



# Nutrition and Aging Resource Center

# Texas Congregate Meal Initiative

## Principal Investigators

**Keely Lee, TCMI Project Director**

ADRC Director, Texas Health and Human Services Commission

&

**Nandita Chaudhuri, Ph.D., TCMI Research Lead at Texas A&M**

Research Scientist, Public Policy Research Institute, Texas A&M University

## Authors

**Laila Alvi**, Research Associate, Public Policy Research Institute, Texas A&M University

**Zack Brattin**, Project Coordinator, Public Policy Research Institute, Texas A&M University

**Nandita Chaudhuri**, Research Scientist, Public Policy Research Institute, Texas A&M University

**Anthony Jackson**, Research Specialist, Public Policy Research Institute, Texas A&M University










**Linda Netterville**, Independent Older American Nutrition Consultant

## Date of Report

December 1, 2022

**ACL Disclaimer:** This project was supported, in part by grant number 90INNU0013, from the Administration for Community Living, U.S. Department of Health and Human Services, Washington, D.C. 20201. Grantees undertaking projects with government sponsorship are encouraged to express freely their findings and conclusions. Points of view or opinions do not, therefore, necessarily represent official ACL policy.

# Table of Contents

	Background and Purpose.....	3
	Partners and Project Staff.....	6
	Funding and Sustainability.....	7
	Recruitment.....	8
	Tools.....	11
	Project Timeline.....	12
	Frequently Asked Questions.....	14
	Advice for Replication.....	15
	Appendix List.....	17



# Background and Purpose

## 1) Goal:

The goal of the project is to improve the well-being of older Texans by modernizing local congregate programs through the creation of the Texas Congregate Meal Initiative (TCMI). Desired outcomes include increasing business acumen, improved program development skills, increased client participation, increased client satisfaction and improved well-being and social integration of Older American Act (OAA) clients at the participating sites.

## 2) Objectives:

- 1) Conducting a comprehensive gap analysis to identify the facilitators and barriers of congregate meal programs in Texas
- 2) Increasing business acumen and program development skills of selected congregate nutrition providers
- 3) Implementing and evaluating a learning collaborative model of innovative low-cost sustainable congregate meal pilots

## 3) Overview of Project:

In collaboration with the Texas Health and Human Services Commission (HHSC), the Texas Area Agencies on Aging, Mays Business School, and Supplemental Nutrition Assistance Program-Education (SNAP-Ed), the Texas Congregate Meal Initiative (TCMI) project (2019-2022) facilitated strategic innovations in congregate meal services to improve the social determinants of health for Older Texans. This was done by selecting and empowering 16 diverse congregate meal program pilots across rural and urban Texas to implement low-cost, replicable, innovative pilots through a Learning Collaborative (LC) model. As a capacity building tool, the LC provided comprehensive technical assistance to help test community-centered innovations that targeted increasing congregate meal participation and expanding the benefits and social outcomes for the pilot participants. The Learning Collaborative also helped develop business acumen, innovations thinking, marketing strategies and community partnership skills for the pilot implementers via subject matter experts and peer sites who functioned as part of a larger community of practice. The project evaluated the overall successes and challenges of the pilots through a social scientific design and outcome-based assessment to enable Texas policymakers and the aging network identify sustainable and replicable best practices, tips, and resources in modernizing the congregate meal programs across the state.

