



Cheverly Village Nutrition Program

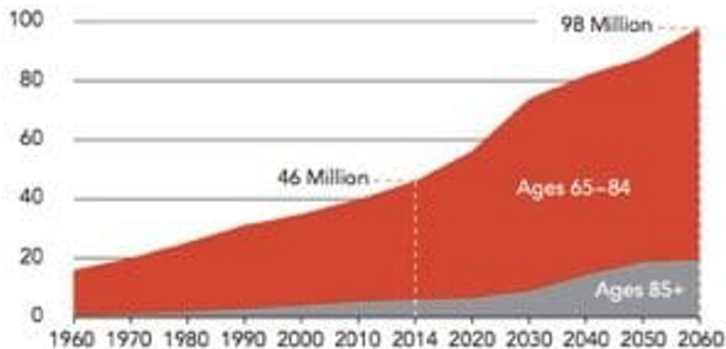
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Introduction

The Number of Americans Ages 65 and Older Will More Than Double by 2060.

U.S. Population Ages 65 and Older, 1960 to 2060 (Millions)



Source: PRB analysis of data from the U.S. Census Bureau.

- 65+ population will double by 2060.
- Seniors require increase support in:
 - Health services
 - Advocacy
 - Long-term Care
 - Nutrition Services

How will we meet the demand?

Introduction

According to the 2010 census, PG County has 83,523 seniors.

Aging and Disabilities Services Division

- Assisted Living Subsidies
- Personal Assistant Program
- Senior Nutrition Program
- Senior Employment Program



Introduction

The Village Movement: Aging in Place.

Allows seniors to remain in their homes.

Community-based non-profit organizations.



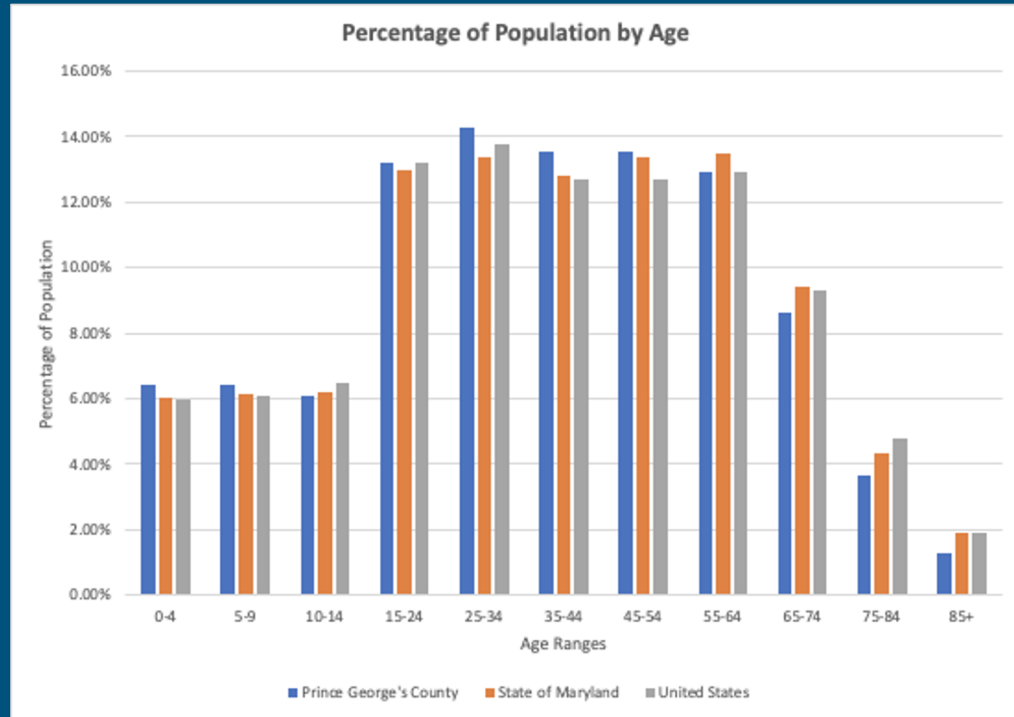
Provide collective support.



Socialization Opportunities.
Practical Services.

