



State of Illinois
Illinois Department on Aging

FY 2022

**HOME
DELIVERED
MEALS
REPORT**

**March 2022
In Accordance with Public Act 93-0484**

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Provisions of Public Act 93-0484

Public Act 93-0484 amended the Illinois Act on the Aging to state: “Every citizen of the State of Illinois who qualifies for home-delivered meals under the federal Older Americans Act shall be provided services, subject to appropriation.” These amendments also require the Illinois Department on Aging to file a home delivered meal report with the General Assembly each year. At a minimum, the report must include the following information:

- Estimates, by county, of citizens denied service due to insufficient funds during the preceding fiscal year and the potential impact on service delivery of any additional funds appropriated for the current fiscal year. (Outlined on Pages 25-28)
- Estimates of additional funds needed to permit the full funding of the program and the statewide provision of services in the next fiscal year, including staffing and equipment needed to prepare and deliver meals. (Outlined on Page 29)
- Geographic areas and special populations unserved and underserved in the preceding fiscal year. (Outlined on Page 45)
- Recommendations for increasing the amount of federal funding captured for the program. (Outlined on Page 90)
- Recommendations from the Aging Network on Potential Ways to Reach Unserved/Underserved Areas and Special Populations. (Outlined on Page 96)
- Any other information needed to assist the General Assembly and the Illinois Council on Aging in developing a plan to address unserved and underserved areas of the State (Outlined throughout the *FY 2022 Home Delivered Meal Report*).

The Aging Network in Illinois

The Illinois Department on Aging

The Illinois Department on Aging was created by the State Legislature in 1973 for the purpose of improving the quality of life for Illinois' senior citizens by coordinating programs and services enabling older adults to preserve their independence for as long as possible. It is the single state agency in Illinois authorized to receive and dispense Federal Older Americans Act funds, as well as specific state funds, through Area Agencies on Aging and community-based service providers.

The legislative mandate of the Illinois Department on Aging is to provide a comprehensive and coordinated service system for the State's approximately 2,800,000 older adults, giving high priority to those in greatest need; to conduct studies and research into the needs and problems of the elderly; and to ensure participation by older adults in the planning and operation of all phases of the system. The mission of the Illinois Department on Aging is to serve and advocate for older Illinoisans and their caregivers by administering quality and culturally appropriate programs that promote partnerships and encourage independence, dignity, and quality of life. In fulfilling its mission, the Illinois Department on Aging responds to the dynamic needs of society's aging population through a variety of activities including:

- Planning, implementing, and monitoring integrated service systems;
- Coordinating and assisting the efforts of local community agencies;
- Advocating for the needs of the State's elderly population; and
- Cooperating with federal, state, local, and other agencies of government in developing programs and initiatives.

Area Agencies on Aging

The State of Illinois is divided into 13 Planning and Service Areas (PSAs). There is one Area Agency on Aging designated by the Illinois Department on Aging located within each PSA. In Illinois, 12 not-for-profit agencies and one unit of local government serve as Area Agencies on Aging. Each Area Agency on Aging is responsible for planning, coordinating, and advocating for the development of a comprehensive and coordinated system of services for the elderly and caregivers within the boundaries of the individual PSAs. For additional information on PSAs and Area Agency on Aging locations, refer to pages 23 and 24 of this report.

The Illinois Department on Aging, in accordance with the Older Americans Act, has decentralized the planning process by delegating planning responsibilities to the Area Agencies on Aging. This assures that programs developed by, and services funded by, the Area Agencies on Aging are integrated into the three-year planning cycle followed by the Illinois Department on Aging. This cycle begins with an assessment of the needs of local older adults, family caregivers and grandparents raising grandchildren for services. Through a process of public hearings, surveys, research, and the assistance of the Area Agencies' advisory councils, these needs are ranked in order of importance and matched with available resources.

The proposed funding distribution, budget, and other planning information are then incorporated into an Area Plan on Aging following a format prepared by the Illinois Department on Aging. Also included in the plan is an outline of proposed Area Agency on Aging activities for the coming years. Following public hearings on the proposed Area Plan, the Area Plan is submitted to the Illinois Department on Aging for review and approval. Area Agencies on Aging are permitted to amend their Area Plans annually in response to changing needs, priorities, and funds available. Federal Older Americans Act and State funds are allocated to the Area Agencies on Aging upon approval of the Area Plan or Area Plan annual amendments by the Illinois Department on Aging.

The Area Agencies on Aging in Illinois are not, as a rule, direct service providers. They contract with local providers for services that have been identified as needs through the planning process. The Area Agencies on Aging are responsible for monitoring, evaluating, planning for services, and providing technical assistance as needed. In addition, the Area Agencies on Aging function as advocates for older adults and are the primary disseminators of information relating to aging issues within their respective Planning and Service Areas.