## 4) Project Results:

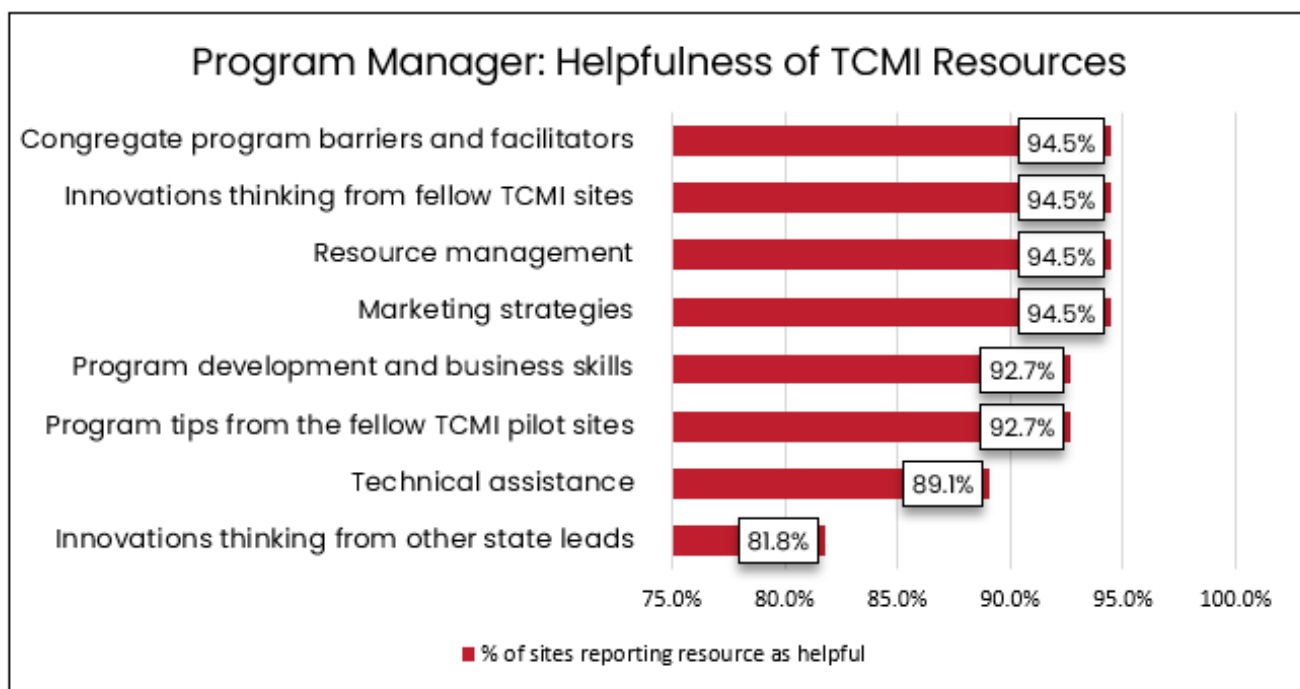
Project outcomes were tracked with the help of multiple data sources: a program manager survey, a client survey and TCMI Learning Collaborative evaluation surveys that integrated multiple programmatic and client outcome indicators to track over the course of the project. Selected outcome findings are listed on the next pages.

- **Outcome I. Increased business acumen and program development skills among congregate meal providers and the Area Agencies on Aging (AAAs).**

Data Sources: Program Manager Survey and TCMI Learning Collaborative Evaluation Surveys

- Across the three time points measured (December 2021, March 2022, and June 2022), Figure 1 outlines the resources provided by the TCMI Learning Collaborative that were deemed helpful by program managers.

**Figure 1: Helpfulness of TCMI Learning Collaborative Resources**



- **Outcome II. Increased participation of Texans 60 years and older in the congregate meal program.**

Data Source: Program Manager Survey

- Site closures and resulting varying implementation timelines made measurement of participation numbers across TCMI pilot sites challenging. Sites implemented their pilots at varying timelines. **TCMI pilot managers anecdotally commented that their participation was higher than expected after implementing the pilot** (and that the value of the program increased for participating older adults). However, due to the impact of the COVID-19 pandemic, very few TCMI pilot sites were able to systematically track their participation numbers compared to their pre-pandemic numbers.
- Instead of “increased participation numbers”, the pilots tracked **“community awareness” of the congregate meal programs (CMPs)** as a programmatic success outcome. Eighty nine percent of providers reported their community is more aware of the congregate program because of their TCMI pilots.
- Seventy one percent of TCMI pilot managers’ report **increasing access through pilots to vulnerable under-served Older Adult clients** as a result of the project.

