



MEALS **on** WHEELS  
AMERICA



**MORE** THAN  
A MEAL®

# HOW MEALS ON WHEELS AMERICA SYSTEMATIZED ITS HOLISTIC SERVICE MODEL TO ADDRESS CLIENTS' CHANGES OF CONDITION

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## ACKNOWLEDGEMENTS

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## ABSTRACT

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### BACKGROUND AND OBJECTIVES

Meals on Wheels America programs have long delivered more than nutritious meals to senior, providing in-home safety checks, social interaction and connections to other community-based services. Recognizing that the drivers delivering the meals were often the only people a senior client saw each day, Meals on Wheels America – in partnership with West Health Institute and Accessible Solutions, Inc. (ASI) – embarked on a study in which local Meals on Wheels programs followed a technology-supported Change of Condition monitoring protocol (CoC) that enabled drivers to capture any changes they observed in a senior's health and well-being at the time of meal delivery. To record these changes, drivers used a mobile application – ServTracker® Mobile Meals, developed by ASI – to help local program staff quickly track incoming alerts and connect the client to the appropriate additional services that could address changes in their condition. This research was conducted to refine and scale this technology-enabled approach to monitoring client health and wellness.

### RESEARCH DESIGN AND METHODS

Using lessons learned from two Meals on Wheels pilot sites and a peer-to-peer learning collaborative, 26 Meals on Wheels programs undertook a project to establish, pilot, refine and adopt CoC over 16 months.

### RESULTS

85% of the participating programs that adopted CoC found they were able to help their clients avoid a decline in their health, and most programs saw an increase in volunteer engagement, a key metric for ensuring the continued success of using CoC.

The biggest perceived barrier to adoption for the participating programs was a concern about staff and volunteer receptivity to the technology and protocol. Yet in reality, the technology often brought program staff and volunteers closer together.

### DISCUSSION AND IMPLICATIONS

CoC holds promise for strengthening local data-informed partnerships. This creates a unique opportunity to address social determinants of health through partnerships between local Meals on Wheels programs and a range of healthcare providers and payers, e.g., hospital systems, Medicare Advantage plans, Medicaid MCOs and primary care physicians.



## INTRODUCTION TO THE MEALS ON WHEELS SERVICE MODEL

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Meals on Wheels has been guided by a single goal since the first known U.S. delivery by a small group of Philadelphia citizens in 1954 – to support senior neighbors and help extend their independence and health as they age. What started as a compassionate idea has grown into one of the largest and most effective social movements in America, currently helping nearly 2.4 million seniors annually in virtually every community across the country.

Home-delivered meals have been shown to improve older adults' independence and encourage autonomy, thereby improving meal recipients' quality of life. The national Meals on Wheels network of local community-based programs has long known that the meal is essential to healthy aging. However, it is also known that it is the combination of that nourishing meal with a daily visit and safety check from the staff member or volunteer delivering the meal that gives so many senior clients the support they need to thrive independently in their homes. This theory was tested in the *More Than a Meal*® Pilot Research Study, which concluded that individuals receiving daily meal delivery were significantly more likely than individuals receiving frozen, once-weekly delivered meals to indicate that the services received from the home-delivered meals program improved their mental health, lessened their worry about being able to remain at home and helped them feel less lonely (Thomas et al. 2016).

Further, by engaging their staff and volunteer drivers to act as eyes and ears in the home during these frequent visits, local Meals on Wheels programs are able to earn their clients' trust and gain the ability to cross the threshold into their home environment. This can provide programs with unique opportunities to connect their senior clients to other services within the community that they may need to stay well.