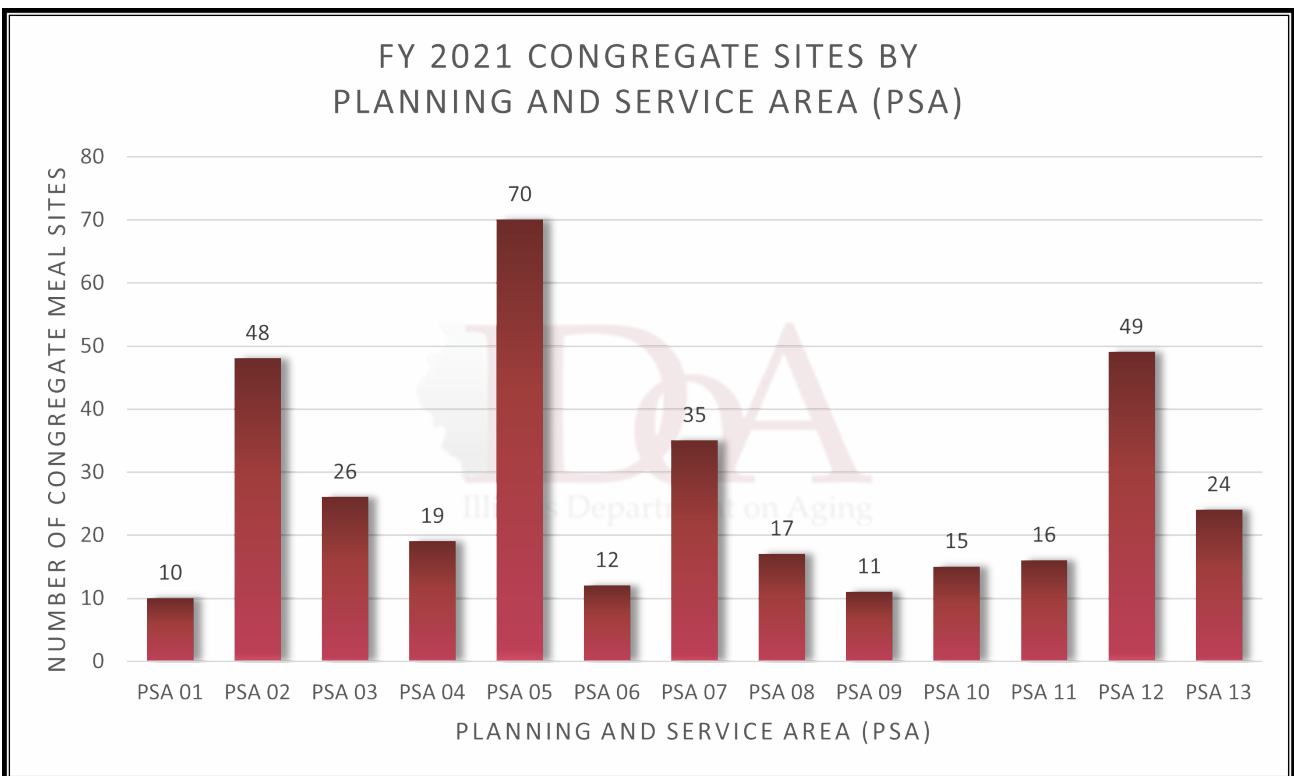
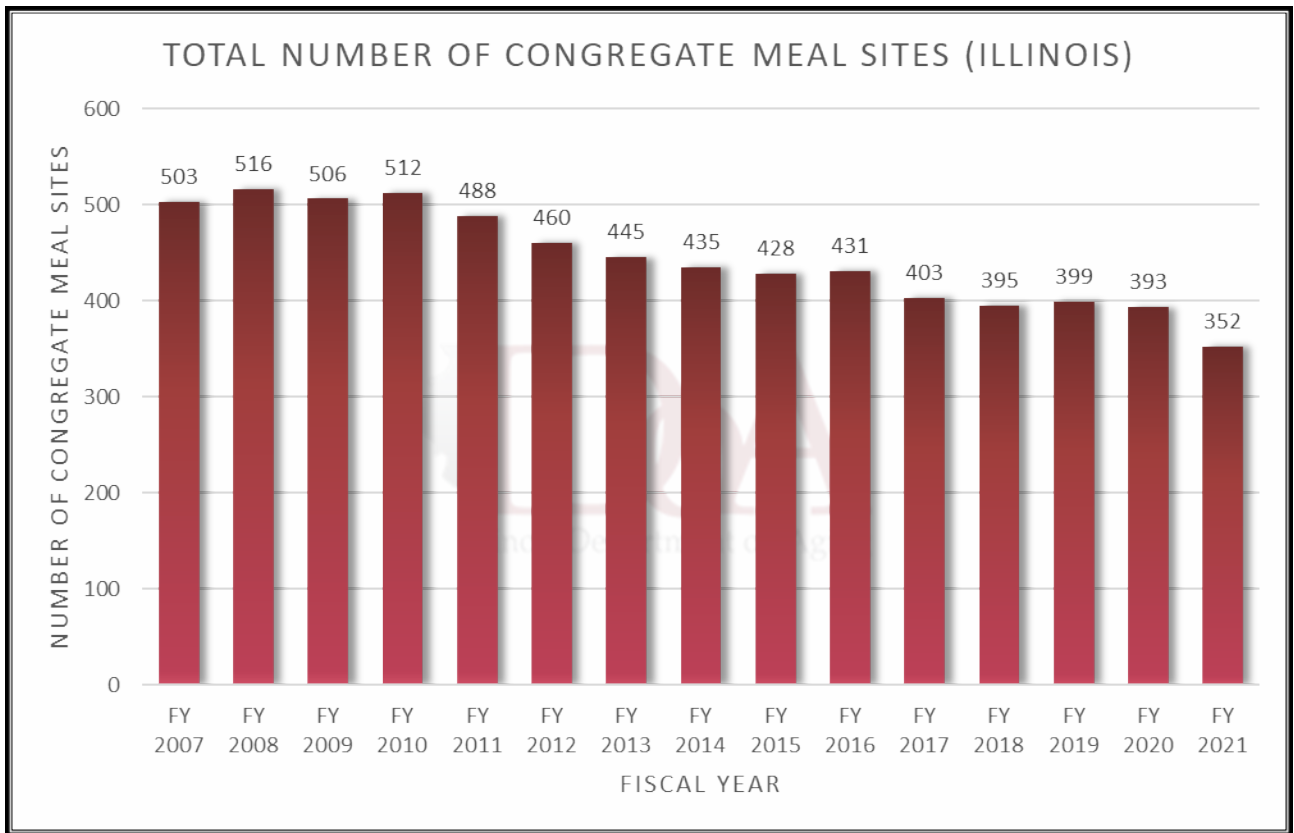
Service Providers

Community-based service providers also represent a key segment of the Aging Network in Illinois because they provide the programs and direct services to older adults and their caregivers.