- **Outcome III. Increased satisfaction of congregate meal participants.**

Data Source: Client Survey

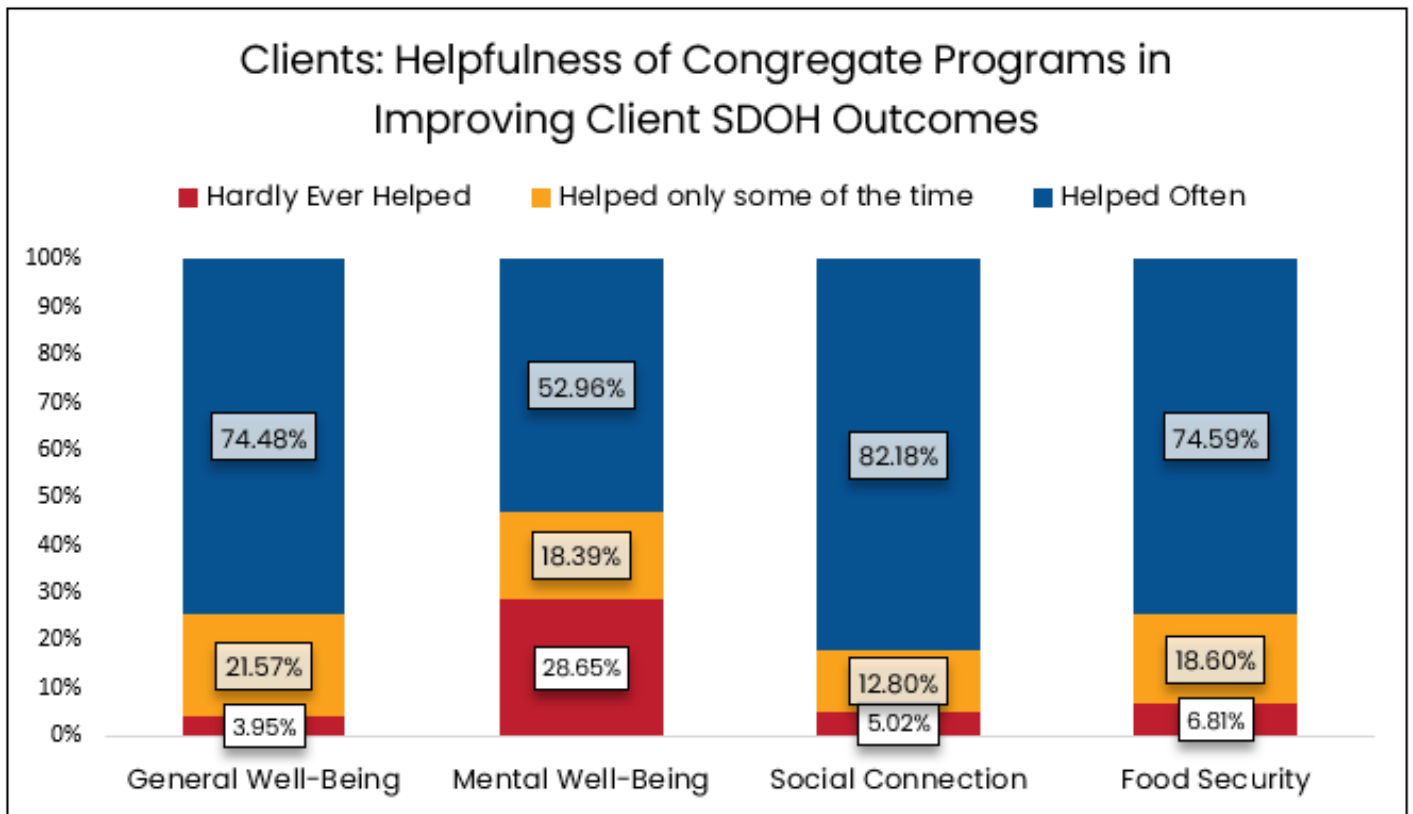
- 96.4% of clients **would recommend their congregate program** to other older adults in their community.
- 95.9% of clients reported **positive courteousness and friendliness** of congregate meals site staff.
- 79.9% of clients reported positive satisfaction with meal quality. Of these, 37.4% of clients said the meal quality was “Excellent” and 42.5% of clients said the meal quality was “Good”

- **Outcome IV. Improved participant perceptions of wellness, food security and social integration.**

Data Source: Social Determinants of Health (SDOH) measures from the Client Survey

- Figure 2 outlines the combined reports across the three time points measured (December 2021, March 2022, and June 2022) of the helpfulness of congregate programs on the included SDOH outcomes.