## ADVANCING A CONSISTENT APPROACH TO SERVICE DELIVERY

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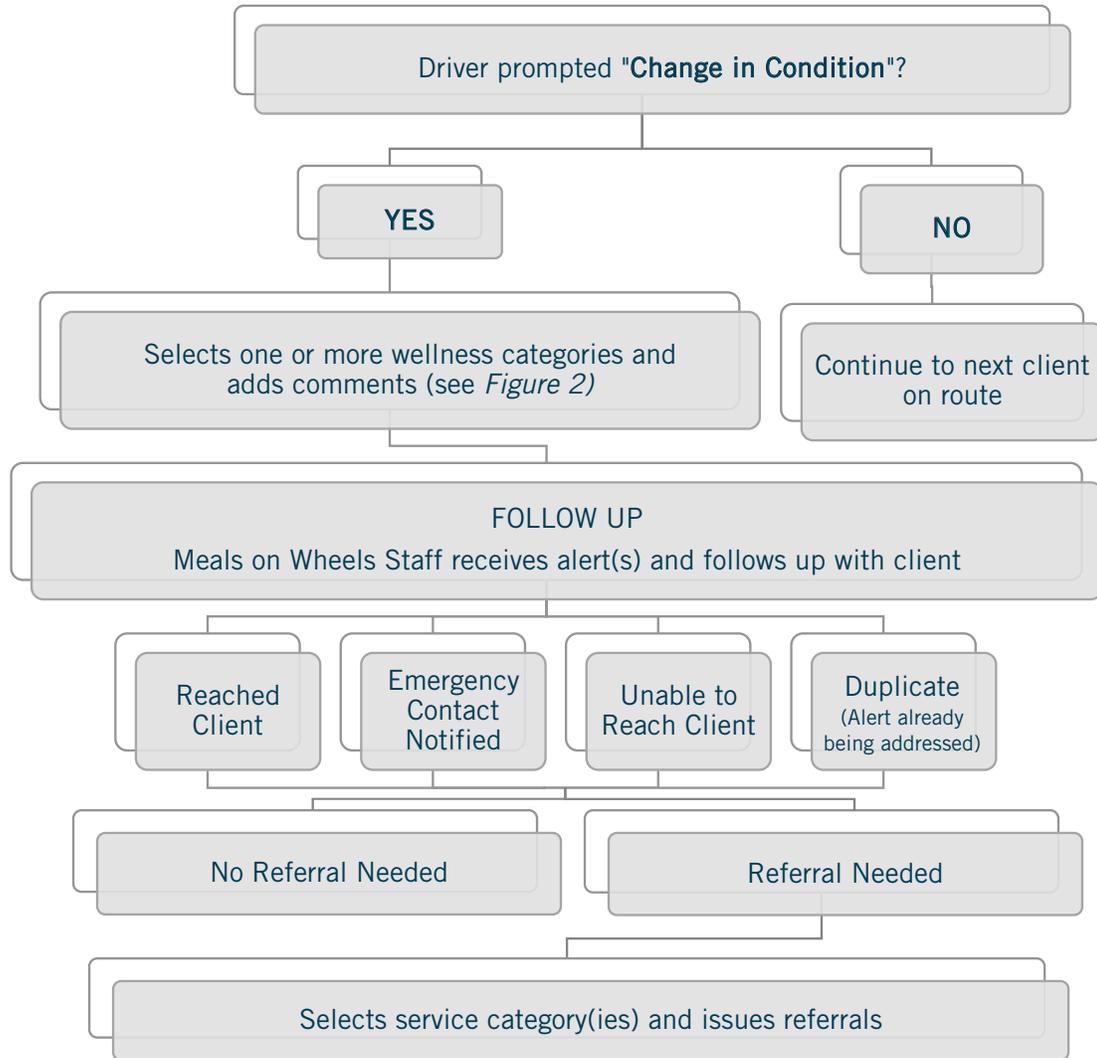
While Meals on Wheels programs deliver holistic services and provide more than just a meal to their senior clients, they do not necessarily do so in a uniform fashion. Programs also may not report on the services they deliver in the same way, as each is responding to the specific needs of its own community. This diversity in service delivery and reporting has historically made it more challenging to address systemic issues through technology-based approaches that may rely on consistency or standardization. Meals on Wheels America understood that a consistent approach to identifying and addressing the nutrition, health and social needs of seniors across the national Meals on Wheels network would better position programs for future partnership opportunities, as potential partners would have a clear understanding of what to expect when working with Meals on Wheels. This is especially important for community-based organizations to be able to partner with healthcare entities in furtherance of efforts to address social determinants of health.

In an effort to support a consistent approach that remains flexible enough to enable local programs to continue leveraging their community's assets to address their clients' needs, Meals on Wheels America, Brown University, the West Health Institute, Accessible Solutions (ASI) and two local Meals on Wheels programs collaborated to define and pilot a Change of Condition monitoring protocol. The results of this pilot work led to the refining and scaling effort presented here. The purpose of the Change of Condition monitoring protocol is to codify and share real-time information or change of condition alerts about concerns in the older adult for follow-up.

## THE APPROACH

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Meals on Wheels America worked closely with the West Health Institute and ASI to develop a formal Change of Condition monitoring protocol that would facilitate documenting and responding to changes in clients' physical, mental, emotional or environmental conditions. Developing this process, depicted in *Figure 1 – Change of Condition monitoring protocol*, began by identifying a checklist of seven key wellness indicators culled from commonly used categories of health and social needs and developed through cross-disciplinary expert opinion as well as a review of relevant literature (e.g., health, social isolation/loneliness, etc. See *Figure 2 – Wellness Indicators as seen on Mobile Meals*).