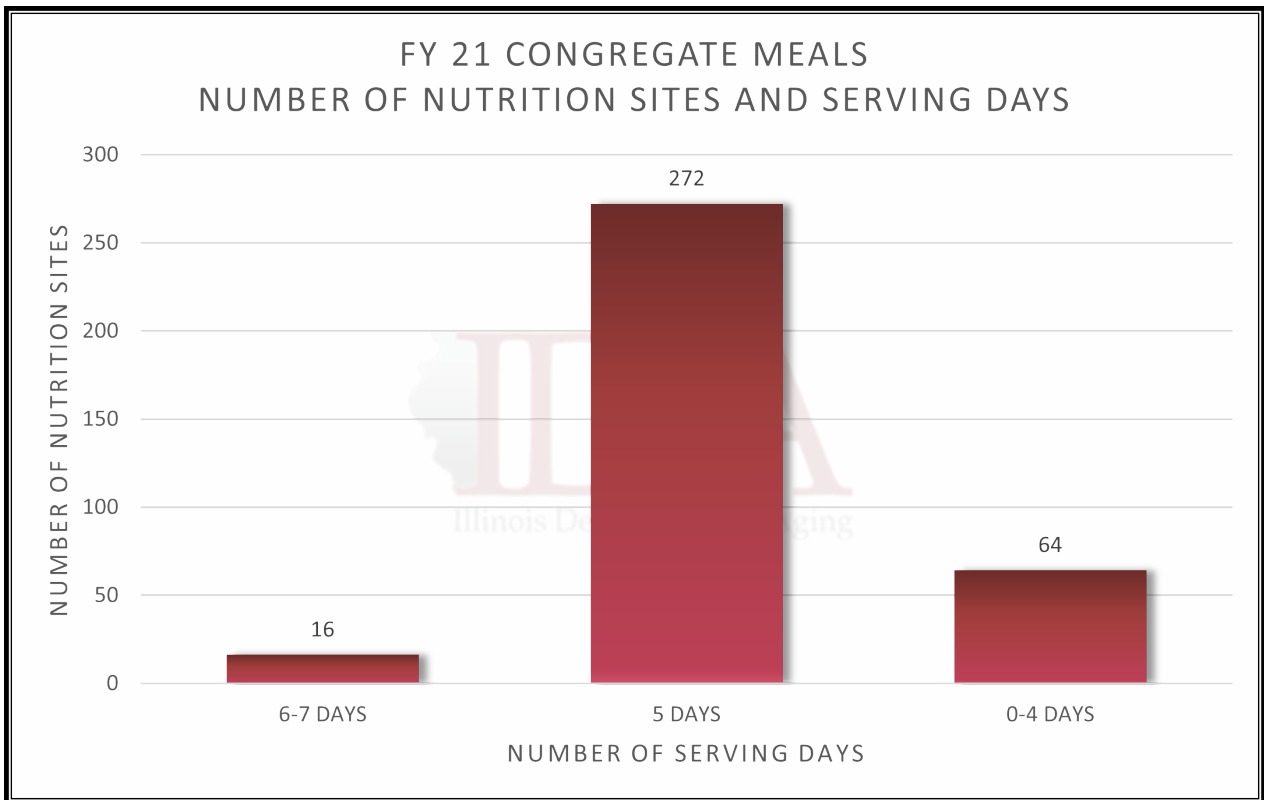
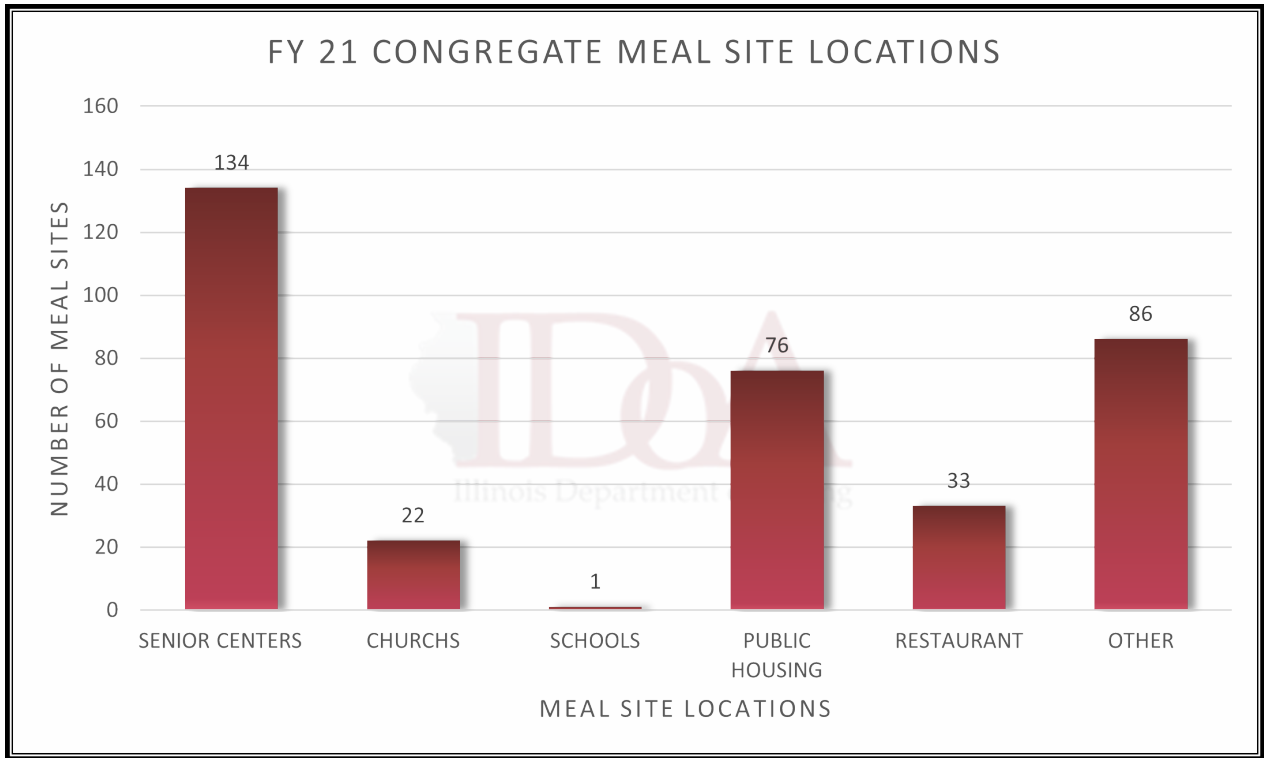
The direct service delivery system consists of agencies funded with Title III and State funds through Area Agencies on Aging and funded through the Illinois Department on Aging with Community Care Program funds. Many agencies receive both Title III and Community Care Program funding. The Community Care Program providers offer case management, in-home service, adult day service, emergency home response, automated medication dispenser, and other demonstration projects. Title III providers offer a wide range of home and community-based services, including home delivered meals.

