



Administration on Aging: Home-delivered Nutrition Services

A. Funding Table

(Dollars in Millions)

Program/	Total Appropriated	FY 2009 Actual	FY 2010 Estimated
Project/Activity		Obligations	Obligations
Home-Delivered	\$32.0	\$32.0	\$0.0
Nutrition Services			
Total	\$32.0	\$32.0	\$0.0

B. Objectives

The American Recovery and Reinvestment Act (Recovery Act) provides \$32 million for Home-Delivered Nutrition Services. Established in 1978 under the Older Americans Act (OAA), the program provides meals and related nutrition services to seniors who are homebound.

In line with the HHS Strategic Objective "Promote the Economic Independence and Social Well-being of Individuals and Families Across the Lifespan," Home-Delivered Nutrition Services help seniors to maintain their health and avoid hospitalization and nursing home placement. Ninety-three percent of home-delivered meal recipients who responded to AoA's national survey of elderly clients reported that the meals enabled them to continue living independently in their own homes.

Home-delivered meal programs are faced with the dual challenge of rising food and other costs in addition to an increased demand for services because of the growing elderly population. The economic downturn has forced many local senior programs to close meal sites or scale back meal services. Funding provided under the Recovery Act helps local senior programs to offset these cutbacks and contribute to the provision of 5 more than million meals to an estimated 250,000 homebound older adults and their caregivers.

C. Activities

Funds augment existing resources, replace revenue lost from local sources due to the economic downturn, and support the continued delivery of meals to vulnerable older Americans. In addition to meals, services include nutrition screening and education and nutrition assessment and counseling as appropriate. Home-delivered meals also represent an essential service for many caregivers by helping them to maintain their own health and well-being.





D. Characteristics

AoA distributed \$32 million in Home-Delivered Nutrition Services funding under the Recovery Act to 56 States and Territories in accordance with the statutory formula established under the OAA. The formula grant allocation is based on each State's share of the population age 60 and older. As with funds provided under regular OAA appropriations, States distribute funds to Area Agencies on Aging or local providers, which coordinate the provision of meals to elderly individuals. No Recovery Act funding will be used to pay for AoA administrative costs associated with this program.

A person must be 60 years of age or older to be eligible to participate in the Home-Delivered Nutrition Services program under the OAA. While there is no means test for participation, services are targeted to those in greatest economic and social need, with special attention given to low-income minorities and people living in rural areas. Almost 43 percent of recipients of home-delivered meal participants live at or below the poverty level compared to 10 percent of the overall population 60 and older.

E. Delivery Schedule

On March 19, 2009, AoA distributed \$32 million in Home-Delivered Nutrition Services funding under the Recovery Act to 56 States and Territories in accordance with the statutory formula established under the OAA. On March 18, 2009, AoA posted to its website Frequently-Asked Questions about the implementation of the Recovery Act, and the agency participated in conference calls with State officials on March 30, 2009 and April 23, 2009 to answer questions. Each State is responsible for developing its own schedule for expeditiously allocating funds to Area Agencies on Aging or local providers.

As of March 31, 2010, \$20.2 million (63% of the \$32 million distributed) has been expended, with a target of having all funds expended for this program by the end of FY2010.

AoA continues to comply with the requirements under the Recovery Act legislation and OMB Guidance concerning monitoring and reporting.

F. Environmental Review Compliance

This program has undergone NEPA review and a Categorical Exclusions (CE) has determined to be the appropriate level of NEPA review.

G. Measures

Table 1: Data-Gathering Schedule

Measure	Туре	FY 2009 Target	FY 2010 Target	FY 2010 +/- FY 2009
Number of home-delivered meals served.	Output	Quarterly	Quarterly	Quarterly



Department of Health and Human Services American Recovery and Reinvestment Act



Children and Community Services

Measure	Type	FY 2009	FY 2010	FY 2010 +/-
		Target	Target	FY 2009
Unduplicated count of people provided home-delivered meals.	Output	Quarterly	Quarterly	Quarterly
Increase the number of older persons with severe disabilities who receive home-delivered meals.	Outcome	Annually	Annually	Annually

Table 2: Data Source and Validation

Measure	Data Source	Data Validation
Number of home- delivered meals served. (Output)	State Program Report data is annually submitted by states.	The web-based submissions include multiple data checks for consistency. Multi-year comparison reports are reviewed by AoA and state staff. AoA staff follow-up with states to assure validity and accuracy. After revisions, states certify the accuracy of their data.
Unduplicated count of people provided home-delivered meals. (Output)	State Program Report data is annually submitted by states.	The web-based submissions include multiple data checks for consistency. Multi-year comparison reports are reviewed by AoA and state staff. AoA staff follow-up with states to assure validity and accuracy. After revisions, states certify the accuracy of their data.
Increase the number of older persons with severe disabilities who receive homedelivered meals. (Outcome)	State Program Report data is annually submitted by states.	The web-based submissions include multiple data checks for consistency. Multi-year comparison reports are reviewed by AoA and state staff. AoA staff follow-up with states to assure validity and accuracy. After revisions, states certify the accuracy of their data.