Care Management	Elder Abuse/Self-Neglect/APS	Healthcare Services (Non-Emergency)	Emergency/911	Housing/ Assisted Living
Safety/Welfare Check	Home Repair/ Home Modifications	Counseling Services	Assistive Technology	Personal Care/Homemaker
Friendly Visitor/ Companion Services	Home Health	Legal Services	Pet Care	Utility Assistance

No referral(s) made

Unsubstantiated
Client Refused

Figure 1 – Change of Condition monitoring protocol

This checklist of indicators was then integrated into the ServTracker® Mobile Meals application that some Meals on Wheels drivers across the country were already using on a mobile device (e.g., a smartphone or a tablet) to navigate their delivery routes to senior clients' homes. Using this enhanced mobile app, drivers gained the ability to not only indicate whether a meal was successfully delivered but also to raise an alert at time of delivery by selecting the corresponding wellness indicator(s) if they noticed a change in the client's condition.

WELLNESS INDICATOR	INDICATOR MAY INCLUDE, BUT IS NOT LIMITED TO
<b>Health (Physical/Mental)</b>	Apparent changes in mood, behavior, or physical health (i.e., shortness of breath, facial droop, etc)
<b>Self-Care/ Personal Safety</b>	Apparent changes in personal appearance and/or hygiene
<b>Mobility</b>	More difficulty in moving around and/or answering the door
<b>Nutrition</b>	Visible weight gain or loss, dental problems, etc
<b>Home Environment</b>	Unsafe entryways and/or heating/cooling problem
<b>Social Isolation/ Loneliness</b>	Loss of family, friend or pet
<b>Emergency/911</b>	True emergency needing immediate, trained response

Figure 2 – Wellness Indicators as seen on Mobile Meals

Figure 2 shows an image of the user interface and is accompanied by a high-level list of what may be included in each indicator category. These Change of Condition alerts would then immediately be sent to the Meals on Wheels office where a staff member would decide the best way to respond to each alert. Staff could also capture the follow-up action taken (e.g., Did someone call the client? Their caregiver?), as well as any selected referral(s), if needed. Once an issue had been addressed, the alert could be formally closed out, and documentation and data surrounding all actions taken would be stored. Referrals ranged significantly but included senior companion services, utility assistance, and case management. In many cases, programming to support the client's identified needs may be offered in-house. In other cases, these supports may need to be referred out.

To test and further refine this technology-enhanced Change of Condition reporting process in practice, 26 local Meals on Wheels programs were selected to participate in a pilot effort. Implementation was completed in two phases: first, with a pilot at two program sites (part of the *More Than a Meal*® Process Evaluation effort, published in Morris et al 2019); then, with an initial group of 10 expansion sites, followed by another group of 12 expansion sites shortly after that were mentored by the initial group (part of the *More Than a Meal*® Process Expansion effort). A profile of participating programs can be found in *Figure 3 – Overview of Participating Meals on Wheels Programs*.

Meals on Wheels America provided all participating programs with dedicated support resources and training guides for staff and volunteers on the formal technology-enhanced Change of Condition monitoring protocol. Each site used a consistent protocol and the same definition of wellness indicators. Meals on Wheels America also facilitated monthly virtual discussion forums for all participants and paired expansion sites from the second and third waves of implementation in mentor/mentee relationships. Participating programs were also each given a

standard checklist providing implementation guidance that was assessed monthly, and they were encouraged to work with the ServTracker® team to address any technical issues that arose while using the mobile app throughout the pilot. The ServTracker® team provided all technology-related technical support, including onboarding new users.

For each of the participating programs, three main contributors to the successful implementation of the formal Change of Change monitoring protocol were identified through the pilot process: the program’s technology adoption approach; engagement with the program’s community; and the program’s ability to leverage the national network to quickly learn and apply best practices.