**Figure 2: Helpfulness of Congregate Programs on Client SDOH Outcomes**



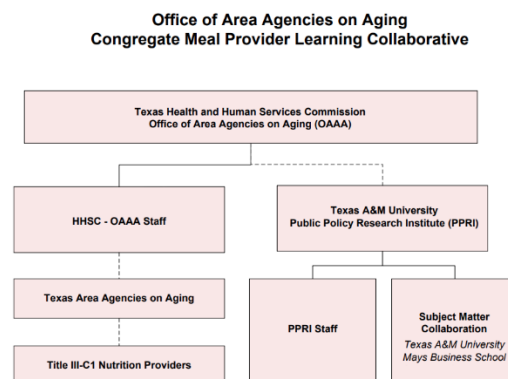
# Partners and Project Staff

## A. Partners:

- **Mays Business School, Texas A&M University:** guiding program development and business acumen development skills
- **Supplemental Nutrition Assistance Program (SNAP):** Education unit of Texas HHSC; evidence-based nutrition education for training the participating sites
- **16 selected senior nutrition providers** from across Texas and their respective Area Agencies on Aging (AAAs): demonstration pilot sites implementing the innovative low-cost, sustainable models
  - *Several Community Based Organizations for each TCMI pilot project*
  - *Selected Subject Matter Experts* were recruited for internal and external meetings to provide expertise on affiliated topics.

## B. Project Staff Roles:

- List number of FTEs
  - Public Policy Research Institute (PPRI) staff have varying skills and specialties. As such, the staff affiliated with TCMI range in their contribution to the project, with some members applying as little as 4% of their time and others over 40%. Based on internal allocations, the following FTEs were calculated for each project year: 1.21 FTEs in FY20, 1.28 FTEs in FY21, and 1.99 FTEs in FY22.
- List staff title and general responsibilities
  - **Public Policy Research Institute, Texas A&M University Staff Role:** translational research including envisioning and implementing all aspects of the project; selection of sites, innovations training for sites, mixed methods evaluation to develop the evidence base, and dissemination of project findings through various vehicles.
    - A&M Principal Investigator and Research Lead:** Oversight of entire project, including: development and monitoring of contract, monthly contact with project partners, regular communication with NRCNA/ACL as required, leading the research project and its translational research components.
    - Other Research Staff:** Implementation of research instruments, management of sites, TA material development, dissemination.
    - Independent Senior Nutrition Consultant:** Older American Act nutrition expertise.
  - **Texas Health and Human Services Commission (HHSC) Role:** manage programmatic components and fiscal reporting.
    - Project Director:** Overall project oversight and management.
    - Program Staff:** Project management; programmatic and report development.
      - Gina Carter, Sonia Vera, Keely Lee, & Dawn Ferriter
    - Independent Senior Nutrition Consultant:** Older American Act nutrition expertise.



# Funding and Sustainability

## A. Initial Project Funding:

- 2019 Administration for Community Living Nutrition Innovations (INNU) Grant
- Matching funds from Texas HHSC
- From overall funding, 16 TCMI Pilots each received \$10K (\$7.5K for pilot implementation)

## B. Continued Funding:

- Fourteen sites integrated their pilot innovations into their day-to-day operations.
- Six pilot sites secured additional grants.
- Eight sites are applying for grants as of October 2022 to continue selected element(s) of their innovation.
- Eight sites have scaled their TCMI practices to additional locations.

## Sustainability

As for the overall TCMI project, the key repertoire for the project, the TCMI website – with all tools, instruments, tips, information, guidance documents, etc. – will remain to help support the innovations and empower additional future innovative programs state and nationwide. Practice models implemented by the project sites will be shared through the TCMI website. Building upon project success outcomes, PPRI plans to take successful and replicable parts of the TCMI project and seek additional grant funding from public and private donors in the future.

The TCMI pilot sites planned and implemented their innovations with buy-in and organizational support to sustain after the grant funding ended. Pilot sites will sustain their innovations through the following efforts outlined.

