

Background and Purpose

A. Goal:

To improve the nutritional and health status of rural adults 60 and older with multiple chronic conditions following hospital discharge.

B. Objectives:

- Developing a referral pathway and protocol that will facilitate reaching adults 60 and older with multiple chronic conditions most in need of nutritional support and management.
- Identifying and serving 100 older adults with multiple chronic conditions through the Ibis system nutrition support module with meals in their homes.
- Leveraging AI technology and data to drive nutritional program improvements to better serve this at-risk population.
- Establishing AAA revenue enhancement capacity for nutritional support services that will then be replicable by other community organizations.

C. Overview of Project:

The Nutrition Innovations Project was a partnership between the University of Maine Center on Aging, Sencio Systems, Eastern Area Agency on Aging, and St. Joseph Healthcare to test a nutrition intervention for older adults with chronic conditions who have been recently discharged from hospital to home. The intervention paired the Ibis Health Management System with delivery of meals and nutrition counseling with the goal of improving outcomes related to nutrition, chronic disease self-efficacy, ER visits, and hospitalizations.

D. Project Results:

A total of 185 individuals were referred to the program - 162 declined to participate, 14 withdrew prior to study completion, and 9 completed the study. Of the nine completers, four participants were in the control group and five participants were in the intervention group. Due to the small sample size, the results of the outcome study were inconclusive.

Participants were generally satisfied with Ibis. Participants did not cook and were unlikely to use nutrition information from Ibis. Most valued intervention supports were vitals monitoring and check-in calls/reminders. Least valued supports were the recipes and nutrition information offered through Ibis.

Process evaluation findings indicated that adoption of nutrition and chronic disease self-management technology and support may be more successful outside of acute care settings. Interventions should be piloted in alternate recruitment settings to gauge potential for adoption. Flexibility in meals options and volume, and interactions with health monitoring technology, are important for successful utilization.

A survey was done with Eastern Area Agency on Aging's Meals on Wheels population to identify desired features of health technology and barriers to use. Vital signs monitoring was the most valuable feature identified, followed by remote access to classes and events at Area Agencies on Aging, and video visits with medical providers. Barriers to health management technology utilization were affordability and privacy concerns.

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