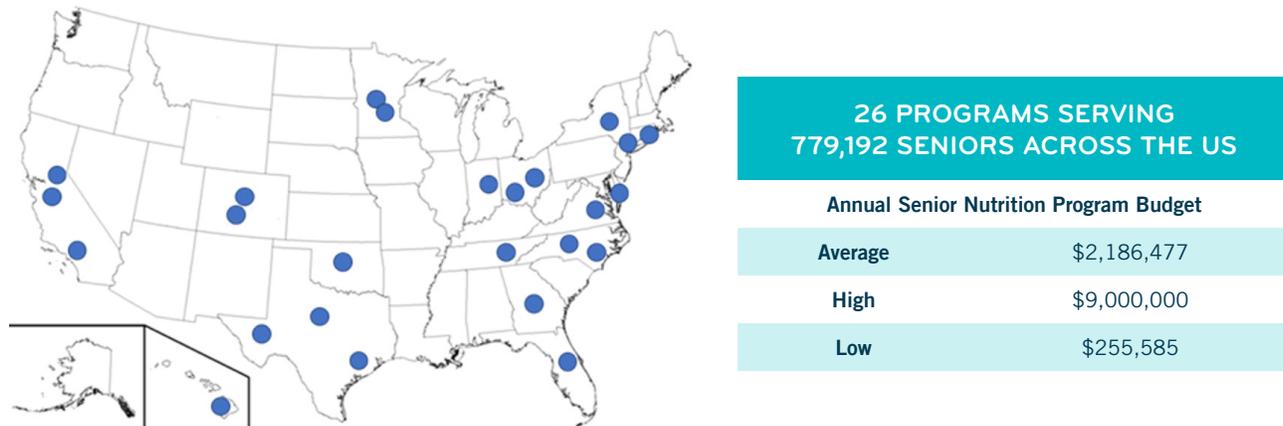


Figure 3 – Overview of Participating Meals on Wheels Programs

## TECHNOLOGY ADOPTION APPROACH

This Change of Condition monitoring protocol requires a technology-enhanced information feedback loop – via the ServTracker® application – to enable drivers to raise alerts with the Meals on Wheels program staff and report changes they observe in any client’s condition during routine meal deliveries so that necessary follow-up actions can be taken.

Adopting this technology was key to implementing the Change of Condition monitoring protocol as designed; however, many programs had viewed this technology as a kind of silver bullet that could be put in place without also undertaking change management within their organization to ensure successful adoption (see Figure 4 – Change Management). The biggest barrier programs thought they would face was volunteers’ reluctance to use the mobile app. Yet, surprisingly most volunteers throughout this pilot process embraced the new technology, because: 1) It validated the fact that drivers’ observations are important to the Meals on Wheels program, and 2) the technology made it easier to deliver meals without shuffling paper, allowing drivers to spend more time with the senior clients.

*“The app saves volunteer time, miles and reduces CO2/gas, as well as makes it easier on the volunteer driver to shift more focus onto the people interaction, as opposed to fumbling through paperwork, getting lost, etc.”*  
 – Pilot participant on technology adoption

## THE THEORY OF CHANGE

To effect change, three things can make the difference in whether a business transformation is successful and the change sticks:

1. Development of skills; confidence in your ability to adopt the change
2. Motivation, both personal (what's in it for me?) and team (how will this help my organization?)
3. Tools – simple and intuitive – helping to make the change easier

Many organizations focus solely on the tools, assuming that technology implementation is the hardest part when engaging people to successfully adopt change. In fact, the best change management plan follows the three steps above, in that order.

For Meals on Wheels programs that were most successful in adopting the Change of Condition monitoring protocol, they engaged the people in their organization in the change process in the following ways:

- For skill development, they provided a combination of training and one-on-one coaching. For some programs, some of the formal training materials were initially daunting, making the new process look harder than it was, which had the effect of lowering people's confidence in their ability to adopt the change. In response to that learning, other program leaders identified role-specific evangelists who could coach people individually, making the change look both easy and doable coming from someone like them, with a message of, "You've got this!"
- While many programs saw the Change of Condition monitoring protocol as adopting technology to make what they already do more efficient, the message of efficiency was not motivating for people or teams who felt that their primary goal was to keep the seniors they cared for safe in their homes. Adopting the change required a team to shift to a focus on how the Change of Condition monitoring protocol would enable them to do a better job delivering the Consistent Service Model offering, quickly identifying and addressing issues to ensure their clients stayed safe and healthy. For example, for a team of volunteers, motivation came in the form of giving them more time to interact with seniors and validating that their observations were helping with the program goals.
- Because the Change of Condition monitoring protocol was new, the most successful programs actively engaged with the ASI team, who then incorporated their feedback, quickly making usability improvements that increased the success of adoption. The participating programs took ownership of the tool, viewing their feedback as part of their role in early implementation of the Change of Condition monitoring protocol.

The programs that were most successful in adopting the change were intentional about planning each of these three steps in their organization, as well as observing their effect and making adjustments to their plan. They approached change as an iterative process focused on adoption from the perspective of helping their people versus enforcing use of new technology.