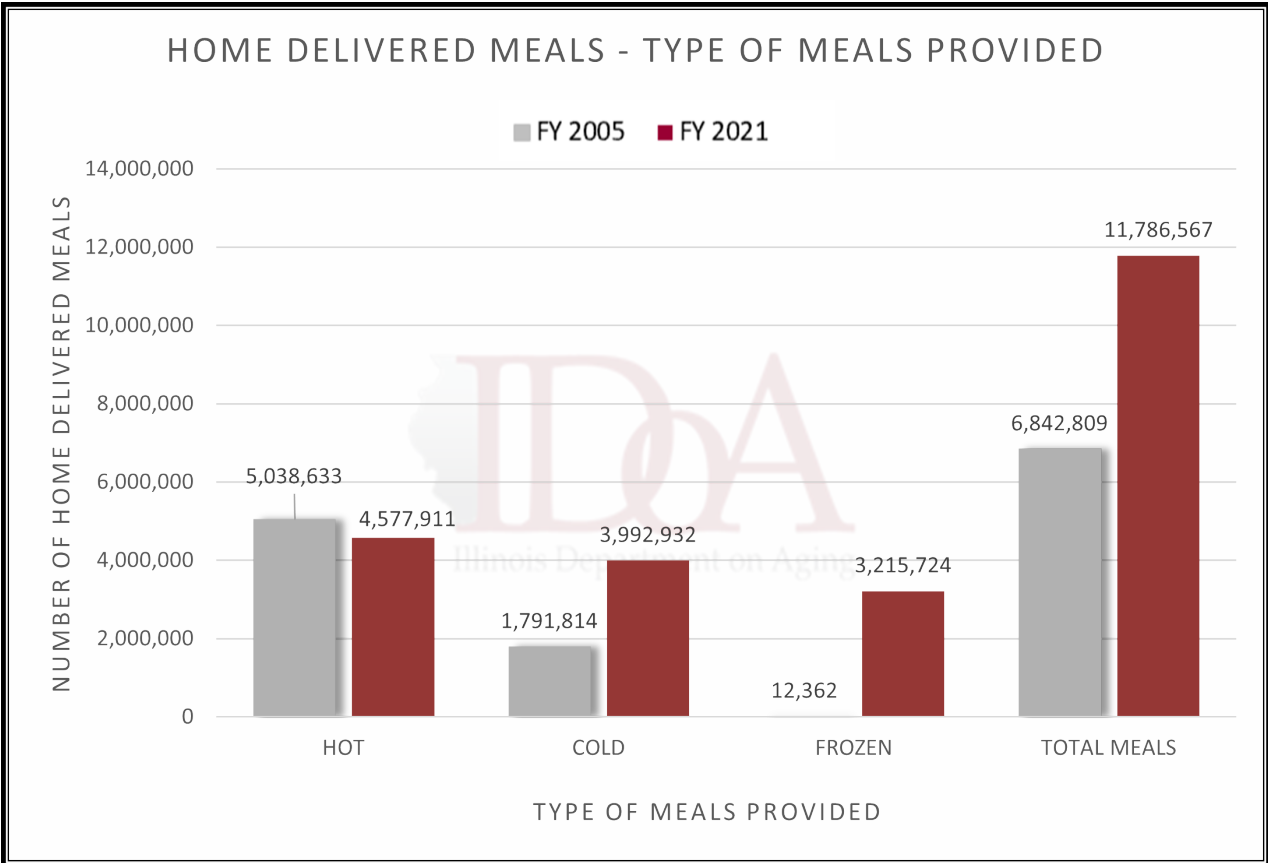
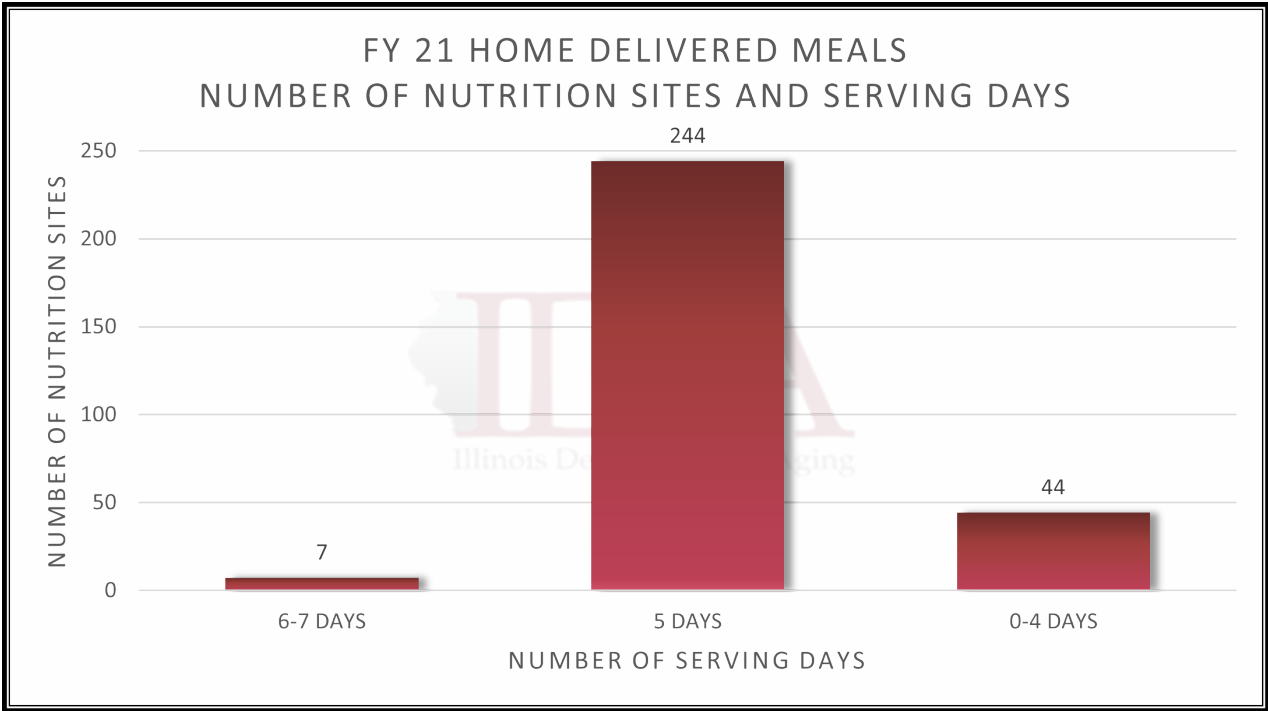
During FY 2022, it is estimated that more than 636,740 older adults, family caregivers and grandparents raising grandchildren will be served by nutrition and social service agencies under Title III of the Older Americans Act. These services include information and assistance, outreach, congregate meals, home delivered meals, transportation, legal assistance, respite care, chore, residential repair, senior center activities and health promotion and disease prevention.

In FY 2022, more than 1,792,200 congregate meals will be served to approximately 61,000 older adults at more than 352 meal sites located throughout the State. Approximately 49,500 homebound elderly will receive an estimated 11.9 million home delivered meals. The following pages outline additional information about nutrition programs in Illinois. These service projections may need to be revised due to when final federal appropriations are finalized.

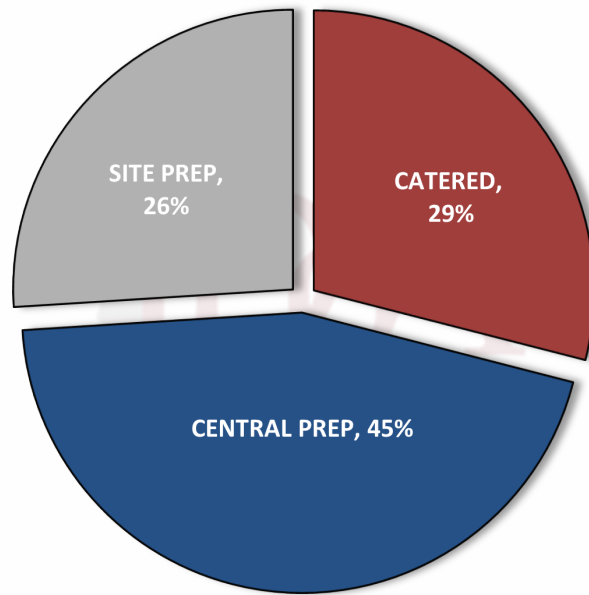


Note: Meal sites remained temporarily suspended until July 1, 2021 due to the COVID-19 pandemic.