- Sites have identified additional financial or in-kind resources to continue their innovation. This includes equipment, facilities, technology, and staffing (organization and volunteer). External grants and donations were sought from Community Development Block Grant funding, private businesses, and foundations.
- Local governments have provided support for site locations, monetary support, coordination assistance, and marketing.
- Fee for service options have provided the ability to expand services through nominal voluntary donations from seniors.

The next page shows the sustainability strategies and/or components reported by each TCMI pilot site.

# TCMI Pilot Funding and Sustainability Components

## ***Tech Savvy Seniors***

Community partnerships, equipment purchased, pilot volunteers, additional funding from St. Claire hospital system

## **Angelina County Senior Center Association**

### ***The Silver Connection***

Community partnerships, marketing material, equipment purchased, pilot staff

## **Amigos Del Valle, Inc.**

### ***Basic Internet and Computer Skills***

Equipment purchased

## **BakerRipley**

### ***Morning Perk Café***

Entire pilot through additional grant funding from TXU Energy

## **City of Brownwood Senior Citizens Center**

### ***All Day Energy Under One Roof***

Community partnerships, equipment purchased, changed setting

## **City of San Antonio**

### ***It's All Connected***

Community partnerships, marketing material

## **Dallas County Older Adult Services Program**

### ***Blood Pressure Telehealth Kiosk***

Community partnerships including American Heart Association, marketing material, equipment purchased

## **Hereford Senior Citizens Association**

### ***The Senior Connection***

Community partnerships, equipment purchased, pilot volunteers

## **Meals on Wheels – Central Texas**

### ***Beyond the Walls***

Community partnerships, marketing material, equipment purchased, pilot volunteers

## **Meals on Wheels – Collin County**

### ***Online Overhaul***

Community partnerships, marketing material

## **Meals on Wheels – Tarrant County**

### ***MasterClass***

Community partnerships, marketing material, *MasterClass* subscription donation, pilot volunteers & staff

## **Meals on Wheels – Victoria**

### ***Connection Café***

Community partnerships, marketing material, equipment purchased, dining room reset, pilot staff, additional funds from Community Block Development Grant and United Way

## **Meals on Wheels – Waco**

### ***Seasoned Creatives***

Community partnerships, marketing material, equipment purchased, volunteers & staff, additional funding from Baylor Scott & White, Bank of America, City of Waco, Subaru, and a local senior dance group

## **The Kitchen**

### ***Steps to Better Living***

Community partnerships, marketing material, implementation of regular health and wellness programs

## **Somervell County Committee on Aging**

### ***SCCoA Live***

Community partnerships & networking, equipment purchased



# Recruitment

## A. Participants

### a. List Requirements

- Providers from all 28 Texas Area Agencies on Aging (AAA) regions were encouraged to apply to the Learning Collaborative regardless of organizational size, geographic region, and demographic make-up. To be eligible, applicants must receive Title III-C1 funding at the time of application and have decision-making authority over a congregate meal program. Applicants must be willing to fully engage in all aspects of the Learning Collaborative.

### b. What recruitment methods were used?

To select 16 congregate meal provider participants for the TCMI Learning Collaborative (LC), PPRI developed an application survey. This application is included in Appendix A. PPRI programed this survey on the Qualtrics platform and Texas HHSC fielded the application material through their AAA outreach mechanisms. The survey included an overview of the TCMI project, general requirements, the application review and award process, as well as technical support process for selected applicants. The survey also included questions on applicant contact information and key traits of their congregate organizations such as geographical location, size, type and numbers of meal sites, unduplicated numbers served, community partnerships, program status, funding, new practices, or innovations tried etc. PPRI developed a selection rubric and carefully fleshed out criteria related to opportunities for innovation in the congregate meal programs. PPRI then reviewed the applications alongside these criteria, resulting in the 16 sites selected for the Learning Collaborative.

#### **Successful:**

- The applicant pool was sufficiently diverse, illustrating successful distribution by the end of data collection but there were no applicants from West Texas AAA regions.
- The project aimed for 16 LC participants and received 37 complete applications.

#### **Not successful:**

- The first two weeks of fielding the survey did not yield adequate LC applicants. Texas HHSC then linked the application strategically with their concurrent disseminations and contacts to facilitate survey participation.
- An additional pool of 24 applicants completed the bulk of the application but did not submit the appropriate additional documents.