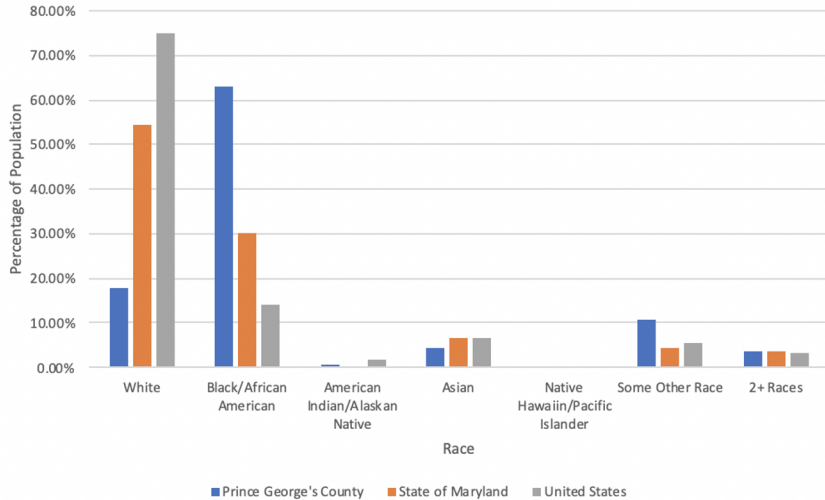


Community Assessment

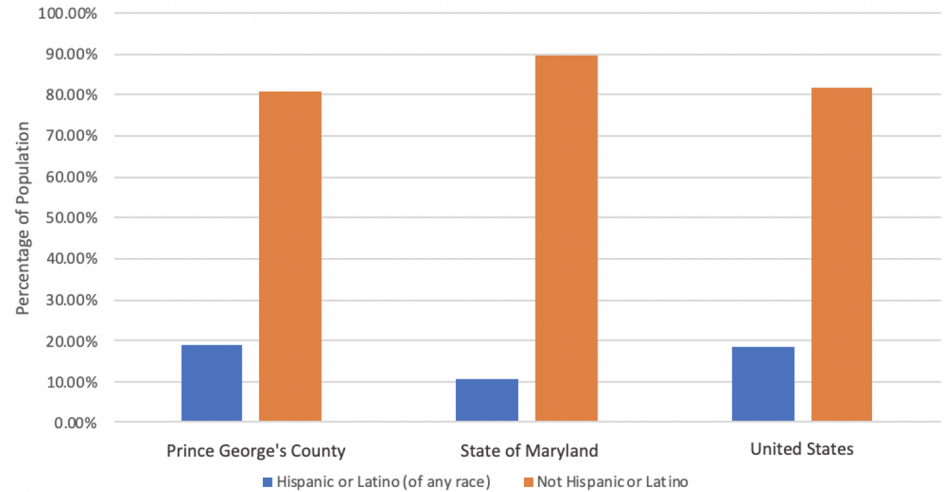


Community Assessment

Percentage of Population by Race

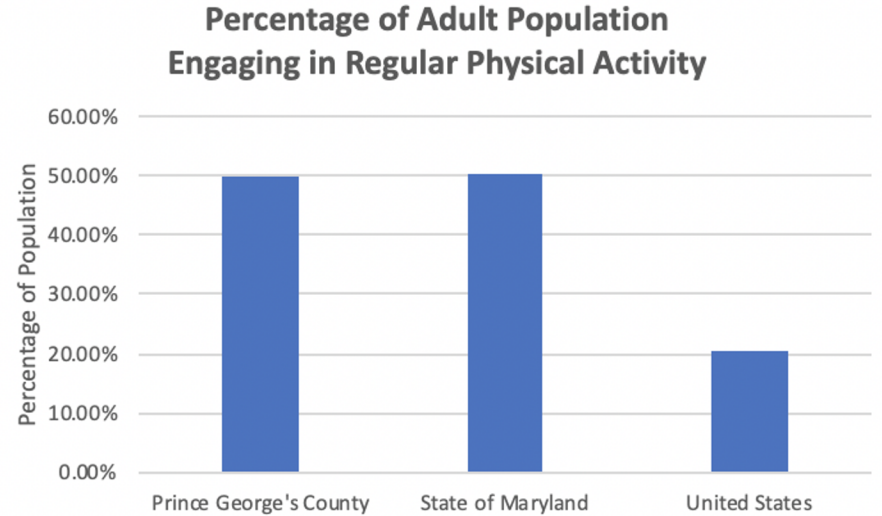
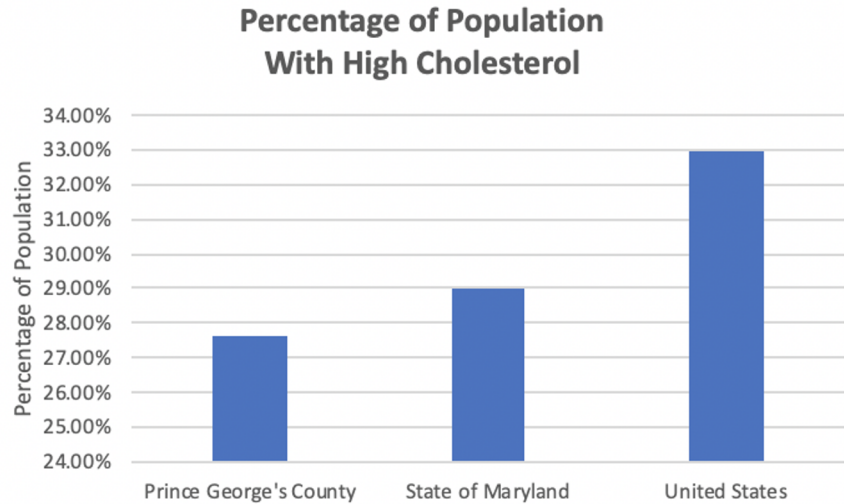