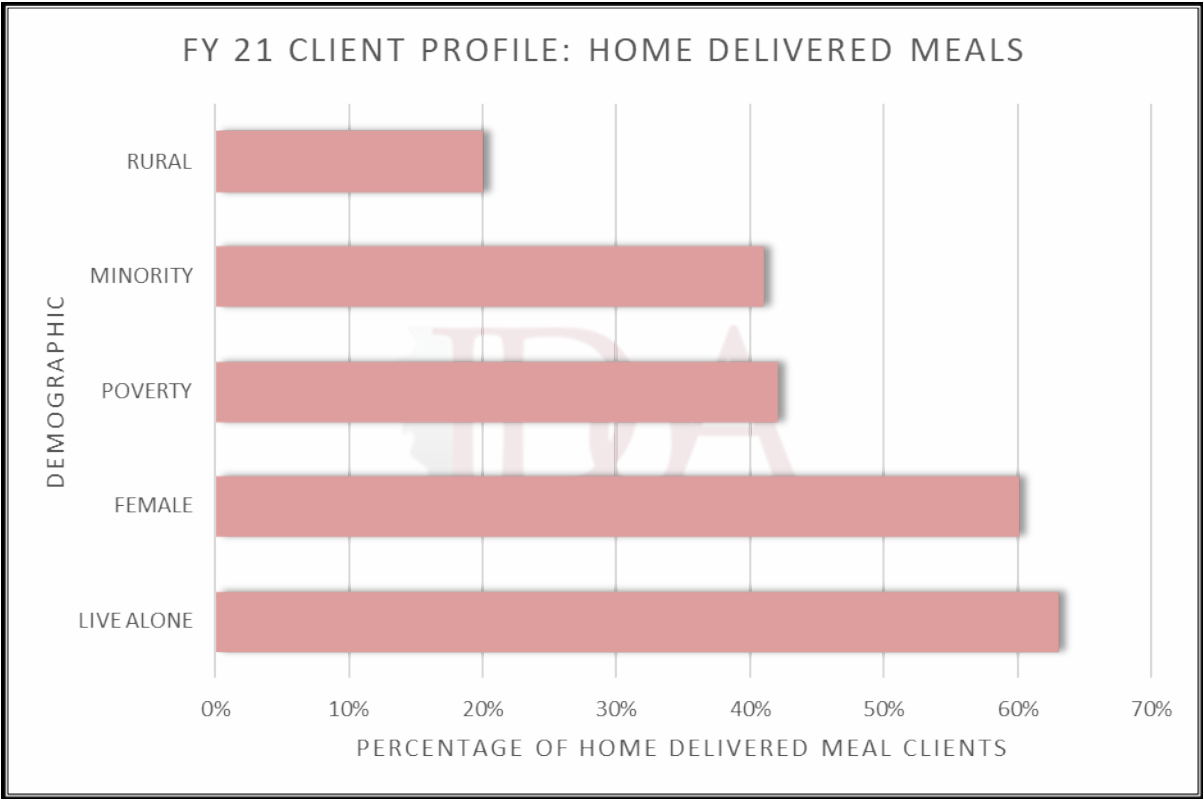
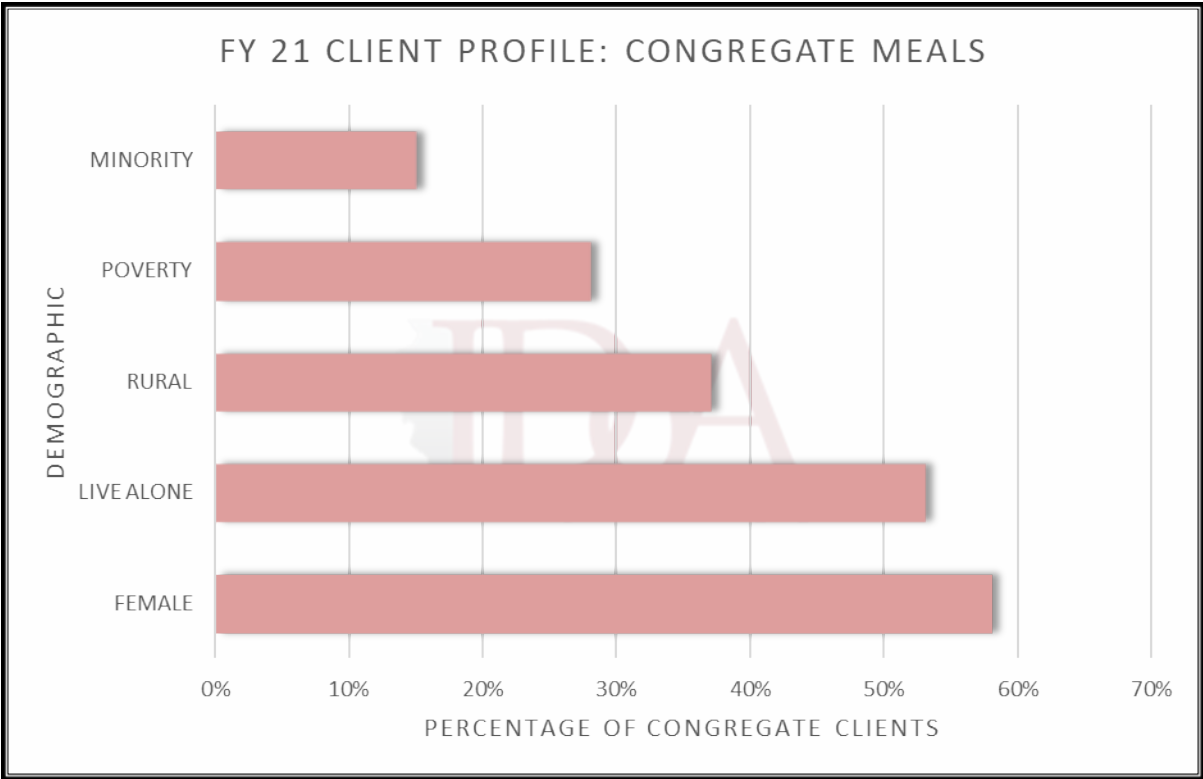




FY 21 CONGREGATE MEAL PREPARATION



Note: Catered includes meals prepared at an offsite facility and are then brought to a Congregate meal site. Site Prep includes meals that are prepared on location where the Congregate meals are served. Central Prep includes meals that are prepared at a central location and then delivered to satellite locations/meal sites.