## Recruitment *Continued*

### B. Marketing Tips

- Strategic dissemination of the application enabled numerous senior nutrition providers to be aware of the project. Because this learning collaborative targeted congregate meal providers specifically, there was no need to target older adult clients directly.
- As for marketing the opportunity to participate in the Learning Collaborative, attention on the Texas AAAs and provider-level distributions worked well along with marketing through organizations such as the Texas Association of Regional Councils (TARC).
- When the selected participants implemented their pilots later in the project, each site recruited a plethora of community partner organizations from their own jurisdictions. They used various types of marketing to create awareness about their TCMI pilots: words of mouth, local media, billboards, social media, PSAs, YouTube videos, project websites etc. The TCMI subject matter experts on marketing provided training on how to reach Older Texans and how to market the pilots in local communities. Some sites also used volunteers from partnering agencies and from their own congregate clients as parts of their pilots.

# Tools

## A. Technology

- **Zoom** | PPRI conducted virtual events (kickoff, workshop) and provided technical assistance through Zoom platform during the project. This enabled a more personal connection than phone calls and facilitated consistent communication and coordination with the pilot sites. The platform was also used to conduct virtual focus groups with Older Americans, nutrition providers, AAAs and other aging stakeholders.
- **Qualtrics** | PPRI utilized the Qualtrics platform to conduct evaluation surveys for each major project milestone and all-site events. These evaluation surveys enabled PPRI to tailor technical assistance and site meetings to participant needs and to consistently improve project processes. Surveys were also used as a part of overall mixed methods.
- *All PPRI personnel have access to a desktop computer with access to internet and the bandwidth to support video and screen sharing through Zoom.*

## B. Resources

- **Project Website** | At the beginning of the project, PPRI developed the project [website](#) as a repertoire for project information, resources, and slides from all training material, workshops and presentations. This central location enabled the TCMI pilot sites, affiliated AAAs, aging stakeholders, and others interested in the project to access the project documents and resources digitally. The website will not be dismantled beyond the grant life and all Texas nutrition providers and AAAs will be able to access it while reimagining their congregate meal programs as their sites reopen and start serving clients.
- **Logic Model** | PPRI provided the learning collaborative participants with an example logic model to help refine their innovative ideas and structure their pilot with concrete inputs, partnerships, and measurable outcomes (included in Appendix B).
- **RFP for TCMI Innovative Pilots** | PPRI generated an example Request for Proposal (RFP) that each pilot site completed. This was a non-competitive process and did not impact the amount of funding the participants would receive, but it provided the sites with the practical experience of completing an RFP and envision their projects and related spending from start to finish. The RFP template is attached in Appendix C.
- **Google Data Studio** | PPRI implemented two data collection surveys to measure project impact: one survey for program managers from each participating congregate site and a second survey targeted towards older adults participating in the pilot innovations. Most of the program manager surveys were completed in Qualtrics while most of the client surveys were completed on paper. The data was then collated by program managers and transmitted electronically to PPRI. Once the data from both surveys was received, the information was imported into Google Data Studio to enable an interactive dashboard that could be hosted on the PPRI website. A screenshot of this dashboard is included in Appendix D.

# Project Timeline

2019

## Summer 2019

- Developed and submitted ACL Innovations in Nutrition grant proposal.

## Fall 2019

- September 2019: Received ACL Innovations in Nutrition grant.
- IRB application for project methodology approval and status determination.
- Conducted asset mapping and developed survey instruments to identify barriers and needs for congregate meal programs in Texas.

## Winter 2019

- Applied to IRB for survey instruments and comprehensive needs assessment methodology and protocols.
- Conducted literature Survey, developed three surveys (Older American Panel Survey, Survey of organizations serving Older Americans in Texas, Community Health Provider Survey), worked on sample and data collection; collected data on congregate meal program barriers and facilitators, and analyzed data. Worked with a sample provider company and HHSC to field the surveys.
- With SME partners, collaboratively began to develop innovative training material.

2020

## Spring & Summer 2020

- Developed a focus group guide to revalidate and reconfirm survey data with larger aging stakeholders.
- Conducted 29 focus groups in 28 AAAs, process and analyze data. Because pandemic continued, assessed pandemic restrictions and challenges on programs.