Percentage of Population by Ethnicity



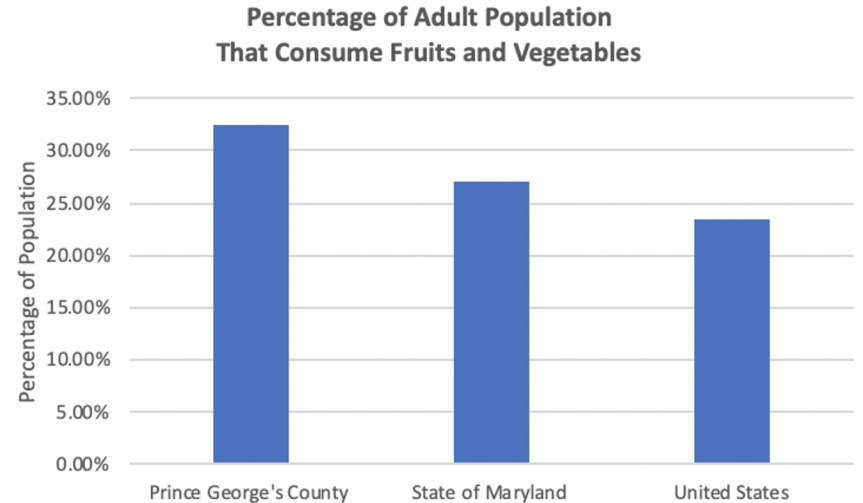
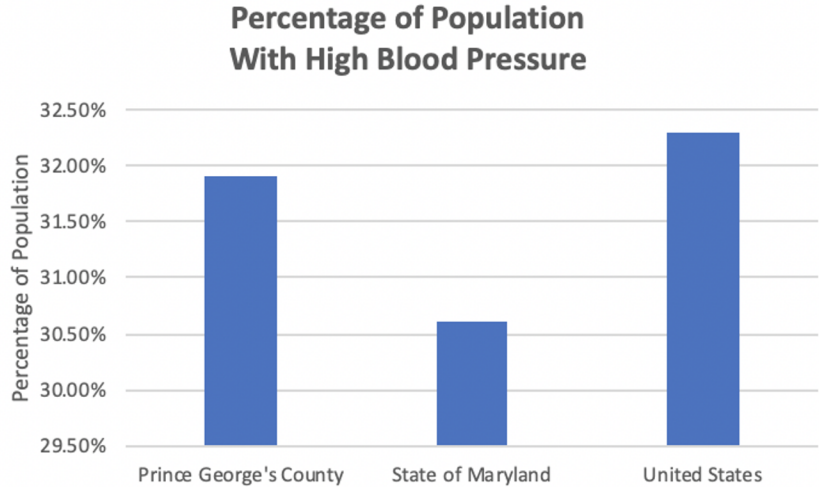
Data: PGC Healthzone and Census.gov

Community Assessment



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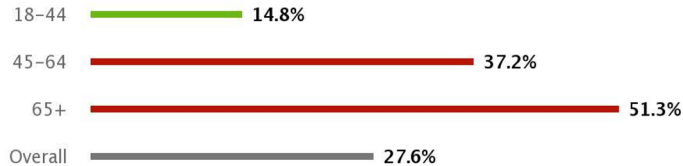
Data: PGC Healthzone and Census.gov

Target Group Assessment

- 51.3% of PG county's elderly population has high cholesterol
- 28.7% of adults 65+ in PG county have diabetes

High Cholesterol Prevalence by Age
County: Prince George's

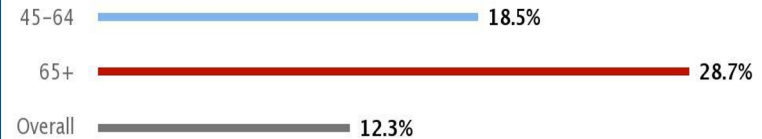
www.pghealthzone.org



Source: Maryland Behavioral Risk Factor Surveillance System (2017)

