P, Blackmer A, Malone A, Phillips W, **Mogensen KM**, Becker P. Current nutrition assessment practice: a 2022 survey. *Nutr Clin Pract.* 2023;38(5):998-1008.
2. Guenter P, Blackmer A, Malone A, **Mogensen KM**, Phillips W, Prescott LL. Nutrition assessment documentation: current practice and opportunities for education. *CDI Journal.* 2023;15(5):28-34.

Kris Mogensen is co-chairing the American Society for Parenteral and Enteral Nutrition Multiorganizational Malnutrition Coding and Reimbursement Task Force which includes representatives from the Academy of Nutrition and Dietetics, American Society for Nutrition, the Association of Clinical Documentation Integrity Specialists and Defeat Malnutrition Today. She is a member of the Global Leadership Initiative on Malnutrition Inflammation Workgroup and anticipates having a publication on inflammation and malnutrition published either by the end of 2023 or early 2024.

Massachusetts Councils on Aging

Presentations

- Conducted nutrition presentations and/or food demonstrations at 13 Councils on Aging (COA).
- Coordinated five Walk Massachusetts Challenge kick-off events at COAs and presented malnutrition prevention education sessions.
- A Simmons University Intern presented Stepping Up Your Nutrition Workshop at East Boston Senior Center which was simultaneously presented in Spanish.
- Provided nutrition information at one COA health fair and for COA's mini podcast.
- Presented 'New Year New-ish You' at the MCOA's January Membership Meeting.
- Presented *Local Food, Local Action: Improving health in our communities* at MCOA's Small and Rural Conference.
- Presented *LUNCH: Launching Updated Nutrition Choices for Health* at MCOA 2023 Fall Conference.
- Hosted SNAP Emergency Allotment meeting for COA network. DTA tailored their EOEa presentation slightly and additional questions were asked. Posted the materials and recording to MCOA's website.
- Presented a webinar for the National Center for Equitable Care for Elders *Healthy Eating Conversations*.

Training & Technical Assistance

- Met with seven COA directors to review malnutrition prevention initiatives and determine resources and support needed.
- Created and distributed a network-wide SNAP resources email communicating the end of emergency allotments and providing state and local resources to support older food security. Requested from DTA, then shared through MCOA channels, the average SNAP awards for older adults by town. Referred COAs interested in becoming SNAP Community Partners to UMass Medical and DTA. Attended EOEa's SNAP EA session on 2/1/23, posted the materials and recording to MCOA's website.
- Updated network on changes to the Senior Farmers Market Nutrition Program where, for the next two years, the value doubles to \$50.
- Monthly nutrition education copy expanded to 24 months of text, recipes, and photos for use by COAs in newsletters, social media posts and to support programming; coordinated monthly social media posting of these topics.
- Created the bimonthly nutrition resource and reminder email list. Sent initial version on 3/31/23 to nearly 200 recipients at 158 COAs reminding people of tools available to them and offering support.
- Surveyed network for interest in a statewide meeting reviewing to review nutrition programs.
- Promoted the Stepping Up Your Nutrition workshop leader training.

Initiatives & Collaborations

- Collaborated with Tufts/USDA's Human Nutrition Research Center on Aging (HNRCA) and National Institutes of Health (NIH) on a teaching kitchen pilot. Identified COAs who scratch cook several days a week, have a kitchen staff of three or more, serve an average of 30 daily participants, represent communities with at least 5-10% marginally served populations, and are within 75 miles of Boston. Communication flyer and slide deck created. IRB materials are being drafted for review by EOE. Presented framework at MCOA's Fall Conference.
- Participated in the Nutrition workgroup (EOEA, MCOA and Meals on Wheels Association of Massachusetts), which identifies issues including updating the statewide IIC nutrition standards, revisiting a nutrition forum and additional collaborations.
- Participated in the Nutrition Legislative Task Force.
- Ongoing meal programs at Councils on Aging include:
 - Congregate lunch sites continue to reopen. Many have lower participation than pre-pandemic levels. Older adults remain hesitant to eat in a group setting.
 - The Grab & Go meal option is still available and continues to be popular.
 - There was an increase in home-delivered meals due to some restrictions being lifted or relaxed.
 - Food distribution programs including the Commodity Supplemental Food Program, Brown Bag program, YMCA groceries and others remain needed and popular.
- Tara met with Adam Frank and Adriene Worthington of EOE, providing an overview of MCOA's older adult malnutrition objectives and outputs since 2020. Shared with them results of the survey of Title III-C programs at COAs. Shared MCOA's work included in the MA Commission on Malnutrition Prevention among Older Adult annual report to the legislature.

Messaging

- Provided nutrition information which was reported by MCOA's Executive Director at the White House's Communities in Action, a Massachusetts event.
- Distributed older adult malnutrition messaging via Twitter, Facebook and LinkedIn including Malnutrition Awareness Week and MCOA's Ambassador Code to network.
- Provided regular information on webinars, tools, and information to COA network through weekly newsletter.

Upcoming Activities – 2024

- Next meeting: February 27, 2024, 2:00 – 4:00 PM
- DPH epidemiologists to track and review year-over-year data from ICD10 codes related to malnutrition to better understand prevalence of malnutrition diagnosis in older adults who are hospitalized.

- Malnutrition Awareness activities will be offered during Older Americans Month (May) as well as in September during Malnutrition Awareness Week.