## Fall & Winter 2020

- Developed application and protocols for nutrition providers to apply to participate in the TCMI Learning Collaborative.
- Promoted workshop application to possible LC applicants.
- Developed a project website.
- Selected 16 TCMI pilots through an application process.
- Developed and finalized curriculum and evaluation material for and targeted Technical Assistance.
- Conducted Learning Collaborative virtual workshop with TCMI pilots and their AAAs.
- Provided assistance for pilot logic models development.

# Project Timeline Continued

2021

## Spring, Summer & Fall 2021

- Provided targeted help with community partnership building and marketing of the pilots.
- Assessed implementation readiness with targeted surveys.
- Tracked data and provided workshop participants with collaboration opportunities.
- Held grouped pre-implementation meetings.
- Developed all evaluation protocols: program manager survey, client survey, baseline survey. Integrated evidence-based scales for all outcome tracking.

2022

## Winter 2021 – Summer 2022

- Pilot sites implemented innovative business proposals based on their pandemic reopening schedules.
- PPRI tracked implementation data and provide workshop participants data story boarding opportunity to discuss challenges, successes, promises, related tips.
- Conducted Cross-Site Evaluation following a mixed methods process and outcome-based approach.

## Spring & Summer 2022

- Published research findings in two academic journals. Presented in targeted conferences.
- Developed cross-site comprehensive evaluation report. Help pilot sites share data stories and facilitate LC based learning on successes and challenges.
- Assisted sites to package success data for marketing and sustainability.
- Conducted an end-of-project summit in September 2022 to disseminate pilot success outcomes data and tools.



# Frequently Asked Questions

## **Q: What are some things that have worked really well in this project?**

A. First, the mixed methods approach for the comprehensive needs assessment during the first year of the project worked very well in collecting rich qualitative and quantitative data on Texas specific facilitators and barriers for the congregate meal programs. The project used this data to inform training material for the innovation pilots in later stages. Secondly, during years 3 and 4, using the Learning Collaborative (LC) approach to empower the pilot sites really worked well for building capacities and innovation skillsets for the 16 pilot sites through. The LC's marketing strategies training helped the pilots increase program awareness and visibility in the pilot communities. The pilots developed superb local community partnerships too that helped enrich their project goals and enhanced their overall sustainability prospects. Thirdly, the project helped to significantly increase resources and funding to support sustaining the pilots and/or selected pilot components. A site described, "We took \$10,000 and turned it into \$70,000." Finally, the project improved the SDOH outcomes of senior nutrition clients across the diverse pilot sites.

## **Q: What has been this project's biggest challenge?**

A. The COVID-19 pandemic affected not only the implementation timeline of the TCMI Learning Collaborative (such as converting in-person components to virtual components) but it directly affected the pilot sites themselves. Sites had to address COVID challenges, varying public health department mandates, and stop onsite activities for extended periods of time. In addition, they re-opened at different times, causing logistical issues for pilot survey data collection, and posing challenges for the overall project design because they kept on pivoting. The sites whose innovations centered on dining model enhancements suffered the most because they could not implement their overall envisioned plans.

## **Q: How did you go about finding appropriate partners/partner organizations?**

While developing the project design, we had to carefully think about meaningful partnerships that could contribute to the success of project's vision. Texas HHSC came to PPRI at Texas A&M University to design and implement the project and we included Texas A&M Mays Business School for their marketing acumen expertise. SNAP-Ed was also included for their involvement with evidence-based nutrition and physical activity curriculum and linkage with the Texas food banks. The most important partnership was with the sixteen (16) selected congregate nutrition providers from an applicant pool of 37 and their respective Area Agencies on Aging. For the 16 pilot innovations, building community partnerships was key to project success and will contribute to local sustainability. They have developed effective local partnerships with food banks, local chefs, local donors, nursing schools, youth organizations, healthcare organizations, hospitals, higher-educational institutions for technology based and other activity-based curriculums. The project has been a partnership galore from all possible perspectives.