Adults with Diabetes by Age
County: Prince George's

www.pghealthzone.org



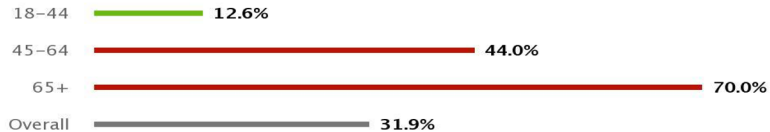
Source: Maryland Behavioral Risk Factor Surveillance System (2017)

Target Group Assessment

- 70% of people in PG county aged 65+ have Hypertension
- Only 26.4% of elderly people in PG county consume fruits and vegetables

High Blood Pressure Prevalence by Age
County: Prince George's

www.pghealthzone.org



Source: Maryland Behavioral Risk Factor Surveillance System (2017)

Adult Fruit and Vegetable Consumption by Age
County: Prince George's

www.pghealthzone.org

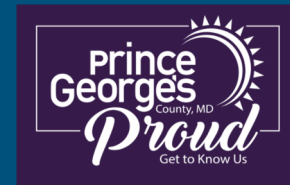


Source: Maryland Behavioral Risk Factor Surveillance System (2010)

Target Group Assessment

Resources Available

- PG County State Office on Aging and Disabilities Services
 - Nutrition Program: Home delivered meals and Congregate meals
 - Health Promotion Program: Health screening, health education, medication management, etc.
- PG County Department of Parks and Recreation
 - Senior Days
 - Club 300
- Cheverly Village Movement
 - Nature Walks



Target Group Assessment

Gaps in Resources

- Travel
 - Not in the community of Cheverly
- Financial
 - Income based programs excludes many seniors
- Technology
 - Access and ability to find resources

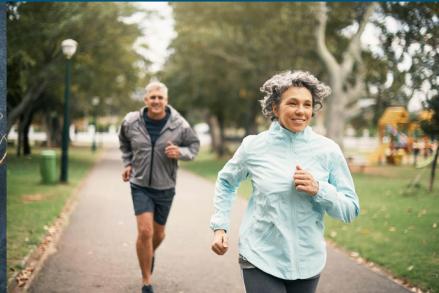


Intervention: Cheverly Village Nutrition Program

- Target population: Cheverly village movement- older adults aged 65 and up
- Time frame: One year (May 2020 to May 2021)
- Action: Reduce high blood pressure in older adults
- Indication of Success: Decreased high blood pressure

Intervention Design: Plan of Action

The goal of the Cheverly Village Nutrition Program is (1) to reduce high blood pressure, (2) improve fruit and vegetable intake, and (3) increase physical activity in adults ages 65 and up in the Cheverly Village movement.



Fruit and Vegetable Intake Objectives

Why (needs):

- Low fruit and vegetable consumption
- Travel limitations
- Financial restrictions

Outcome:

Fruit and vegetable intake will increase by 2 servings per day by May 2021.

Indicator: Survey before and after

Process:

-Provide one produce bag weekly
- Include 3 fruits and 3 vegetables in each produce bag

Indicator: Inventory of bags and deliveries

Structure:

Provide one F & V chopper

Indicator: Survey (received or not; useful or not)

Blood Pressure Objectives

Why (needs):

- Large percentage with High Blood Pressure
- Technology
- Interaction

Outcome:

Decrease the mean blood pressure by 2% by May 2021

Indicator: Recording a chart of participants of BP measurements

Process:

- Meal prep tutorials
- Blood pressure measurement

Indicator: Sign-sheet to indicate tutorials and BP measurement given to participants

Structure

Hire 2 registered dietitians

Indicator: Note number of dietitians hired

Physical Activity Objectives

Why (Needs):

- Travel limitations

Outcome:

Completion of 30 hours (30 minutes per week) of physical activity time by May 2021

Indicator: Time-log of hours completed of work-out sessions

Process:

Work out sessions of 15 minutes, 4 times a week

Indicator: Recording the sessions provided

Structure:

2 physical activity lesson providers

Indicator: Note how many were hired

Intervention Design: Community Leader Reflection

Diane LaVoy -Cofounder of Cheverly Village and interim Executive Director.

- Villages differ greatly in amenities.
- Currently do not have nutrition support

- Increased need for insurance gap funding
- Exercise and autonomy.
- Weekly produce encouraging and interactive

Conclusion

- Seniors are a rapidly growing population that will require increased care.
- Villages are an excellent vehicle to provide support while aging in place, allowing seniors to maintain their agency and autonomy .
- Focusing dietary support on issues such as hypertension will be increasingly important in the near future.