**Number of Providers That Offer Special Diets to
Congregate Meal Participants
by Planning and Service Area (PSA)**

PSA	Total Providers	General	Consistent Carb	Diabetic	Low Sodium	Pureed (Swallowing)	Soft (Dental)	Vegetarian	Other
01	3	3		2	2		2		
02	6	6		2	2	1	1	1	
03	7	7		1	1				
04	3	3							
05	3	3		2	1				
06	1	1				1	1	1	1
07	4	4			1				
08	11	11	1	8	4				
09	3	3							
10	5	5			2				
11	6	6		2					1
12	6	5			1		1	2	2
13	18	17	2	5	5			3	
Total	76	74	3	22	19	2	5	7	4

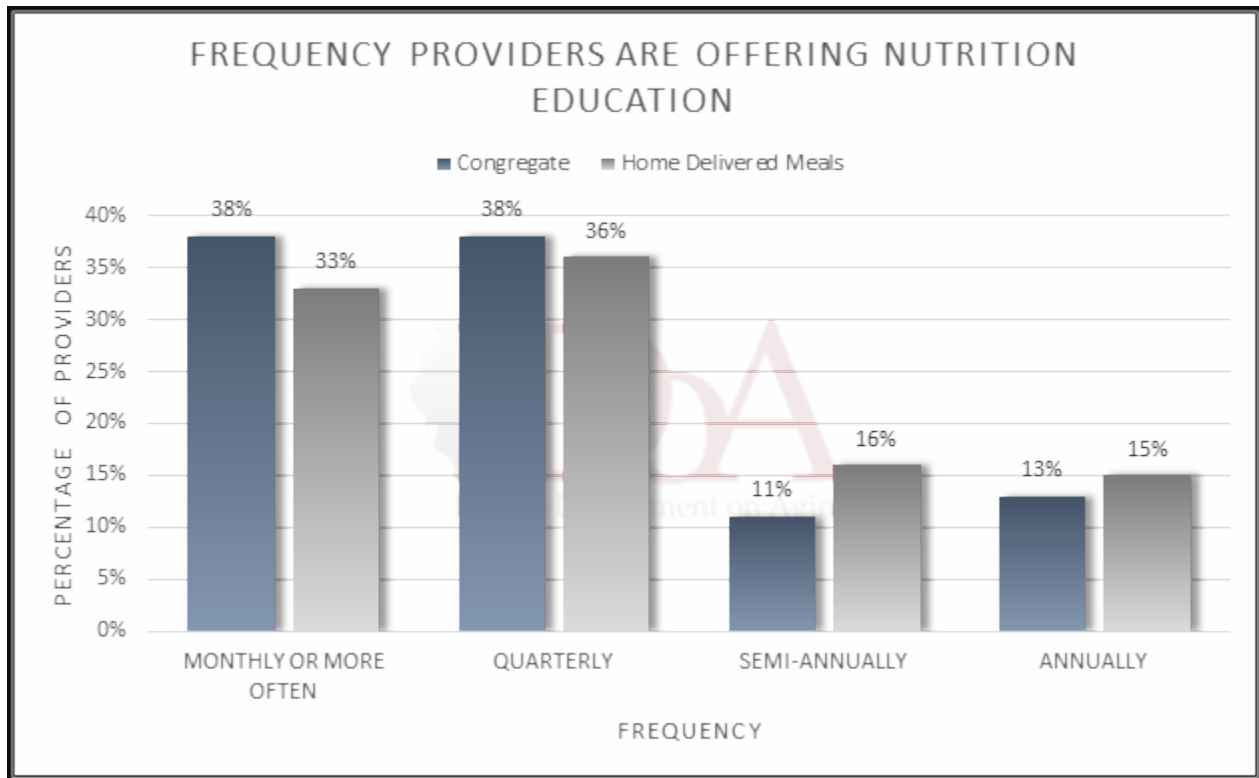
Note: 2019 Nutrition Service Provider Survey conducted by Illinois Department on Aging

**Number of Providers That Offer Special Diets to
Home Delivered Meal Participants
by Planning and Service Area (PSA)**

PSA	Total Providers	General	Consistent Carb	Diabetic	Kosher	Low Sodium	Pureed (Swallowing)	Soft (Dental)	Vegetarian	Other
01	3	3		2		2		2		
02	5	5		4		2	2	2	2	2
03	5	5	1	3		2	3	2	1	
04	3	3								
05	3	3	1	3		1	1	1		
06	1	1					1	1	1	1
07	4	4				1				
08	11	11	1	8		4				
09	3	3								
10	5	5				1				
11	6	6		3						1
12	2	2			1		1	1	1	
13	10	10	2	7		7	8	5	6	4
Total	61	61	5	30	1	20	16	14	11	8

Note: 2019 Nutrition Service Provider Survey conducted by Illinois Department on Aging

Statewide Frequency that Nutrition Education is Provided to Congregate and Home Delivered Meal Participants



Note: 2019 Nutrition Service Provider Survey conducted by Illinois Department on Aging

Background and Analysis

With the aging of the U.S. population, increased attention has been directed to delivering health and related services to older adults in the community. Since adequate nutrition is critical to health, functioning, and the quality of life, the Elderly Nutrition Program is an important component of home and community-based services for older adults.

The Illinois Department on Aging's Elderly Nutrition Program provides grants to 13 Area Agencies on Aging and more than 100 nutrition service providers to support nutrition services to older adults throughout Illinois. The Elderly Nutrition Program, authorized under Title III of the Older Americans Act, is intended to improve the dietary intakes of older adults. Meals provided under the Older Americans Act must provide at least one-third of the daily-recommended Dietary Reference Intakes (DRIs) as established by the Food and Nutrition Board of the Institute of Medicine of the National Academy of Sciences, if the older adult is offered one meal per day.

While there is no means test for participation in the Elderly Nutrition Program, services are targeted to older adults with the greatest economic or social need, with special attention given to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas as required in the Older Americans Act. In addition, the State expanded this definition to include sexual orientation, gender identity, gender expression, and HIV status through Public Act 101-0325.

Many older adults cannot consistently obtain a nutritious diet. Older adults age 85+, minority older adults, older adults in greatest economic need, older adults who live alone, and individuals with chronic health conditions are at the highest risk of being malnourished. Food insecurity is having inadequate access to nutritious foods needed to maintain or live a healthy life. In 2017, 28.7% of the U.S. population that was considered food insecure were below the poverty line, 17.2% black, 16.3% Hispanic, 8.4% older adults aged 65 to 69 years old. In Illinois, 7.8% of seniors were considered food insecure (Ziliak & Gundersen, 2019).