Figure 4 – Change Management

In addition to adoption of the mobile app, the other half of the technology component of the Change of Condition monitoring protocol was alert management and reporting, performed by the Meals on Wheels office staff. The important role of change management (see *Figure 4*) came into play significantly, as it required that programs adopt new processes, hire or train new staff, and conduct regular analysis of the data they were collecting – all of which may have been different from their regular modes of operations. Since many of the programs participating in this pilot had been so focused on how their volunteers would handle new technology, the programs initially missed the larger aspect of adopting a new process and did not necessarily recognize that ServTracker® is sophisticated business software requiring some degree of operational rigor to successfully implement. For some, the importance of monitoring and use became quickly apparent with its impact on the clients' quality of life. One story illustrates how a participating program was able to monitor an issue to successful conclusion over the course of several months:

*“The initial Change of Condition alert we received stated that the client didn’t seem himself. We followed up and found he had recently been diagnosed with a new health concern and had not been sleeping well. The situation did not escalate further; however, we called to check in several times to ensure continued safety. We followed up with volunteers assigned to his route to request any alerts be submitted to us for continued monitoring. In August, we received a new alert about the client. The alert stated that he is in much better condition – he has been responsive, talkative, friendly and in wonderful spirits. He has had a few visitors recently, and his medical treatments seem to be helping him greatly. Alerts like this that report positive changes are not as common as negative changes, but they do provide significant context for ongoing client care management.”* – Pilot participant on technology adoption

## COMMUNITY ENGAGEMENT

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The Meals on Wheels Consistent Service Model (see *Figure 5 – Meals on Wheels Consistent Service Model*) is designed to engage the whole community in providing holistic services that keep seniors safe and healthy in their homes (a meal, socialization, safety check and community connections), enabling community-based Meals on Wheels programs to leverage the community’s capacity (i.e., volunteers and services like local transportation) to meet the needs of the homebound socially isolated seniors they serve. This philosophy of delivering more than just a meal strongly resonates with volunteers looking to help take care of the people in their own community, while the Change of Condition monitoring protocol can provide a structure that helps to focus the community on working together to resolve issues for seniors. Additionally, the internal sense of community that is fostered by Meals on Wheels programs creates a sense of togetherness and belonging. This collaboration was evident in this program’s story about volunteer support:

*“Volunteers started showing each other how to use the app and working together in learning this new process. This has not only nurtured great new friendships but allowed people from the same generation to “teach” each other. This was a great impact that helped the program move along at a faster pace and fostered a new sense of belonging with our volunteer base.”* – Pilot participant on community engagement

MEALS ON WHEELS

OUR CONSISTENT SERVICE OFFERINGS\*

We seek consistency across Meals on Wheels services throughout the network to position us for future partnership opportunities. Using data and analytics to guide activities in the four primary service components described below will yield the greatest results.

SERVICE DELIVERY

\*As of 2019

<p><b>NUTRITION</b></p> <ul style="list-style-type: none"> <li>Meals (hot, cold, chilled or frozen) are available M-F; hot daily delivery whenever possible (frozen meal delivery, less than daily, when there are geographic or operational constraints)</li> <li>Meals are consistent with national dietary standards; special meals may be available</li> </ul>
<p><b>IN-HOME SAFETY</b></p> <ul style="list-style-type: none"> <li>Regular environmental safety check</li> <li>Established approach for addressing identified hazards and validating resolution (directly or through referral)</li> </ul>
<p><b>SOCIALIZATION</b></p> <ul style="list-style-type: none"> <li>Intentional face-to-face conversation initiated during delivery with clients who are willing</li> <li>At a minimum, a regular telephone “visit” in addition to delivery</li> </ul>
<p><b>COMMUNITY CONNECTIONS</b></p> <ul style="list-style-type: none"> <li>Referrals to other community-based or healthcare services that may be helpful</li> <li>Ongoing monitoring of changes in condition and reporting back to the program office</li> <li>Resolution of identified changes (either directly or through referrals)</li> </ul>



Figure 5 – Meals on Wheels Consistent Service Model 2019

Throughout this effort to scale and refine the process, all incoming Change of Condition alerts were monitored or addressed by Meals on Wheels staff at the main office typically working in a care coordination role. *Figure 6* shows the aggregated number of alerts organized by wellness indicator throughout the study period. In fact, in many cases, programs created a new position to ensure a dedicated staff member would be able to triage alerts and follow up appropriately. Because Meals on Wheels programs are often only one of a number of community services available to seniors, many Change of Condition alerts not directly addressed by the Meals on Wheels program could be referred out to other service partners within the community.