## Frequently Asked Questions Continued

### **Q: How do I get started/what are the first steps to do a similar project?**

A. The first steps involve identifying the gaps in your local congregate programs and building a network to assist in filling those gaps. Once the gaps are identified, leverage your network of providers, researchers, and subject matter experts to work on the innovations thinking component. A congregate site must identify the resources, both current and potential, needed for the successful planning and implementation of the innovation desired. While project staff trained and empowered the TCMI pilot sites, it was the sites themselves that developed and implemented their pilot innovations. Each of the selected sites has years (if not decades) of experience serving older adults and leveraging this wealth of experience is incredibly important.

### **Q: What stakeholders did you need buy-in from?**

A. Texas aging stakeholders were the primary target audience for the project. Each of the pilot sites focused on specific local aging stakeholders in their own region, including their existing and possible Older American clients. Some sites utilized funds from local governments, businesses, or health-focused organizations. Their community partnerships included restaurants, local businesses, and schools or colleges that provide in-kind support through curriculum, volunteers, teachers, chefs, etc. To create buy-in at all these levels, storytelling with help of program outcome data were valuable. There was also crucial buy-in needed from the respective Area Agencies on Aging.

### **Q: What do you wish you would have known prior to beginning the project?**

A. We wish we were aware of the nutrition program priorities and staffing limitations at all senior nutrition sites. Planning and implementing innovations take additional staffing and resources above the daily normal staffing and can stretch operational needs. Some of the pilot programs had only the director to implement the project. Secondly, we wish we had the comprehensive knowledge of existing community partnerships in the various regions that have been used to historically support congregate initiatives. Some of the staff at the pilot sites were new, did not know much about their institutional partnership history and had more hoops to cross in creating partnerships that were key in contributing to pilot successes.

### **Q: Did your project measure any social determinants of health?**

A. Yes. We administered a survey to congregate meal participants at each participating site three times throughout the life of the project. This 30-question survey gauged participant perceptions of their congregate program and captured how the congregate program affected their general well-being, psychological well-being, food security, and social connection opportunities. Eighty two percent of clients across the pilots said that the pilots increased their social connection opportunities, 75% of the clients reported that the TCMI pilot helped them access healthy meals, 74% of clients said the TCMI pilot often makes them feel better generally, and 53% said the TCMI pilot often makes them feel less sad and anxious.

## Advice for Replication

**To replicate the successes of TCMI**, we suggest conducting some form of gap analysis or needs assessment to identify the specific implementation elements to be targeted by the project. The comprehensive multi-method needs assessment we conducted allowed us to fully understand and identify the barriers and facilitators of the Texas congregate meal programs.

**To replicate the successful TCMI program models**, it would be very important to pay attention to the positive evaluation outcomes and duplicate the core components and implementation practices by fully understanding what works best under which conditions and for which target population. And this understanding is made possible through a rigorous evaluation design.

Any project developer needs to **collaborate with project adopters and/or expert consultants** to ensure that the developer's selected project is implemented with integrity and fidelity to the project model and its proven outcomes and sustainability possibilities.

Garnering buy-in from local stakeholders and **developing meaningful local community partnerships** are very important for any project that wants to use community specific pilots to cater to local clientele. Partnering with subject matter experts to provide information and support for specific technical assistance is also valuable.

In a statewide project such as TCMI, it is very important to **be flexible to address mid-course challenges** and allow the organic development of innovations from within the communities themselves rather than imposing an innovation model from above. There is no single innovation that would work in every congregate setting, but by collaborating with a wide range of 16 sites, we could identify and compare successes and challenges for diverse settings and populations.



## Appendix List

- A. **TCMI Learning Collaborative Application.** This is the application completed by potential learning collaborative participants.
- B. **TCMI Logic Model Template.** This template was used to provide an example for sites to identify project inputs, outputs, and outcomes.
- C. **TCMI Innovative Pilot RFP.** This request for proposal was used to allow sites to document the aspects of their innovative pilot in a mock RFP scenario.
- D. **TCMI Dashboard Examples.** These images are screenshots from the interactive dashboard available on the TCMI website (<https://ppri.tamu.edu/tcmi>).
- E. **TCMI Program Manager Survey.** This was the survey used to gauge innovations and impact from the nutrition providers.
- F. **TCMI Client Survey.** This survey was provided to older adults participating in the learning collaborative pilots.