Adequate nutrition is critical for healthy aging, the prevention or delay of chronic disease and disease-related disabilities and delay recovery from illnesses. The Aging Network's Nutrition Programs provide congregate and home delivered meals, link older adults to supportive services, decrease social isolation, and provide nutrition education to help decrease or manage chronic health conditions.

The COVID-19 (coronavirus) pandemic continues to have a significant impact on the congregate and home delivered meal programs in Illinois and nationwide. All congregate meal sites and activities were temporarily suspended on March 12, 2020 in Illinois to help decrease the risk of contracting the coronavirus. Congregate dining sites were encouraged to reopen on July 1, 2021, but due to the COVID-19 coronavirus and its variants, some locations have remained closed for dining.

In many cases, senior centers are also congregate meal sites, so they are not stand-alone centers. Many of the buildings are small and cannot accommodate social distancing, especially while seniors are picking up meals at these sites, so social gatherings cannot safely be held. When the weather permits, some senior centers conduct outdoor activities such as parking lot Bingo, movies, concerts, etc. They also check on clients at risk of social isolation by engaging in the Telephone Reassurance program, utilizing both volunteers and staff.

Virtual activities are also conducted such as: GetSetUp, a social and learning community designed for older adults, with classes available around the clock on every topic. Additionally, some Planning and Service Areas offer virtual exercise classes, concerts, and Memory Cafes, which seek to fill the void created by the temporary closure of the congregate sites.

Agencies shifted to providing “grab-and-go” or pick-up options for their congregate meal participants and/or started providing home delivered meals to participants that were previously attending congregate meal sites for a nutritious meal and socialization. Frequently, nutrition providers have been told by congregate participants that they primarily attend the meal sites for social activities and companionship rather than the meal. These programs are even more important for older adults in combatting social isolation and loneliness due to prolonged social distancing related to COVID-19 (Armitage and Nellums, 2020).

Based on a Meals on Wheels America study funded by AARP, those who received daily-delivered meals experienced the greatest improvements in health and quality of life indicators over the study period compared to the other two groups (individuals who received frozen, weekly-delivered meals and the control group) (Thomas & Dosa, 2015).

The home delivered meal program serves the frail elderly in need of long-term support and those in need of short-term intervention due to illnesses. Based on the results of Administration on Aging national surveys, the typical home delivered meal client is an elderly woman between the age of 75-84 and lives alone. She is functionally impaired and has three or more diagnosed chronic health conditions with an income at or below the poverty level. Eighty-Six percent of home delivered meal clients report that the services allow them to remain in their homes (ACL, 2019).

As outlined on the following page, the congregate meal program provides older adults with a nutritional meal, social interaction as well as volunteer opportunities. However, participation in the congregate meal program has declined over the past 25 years. In FY 1992, the congregate meal program provided meals to more than 97,848 older adults. In FY 2022, the congregate meal program will provide meals to an estimated 61,000 older adults, which is a decline of 38 percent since FY 1992. This substantial decline in the number of congregate participants served in FY 2020, FY 2021, and FY 2022 is largely related to the COVID-19 (coronavirus) pandemic and the temporary suspension of congregate meal sites.

This decline in the number of older adults participating in the congregate meal program is also occurring throughout the nation. It is primarily due to younger older adults not participating in the congregate meal program for various reasons (e.g., lack of interest in group meal programs targeted for the elderly and more nutritional and service options in their communities).

In contrast, participation in the home delivered meal program has varied during the past 25 years. In FY 1992, the home delivered meal program provided meals to more than 33,449 older adults. The highest level of participation was in FY 2000 when over 50,100 individuals were served. This number gradually declined from FY 2000 to FY 2016 to just over 31,000 individuals. Since 2016, the number of individuals in the home delivered meal program has increased. In FY 2022, the home delivered meal program will provide meals to an estimated 49,500 older adults. This number is influenced by the increase in participation due to the COVID-19 pandemic and temporary closure of congregate meal sites.

There are still areas in Illinois that are not served by home delivered meal programs due to a lack of funding and/or resources. Many of the current clients need more than 1 meal per day and weekend meals. The Elderly Nutrition Program cannot address most of these needs without additional funding. Additionally, the need for home delivered meals will continue to grow as the number of older adults increases, particularly the group aged 85 and over, which is the fastest growing segment of the older population. Nationwide, this age group is projected to increase from 5.9 million to 18 million from 2012 to 2050, which will represent 4.5% of the population (Ortman, et al., 2014).

In 2000, the 85+ population in Illinois was 192,031 and in 2010, the number rose to 234,912 (U.S. Census Bureau, 2010). It is projected to be 351,941 by 2030, which is an increase of 83.3% from 2000 (U.S. Census Bureau, 2005). The following information outlines the growth of the age 85+ population in Illinois since 1970:

Age 85 + Population in Illinois

1970 Census	1980 Census	1990 Census	2000 Census	2010 Census	2019 Pop. Estimates	% Increase Between 1970 & 2019	% Increase Between 2000 & 2019
81,181	110,945	147,549	192,031	234,912	266,969	+229%	+39%

Elderly Nutrition Program Services During the Past 25 Years Persons Served and Meals Provided in Illinois

Fiscal Year	Home Delivered Meals		Congregate Meals		Total Program	
	Persons Served	Meals Provided	Persons Served	Meals Provided	Persons Served	Meals Provided
1998	41,305	6,460,533	79,012	3,636,855	120,317	10,097,388
1999	49,586	6,575,547	85,222	3,536,895	134,808	10,112,442
2000	50,185	6,908,566	91,470	3,508,570	141,655	10,417,136
2001	49,031	7,156,529	87,722	3,368,334	136,753	10,524,863
2002	44,873	6,924,667	91,393	3,385,966	136,266	10,310,633
2003	47,299	6,920,578	95,190	3,346,695	142,489	10,267,273
2004	44,347	7,098,930	88,671	3,319,686	133,018	10,418,616
2005	43,809	6,842,809	80,464	2,988,425	124,273	9,831,234
2006	45,341	6,835,671	82,112	2,903,911	127,453	9,739,582
2007	45,234	7,434,861	74,774	2,747,306	120,008	10,182,167
2008	44,675	7,876,821	71,709	2,693,371	116,384	10,570,192
2009	40,893	7,852,114	73,858	2,562,426	114,751	10,414,540
¹ 2010	40,912	7,584,674	99,621	2,805,195	140,533	10,389,869
2011	40,128	7,330,519	87,104	2,560,432	127,232	9,890,951
2012	36,941	6,701,603	84,368	2,516,744	121,309	9,218,347
2013	34,022	6,021,135	81,939	2,412,344	115,961	8,433,479
2014	33,930	5,738,511	81,545	2,360,019	115,475	8,098,530
2015	33,350	5,936,547	82,936	2,403,694	116,286	8,340,241
2016	31,364	5,562,049	87,404	2,341,841	118,768	7,903,890
2017	33,564	6,148,011	78,779	2,234,898	112,343	8,382,909
2018	40,701	7,053,366	81,701	2,249,426	122,402	9,302,792
2019	43,436	7,716,621	85,467	2,258,869	128,903	9,975,490
² 2020	88,395	11,520,280	55,638	1,004,845	144,033	12,525,125
2021	87,800	12,226,604	11,056	235,116	98,856	12,461,720
³ 2022	49,500	11,952,855	61,000	1,792,200	110,500	13,745,055

¹ The increase in Congregate meals in FY 2010 was due to ARRA funding.