**Aggregated Alerts for All Meals on Wheels America Sites (Aug. 2019 - Feb. 2020)**

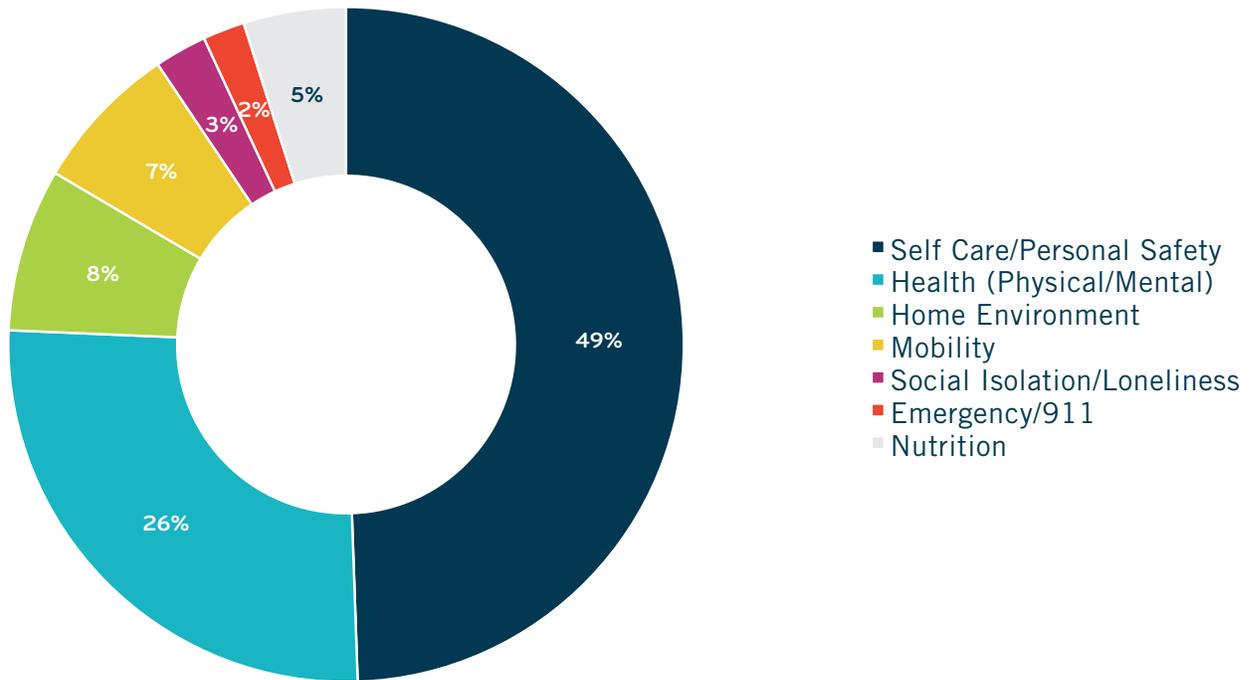


Figure 6 – Aggravated Alerts for All Meals on Wheels America Sites (August 2019 – February 2020)

Though Meals on Wheels programs participating in the pilot had already been handling concerns identified by drivers, the technology-enhanced Change of Condition monitoring protocol provided a standardized way to capture and respond to such concerns. These ensuing records then began to document a rich history of each client’s aging challenges – through any reported changes in condition – as well as efforts taken in the community to address those challenges.

Further, the data collected through the ServTracker® mobile app was able to be used to measure impact of follow-ups and referrals on each client to help manage a partnership strategy for Meals on Wheels. By tracking the types of referrals needed, Meals on Wheels programs could identify and strengthen local partnerships to support their clients. Local programs could now see more clearly which actions taken were effective and where more help or new partnerships would be needed to better address an issue in the future.

For example, one program told this story of evaluating and identifying a referral partner gap, as they started to refine their alert process:

*“We are continuing to work on internal processes to handle change of condition notifications and to find solutions to the client needs. We focused on yard work this month and were able to acquire a new source for yard work. As a result, six clients received intensive yard work free of charge.” – Pilot participant on community engagement*

## NETWORK SUPPORT

In designing the scaling support system to increase the successful implementation of the Change of Condition monitoring protocol by local programs, Meals on Wheels America used a network approach. Meals on Wheels America held multiple webinars, launched a peer-to-peer communications and support platform, and matched pilot participants in mentor-mentee pairings to facilitate the wider implementation of the Change of Condition monitoring protocol.