To minimize the reporting burden on States and territories, AoA tracks performance under the Recovery Act using three existing measures. These include the outcome measure "increase the number of older persons with severe disabilities who receive home-delivered meals" and the output measures "number of home-delivered meals served" and "the unduplicated count of people provided home-delivered meals."

Outcome Measure

The outcome measure "increase the number of older persons with severe disabilities who receive home-delivered meals" captures the effectiveness of AoA efforts to target services to vulnerable elderly individuals. This measure is in line with the intent of the OAA, which specifically requires AoA and the aging services network to target services to the most vulnerable elders, and the mission of AoA, which is to help vulnerable elders maintain their independence in the community.

The most recent year for which this outcome data is available is FY 2007. In that year AoA's home delivered meal programs served 359,143 seniors with severe disabilities, 8,575 more than the target. AoA increased the target marginally in FY 2008 to 364,590 to take into account the rising costs faced by home delivered meals





programs. AoA will increase the FY 2009 target to 378,613 because of the additional Recovery Act appropriations and an increase in AoA's FY 2009 budget for the homedelivered meal program. AoA will work to develop targets based strictly on the Recovery Act funding. AoA will report this data annually and will make the results public via press releases and at http://www.aoa.gov.

Output Measures

This outcome measure is supported by corresponding OAA output measures 1) "the number of congregate meals provided" and 2) "the unduplicated count of people provided congregate meals." AoA will report this data quarterly for Recovery Act funds and will make the results public via press release and at http://www.recovery.gov and http://www.aoa.gov. To date, more than 230,000 persons aged 60 and over have been served 5.8 million home-delivered meals with Recovery Act funding. The following is a summary of the program's target goals and output measures as of March 31, 2010:

Outcome / Achievement	Туре	12/31/ 09	3/31/ 10	6/30/ 10	9/30/ 10	12/31/ 10	3/31/ 11	Program End
People Served	TARGET	15,762	23,643	27,583	30,538	31,031	31,524	31,524
	ACTUAL	143,974	230,284					
Meals Served	TARGET	2,536,074	3,804,111	4,438,129	4,913,643	4,992,895	5,072,147	5,072,147
	ACTUAL	3,881,698	5,829,708					

H. Monitoring and Evaluation

All Recovery Act programs are assessed for risk and to ensure the appropriate internal controls are in place throughout the entire funding cycle. These assessments are conducted by operating components to comply with the statutory requirements of the Federal Managers' Financial Integrity Act and the Improper Payments Information Act, as well as OMB's Circular A-123 "Managements' Responsibility for Internal Control" (including Appendices A, B, and C).

AoA's risk management process fits within the overall governance structure established at HHS to address Recovery Act program risks. The HHS Risk Management and Financial Oversight Board provides executive leadership and establishes accountability for the risk assessment process related to internal controls over financial reporting, and the HHS Senior Assessment Team ensures that risk assessment objectives are clearly communicated throughout the Department. AoA's Senior Assessment Team carries out comprehensive annual assessments of its Recovery Act programs to identify risks and develop strategies to address them, including those associated with selecting recipients, awarding and overseeing funds, and achieving program goals. It meets quarterly to monitor and assess the effectiveness of mitigation strategies and identify emerging risks.



Department of Health and Human Services American Recovery and Reinvestment Act

Children and Community Services

In addition, AoA has presented its high level risks to the Recovery Act Implementation Team. Chaired by the Deputy Secretary and comprised of senior policy officials from throughout the Department, the Implementation Team convenes monthly to monitor progress in carrying out Recovery Act programs and address the obstacles and risks that could impact on their success.

Home-Delivered Nutrition Services is a long-established program with a proven track record of delivering results. Internal control assessments conducted under the Federal Managers Financial Integrity Act have consistently found AoA mandatory grants programs (including Home-Delivered Nutrition Services) to be low risk and to have a sound internal control structure. Financial statement and other programmatic audits have not identified any significant deficiencies in OAA nutrition programs and there are no uncorrected weaknesses or deficiencies associated with these activities. Primary recipients are State governments that have their own established control structures and State audits of these programs under Office of Management and Budget Circular A-133 have not generated significant systemic findings. In addition, risk assessments conducted specifically for the Recovery Act found that these activities are generally low risk and that appropriate mitigation strategies have been put in place.

