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Steve Piekarksi, Associate Vice President of Older Adult Services Lutheran Social Service of Minnesota LCPFP Testimony - August 21, 2013

Mr. Chairman and members of the Legislative Commission on Planning and Fiscal Policy, my name is Steve Piekarski. I am the Associate Vice President of Older Adult Services at Lutheran Social Service of Minnesota. LSS provides a wide range of human support services to nearly 100,000 people of all ages in each of Minnesota's 87 counties and in more than 300 communities. Today, I am going to focus on our Senior Nutrition program which began at LSS in 1973, shortly after the Older Americans Act authorized congregate nutrition services.

The Older Americans Act authorized congregate nutrition services in 1972 and Home Delivered Nutrition Services in 1978 with the purpose of reducing hunger and food insecurity, promoting socialization of older adults, promoting the health and well-being of older individuals and delaying adverse health conditions through access to nutrition, disease prevention and health promotion. LSS's Senior Nutrition program has grown to over 200 community locations in 39 counties across the Southwest, Northwest and Central Minnesota and many of these are in small rural locations. We provide various options for older adults to receive nutritious hot, frozen, and cold meals ranging from congregate dining sites, home delivered meals, and diners clubs which are located in local restaurants. In 2012 we served 18, 968 older adults approximately 1,085,000 meals.

Before I get to the challenges of the federal budget sequestration I want to share a story.

There is a lady whose name is Gretchen from Bemidji who ended up in the hospital after becoming malnourished. She weighed 98 pounds and was having psychotic episodes. The hospital kept her until she was able to go to an assisted living facility. After about a month there, she was just not happy and missed her home. Her Doctor told her that he would agree to release her to go home only if she would agree to get meals on wheels and he made her promise that she would eat them every day. He set her up for a follow up visit in 1 month. The next time she went in to the Doctor, her mental health was much improved and in fact she had not had one episode. She even reported that she really liked almost all of the food and the fresh baked bread was really a treat. After 6 months her weight is back up to 120 pounds which is her ideal weight. She has had no more psychotic episodes and she is actually going back to teaching piano lessons a few hours a week. Home delivered meals gave her a second chance to live independently.

Though LSS is dedicated to proving nutritious meals to older adults in the rural areas where we serve, the reality is that the current model may not be sustainable due to many factors. Today I will talk about 2 issues that may impact our ability to provide nutritious meals to the many rural older adults in the future

 First, the federal budget sequester that made automatic, across-the-board cuts beginning in January of 2013 will have a tremendous impact of nutrition services across Minnesota. Older Americans Act programs were cut as part of the Sequester. Overall, Minnesota's share of this cut was approximately \$970,000, including OAA Title III nutrition services.

Based on the informal projections LSS has been provided on anticipated 2014 cuts, we anticipate a minimal cut of 15% between the 2013 and 2014 contract years which includes both sequester and formula-based cuts that have been distributed to the AAA funders. [NOTE: if you calculate the percentage difference between these two contract years for the two AAAs who have communicated what level of cut to plan around, it would be over a 20% cut at the MN River AAA and over an 11% cut to the Land of the Dancing Sky – will not know MN Central AAA results until their budget is passed at their board mtg this fall.]

Due to funding formula changes described by the MBA, in the rural areas of Northwest Minnesota this has already had a significant impact on services we offer. Three nutrition sites had to be closed in this rural area for 2013 and many seniors at these locations have gone unserved. If these 90+ year old meals on wheels customers are going underserved and even one of them has to be placed in institutional care, the costs for this service will greatly outweigh the previous cost of the community based service.

The sequester reduction combined with the flat overall funding due to population changes leaves the most vulnerable older adults increasingly isolated, potentially malnourished, and lacking resources to live independently in their own homes and avoiding nursing home care. As we approach 2014 LSS will most likely have to make the difficult decision to close locations in many of the rural communities we support with meals. At this point the range of site closures will be in the range of 15-25 locations in some of the smallest population towns in Minnesota. Site closures would potentially affect 1,600 older adults and account for approximately 111,820 meals. 73% of those people are at moderate to high nutrition risk.

Even if nutrition sites do not close many will need to reduce their days due the funding cuts. From our experience when a site closes or reduced days the impact on people like Gretchen is significant because many at risk older adults do not have access to grocery stores or restaurants in their communities, or are have the strength to cook their own

meals which leads to an increase of isolation, depression and overall decrease in health outcomes, including malnutrition. Nutrition is a safety net and its health support as well as food support and without the availability of meals provided by agency someone else is going to have to step in and who is that going to be? For people like Gretchen this could mean living in a more costly nursing home instead of living independently.

2. Over the years Minnesota's small communities have been transforming from bustling regional hubs to increasingly isolated towns, making service to reach older adults in these communities a challenge. According to the state demographer the share of Minnesotan's living in rural areas has been declining but the population that remains will be increasingly older and the ratio of older people to younger people in will be greater in rural counties by as much 20-34%. As these communities age we are experiencing a movement away from congregate meals to more individuals needing home delivered meals to maintain independence. With this change it significantly increases transportation costs to deliver the meals and is difficult to manage the increasing rising food costs.

Also, the nutrition program relies on many volunteers to prepare, deliver, and maintain the program in many communities but with the aging that is occurring in small communities it is becoming more difficult to recruit and maintain a strong, vibrant base of volunteers because many of them are in their 80's and 90's and there are not a wealth of young people to take their place.

For example I can name many small communities where we provide meals that have populations under 200. Places like Lake Lillian with a population of 283 where it is struggle to make providing the meals financially viable.

Communities like Crosslake where we serve Bud and his wife who shares their story of meal support:

I truly believe Senior Meals at the Crosslake Community Center saved my husband's life. I was working many long hours and had to be away from home. Bud was 77 at the time and said he never felt hungry. The best he would do was a sandwich. One day I took a good look at him and he was nothing more than a walking skeleton. He is 6 foot tall and weighed 142 pounds. I took him to the senior meals the next day and signed him up. He has been going there 5 days a week for two years. He now weighs 158 pounds, still thin but that's the way he is. Not only does he get good meals he has made many friends with folks his own age. He looks forward to going every day. Once I retired I started volunteering there. Thank goodness for LSS. Not sure what we would do without them.

Even with the challenges with providing nutritional services in rural Minnesota there are opportunities for innovative solutions that LSS and our peers continue to pursue. I believe we as providers should be encouraged and supported in developing greater innovation. Some methods we are pursuing include:

- Seeking partnerships with nutrition providers across Minnesota to achieve enhanced buying power and hold down raw food costs.
- Continue to look for opportunities for volunteers by engaging schools and building inter-generational opportunities.
- Innovating new methods of service delivery to meet the needs of each community such
 as our diner's club concept where we are able to partner with local rural restaurants to
 provide our meals. This concept has been a win-win in communities as it has not only
 provided us a way to serve seniors in rural areas of MN but has also provided the
 economic development for small business owners to keep their doors open year round
 in small communities.
- Frozen meal options
- Focus funding on deep and creative engagement of older adults who are in the high risk population.
- An engaged conversation with the Minnesota Board on Aging and local Area Agencies on Aging on how to transform nutrition services so that it can continue to have an impact on keeping older adults in their homes and communities as long they desire.

With the numbers of older Americans expected to grow significantly over the short-term, Senior Nutrition represents one of several critical areas where capacity needs to be developed over the short term to meet need, and by doing so will save significant public dollars. When older adults have active socialization opportunity and nutrition as provided by senior nutrition they age well at home longer.