This network support approach began with a survey of Meals on Wheels participant programs to assess their capabilities and capacity. Meals on Wheels America staff leveraged data from a separate research effort, the *More Than a Meal*<sup>®</sup> Comprehensive Network Study, as well as assessments from program participants to guide the development of support tools needed.

From this foundation, interviews with early adopters of the Change of Condition monitoring protocol revealed a successful rollout strategy that consisted of phases to prepare the organization, integrate the technology, train the volunteers and drivers and measure results. The rollout strategy became a common checklist that each program used to track milestones to successful implementation (see *Table 1: Change of Condition Implementation Checklist*).

ROLLOUT STAGE	KEY ACTION STEPS
<b>1. Organization, Preparation</b>	Assess the technical, operational and cultural readiness of the Meals on Wheels program to implement the Change of Condition monitoring protocol.
<b>2. Setup and Planning</b>	Engage team to address technology, organizational roles or skill gaps and communicate the vision to volunteers and staff.
<b>3. Initial Testing</b>	Test the Change of Condition monitoring protocol and make refinements, documenting and communicating the implementation plan.
<b>4. Initial Rollout to First Routes</b>	Deploy training and technology to the first routes, performing a retrospective to adjust the implementation plan.
<b>5. Scale to Routes Selected for Full Implementation</b>	Deploy training and technology to all routes, regularly analyzing data collected and feedback for continuous improvement of the Change of Condition monitoring protocol.
<b>6. Expansion</b>	Using data as evidence, broaden More Than a Meal services and partners to keep seniors healthy and safe in their homes.

*Table 1: Change of Condition Implementation Checklist*

In parallel, programs were paired into mentor-mentee relationships. This, along with more formal check-ins with the wider research cohort, created a sounding board for programs to get help and advice for the challenges they were finding. This sharing of best practices “floats all boats,” where the Meals on Wheels clients benefited from evidence-informed program improvements in other Meals on Wheels programs.

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*“We discussed with our mentee how to get volunteers excited and to use one-on-one trainings to overcome any reservations. We also explained a rollout strategy where paper and mobile will have to be used for a while in parallel.” – Pilot participant on the network*

*“Our team met with the other pilot program members. It helped demonstrate how each organization is at a different place in the implementation process. It also reinforced that this is a learning process and that each organization has different needs.” – Pilot participant on the network*

## RESULTS

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Most participating pilot programs had initially assumed that technology adoption would be their biggest challenge with rolling out the Change of Condition monitoring protocol. However, for many this was easily overcome or not an issue. The most successful implementations were with programs who focused on the human interactions with clients. If programs focused solely on the mechanics of Change of Condition and not the why, it took longer to fully implement the protocol. On the other hand, in those programs that fully acknowledged their role in delivering comprehensive services to seniors in need, everyone from staff to volunteers understood that it was their job to intervene if they saw something that could impact their clients’ ability to live safely at home and, as such, were able to adopt the Change of Condition monitoring protocol more naturally and often more quickly.

The pilot also revealed that operations were challenging for some programs who focused too much on volunteer adoption of technology and not enough effort on solidifying operational processes to manage incoming Change of Condition alerts. Through this process, 65% of participating programs added additional staff and 50% provided additional training, moving existing staff to new roles to combat the volunteer attrition they anticipated as a result of an aversion to technology. In the end, most programs were surprised to find that they lost only one or two volunteers due to these concerns. In fact, as a measurement of return on investment, 55% of programs reported an increase in volunteer engagement.



Many programs also thought that starting with paid drivers and/or a limited number of routes would be a way to ease into implementing the Change of Condition monitoring protocol. However, some paid drivers were more likely to feel they were merely delivering a meal, while volunteers were more intrinsically motivated to provide senior clients with the holistic service model (a meal, socialization, safety check and community connections). For office staff, managing an old alert process at the same time as the new technology-enhanced alert process meant double work, so pilot programs found it was better to fully commit to one or the other.