Home-Delivered Nutrition Services also has an established system for collecting and validating financial data and program data on both outputs and outcomes. Existing AoA performance outcome measures as well as the ongoing measurement of program outputs are applicable to Recovery Act funding activities as described above. These data collection systems and controls have been assessed by external entities, including the Office of Management and Budget, which found that the program had both credible and effective performance data and strong financial management systems in place.

In addition to routine performance measurement activities, AoA conducts in-depth program evaluations on a 10-year basis. The Recovery Act has coincided with the evaluation cycle for Home-Delivered Nutrition Services. An evaluation design contract has been completed and a contract to conduct the evaluation is under development. AoA's comprehensive evaluation framework assesses all levels of the Aging Network (State and Local) as well as program participant outcomes and impacts. The current design for this evaluation includes three interconnected studies: cost, process and client outcome. The cost study will examine the use of multiple funding streams for home delivered meals and will be amended to include the Recovery Act. AoA's data collection systems, including evaluation, provide a robust assessment of program efficiency and effectiveness. The results of the evaluation will be posted on the AoA website in FY 2012.

To ensure that recipients understand and can meet the objectives, outcomes and accountability expectations associated with the provision of Recovery Act funds to OAA nutrition programs, AoA provides additional technical assistance to States, along with enhanced monitoring and reporting as required under the Act. On March 18, 2009, AoA posted to its website Frequently-Asked Questions about the





implementation of the Recovery Act, and the agency participated in conference calls with State officials on March 30, 2009 and April 23, 2009 to answer questions. AoA also utilizes existing technical assistance mechanisms, such as State Planning Grant Projects, the Area Agency Capacity Assessment Grant Project, and the State Unit Regional Program Analysis Forum Project. These projects provide ongoing support of communication and technical assistance needs of AoA and its OAA grantees, and enhances assurance of full program compliance for Recovery Act funding. AoA will not use Recovery Act funds to provide technical assistance under these existing mechanisms.

I. Transparency

AoA is open and transparent in all grant activities that involve spending of Recovery Act funding consistent with statutory and OMB guidance. AoA ensures that recipient reports required by Section 1512 of the Recovery Act are submitted and reviewed for material omissions and significant errors that would mislead or confuse the public. AoA informs recipients of their reporting obligations through standard terms and conditions, grant announcements, contract solicitations, and other program guidance. In addition, AoA provides key award information to recipients and other technical assistance to grantees and fully utilizes Project Officers to ensure compliance with reporting requirements

AoA collects OAA performance outcome data via the web-based State Program Report. AoA Headquarters and Regional Office staff check the data for consistency and follow-up with the states to assure validity and accuracy. State performance data is available via the Aging Integrated Database (AGID), AoA's online data query system, at www.data.aoa.gov.

AoA's data community website also helps to ensure that recipients meet Recovery Act reporting requirements. The website includes resources and documentation related to the Recovery Act and a listserv with 120 performance specialists who will be responsible for collecting and reporting Recovery Act data for their states. AoA will use this website to offer technical assistance, promote information sharing, and provide reminders regarding data requirements. AoA utilizes the technical assistance methods described above to ensure that recipients understand and comply with the statutory, OMB, and HHS reporting requirements.

J. Accountability

To ensure that managers are held to high standards of accountability in achieving program goals under the Recovery Act, AoA has built upon and strengthened existing processes. Senior AoA officials meet regularly with senior Department officials to ensure that projects are meeting their program goals, assessing and mitigating risks, ensuring transparency, and incorporating corrective actions. The personnel performance appraisal system also incorporates Recovery Act program stewardship responsibilities for program and business function managers.

AoA performance plans for both Senior Executives and managers align individual and organizational performance with results-oriented goals that are linked to the





HHS and AoA Strategic Plans. These goals, which include objectives related to effective program management and proper stewardship of Federal funds, are cascaded to subordinate supervisors and staff throughout each executive's portion of the organization.

K. Barriers to Effective Implementation

Because Recovery Act funds are being used to augment existing programs that already have service delivery structures in place, there are some barriers to effective implementation of these programs. States have needed to change from an annual reporting system to a quarterly reporting system for some key elements. Reporting data within 10 days of the end of each fiscal quarter will be difficult for States that have multiple sub-grantees' reports to compile. Sub-grantees, many of which have multiple contracts for delivery of meals, will face challenges in obtaining information within the expected timeframes. To ensure that recipients understand and can meet the objectives, outcomes and accountability expectations associated with the provision of Recovery Act funds to OAA nutrition programs, AoA provides additional technical assistance to States, along with enhanced monitoring and reporting as required under the Act.

L. Federal Infrastructure

Not applicable.

Summary of significant changes:

No major revisions have been made. Expenditures are at or above projected levels for this period of time and are on track to be fully expended by the end of the fiscal year. Outcomes, in terms of meals provided and persons served, are well above targets -- with three-fifths of the funds expended, both the number of persons and meals served already exceed what the projections had been for all of the funding.