The vast majority (85%) of participating programs reported that the Change of Condition monitoring protocol helped their clients avoid declines in their health or living conditions in key ways:

- The Change of Condition monitoring protocol identifies issues that volunteers had become accustomed to seeing, such as minor safety issues in homes, that had been overlooked through the service time. A key component of reporting changes of condition is making drivers more aware of what to look for with regards to the health and well-being of a program's clients.
- The Change of Condition monitoring protocol eases daily communication between drivers and office staff (e.g., case managers) regarding client concerns which, in turn, allows for quicker follow-up. This reporting process also requires a more thorough follow-up to ensure concerns are resolved, and real-time information helps clients get the assistance they need faster.
- The Change of Condition monitoring protocol opens the path to provide real-time feedback to clients and family members to assure them that the Meals on Wheels program is providing clients with services that promote wellness and enhance quality of life. With the Change of Condition monitoring protocol, more issues are reported which previously may not have been noticed or addressed.
- Programs are better able to respond to reported concerns. Where they previously would have asked drivers to call in concerns, the Change of Condition monitoring protocol ensures that they no longer miss calls, drivers do not have to leave a voice message, and they are notified that program staff have received their concern and will follow up. The Change of Condition monitoring protocol makes programs much more efficient.
- Programs are able to track health declines and let loved ones know before a major incident happens. Identifying these declines notifies families, who are then able to take their loved one in for check-ups and get them the help and medical attention they need.
- The Change of Condition monitoring protocol gives a more complete picture of the client in one digital location. In the old system, programs would track clients through email and notes, with items falling through the cracks.
- Having volunteers report changes of condition increases awareness of things to look out for and feedback. Many concerns are being relayed to social workers that previously were not. While programs have always asked volunteers and staff to report any client concerns or needs back to the office, the Change of Condition monitoring protocol formalizes the process in terms of relaying the message to the office, documentation of follow-up and/or referral, and ability to quantify the data to show impact.
- Meals on Wheels programs are able to make internal referrals to other services and organizations to address social determinants of health by providing meals for senior clients' pets, additional socialization opportunities, home repairs, grocery assistance, and more. The alerts give an opportunity to connect with clients to assist in finding the root cause of their concerns, ensuring programs can assist in impactful ways. The Change of Condition monitoring protocol allows the program to address the overall well-being of clients. One story in particular highlights how this history and continuity worked for a client:

*“After a client underwent surgery, he moved in with his daughter so she could help manage his recovery then moved back to his own home to live independently. Staff spoke with his daughter, who described how she felt happy but hesitant about his move back to live on his own. She said that knowing volunteers and staff could send alerts about changes in his health and home environment made her feel better about his safety. This sense of security is a common trend that programs see with caregivers and loved ones. Daily contact has long since been a critical factor in program services. With the increase in capability to report concerns to loved ones immediately, the opportunities to provide assurance and relief of caregiver burden are appreciated and impactful.” – Pilot participant on client impact*

## NEXT STEPS

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Meals on Wheels America has adopted a “scale what works” approach to broader adoption of the Change of Condition monitoring protocol. Best practices and lessons learned from this first pilot effort have been captured and formalized to provide other programs with a blueprint for their implementation in the future. Similar to a franchise model, this approach standardizes an operational model for capturing and managing alerts that can be adopted across the Meals on Wheels network. It also provides a rich library of resources and advice to help programs break through their own operational barriers that might be preventing successful adoption.

The difference is profound – programs attempting to implement the Change of Condition monitoring protocol will not be starting from scratch or going it alone. Because Meals on Wheels America can aggregate data collected via the Change of Condition monitoring protocol, a more strategic approach to program development can emerge, helping to quickly address new challenges for the senior population as they arise. Challenges still exist with data collection and critical steps have been built within the technology to help support consistent data collection.

For programs that have implemented the Change of Condition monitoring protocol, a key next step is to use the change of condition data they are collecting to assess the effectiveness of their referral network and forge new partnerships with healthcare entities, referral services or funders, which is of growing interest to Meals on Wheels programs. As stated earlier, data-informed partnerships between healthcare and community-based organizations is a growing area in addressing social determinants of health. In the case of Meals on Wheels, programs can offer its Consistent Service Model to clients just discharged from the hospital or as a preventive measure, reducing emergency room visits, hospital admissions and readmissions, as well as nursing home placement rates because they are able to identify issues before they result in an acute episode. A key next step to scaling and refining the Change of Condition monitoring protocol will be to work with health systems to integrate a bi-directional communication effort for needed referrals in which health systems and community-based organization can securely share the data of their shared clients.

The U.S. population is aging and as life expectancy increases, the older adult population is expected to continue to grow. By 2030, the U.S. Census Bureau projects that one in five Americans will be 65 or older. Meals on Wheels programs are ideally suited to evolve to meet the changing needs of seniors as they age in place. The Change of Condition monitoring protocol, along with the Meals on Wheels Consistent Service Model, ensures that Meals on Wheels programs can proactively identify interventions and additional services that ensure the health and well-being of Meals on Wheels clients now and in the future.