² The increase in Home Delivered Meals in FY 2020 and decrease in Congregate "Persons Served" and "Meals Provided" was related to the temporary suspension of Congregate Meal Services due to the COVID-19 (Coronavirus) pandemic.

³ FY 2022 "Persons Served" and "Meals Provided" numbers are projections. The number of "Persons Served" and "Meals Provided" for Congregate services are projected to be lower related to the COVID-19 (Coronavirus) pandemic.

Statewide Elderly Nutrition Program Expenditures During the Past 10 Years

HOME DELIVERED MEALS				
Fiscal Year	Federal	State	Other	Total
2013	7,462,467	10,943,060	16,114,683	34,520,210
2014	8,297,861	11,828,976	16,961,880	37,088,717
2015	7,926,312	11,796,131	16,977,003	36,699,446
2016	8,219,033	11,764,216	15,752,225	35,735,474
2017	8,041,981	17,600,000	17,546,450	43,188,431
2018	8,765,366	21,777,387	16,963,059	47,505,812
2019	11,544,592	21,004,507	22,007,848	54,556,947
2020	9,625,256	23,719,757	39,224,355	72,569,368
¹ 2021	11,644,941	23,745,683	44,590,952	79,981,576
² 2022	10,132,379	31,308,589	20,977,737	62,418,705

CONGREGATE MEALS				
Fiscal Year	Federal	State	Other	Total
2013	10,446,143	39,735	13,328,224	23,814,102
2014	10,356,601	39,735	12,497,572	22,893,908
2015	10,850,580	53,611	12,184,589	23,088,780
2016	9,437,175	69,772	11,986,733	21,493,680
2017	10,242,080	175,451	12,412,998	22,830,529
2018	10,522,961	224,147	11,667,100	22,414,208
2019	10,412,703	589,004	13,938,393	24,940,100
³ 2020	6,706,469	254,941	7,028,315	13,989,725
2021	4,516,289	101,158	3,345,306	7,962,753
2022	11,364,816	536,541	9,781,640	21,682,997

TOTAL MEALS				
Fiscal Year	Federal	State	Other	Total
2013	17,908,610	10,982,795	29,442,907	58,334,312
2014	18,654,462	11,868,711	29,459,452	59,982,625
2015	18,776,892	11,849,742	29,161,592	59,788,226
2016	17,656,208	11,833,988	27,738,958	57,229,154
2017	18,284,061	17,775,451	29,959,448	66,018,960
2018	19,288,327	22,001,534	28,630,159	69,920,020
2019	21,957,295	21,593,511	35,946,241	79,497,047
2020	16,331,725	23,974,698	46,252,670	86,559,093
¹ 2021	16,161,230	23,846,841	47,936,258	87,944,329
² 2022	21,497,195	31,845,130	30,759,377	84,101,702

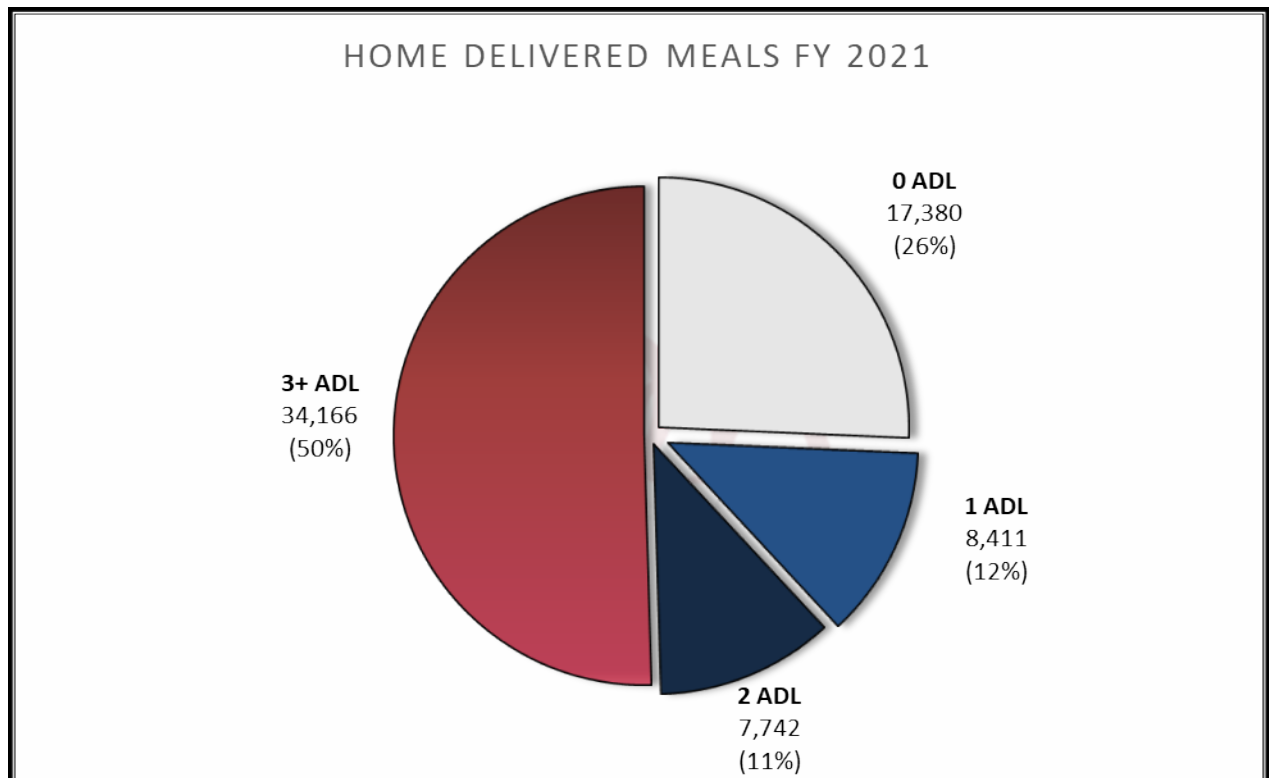
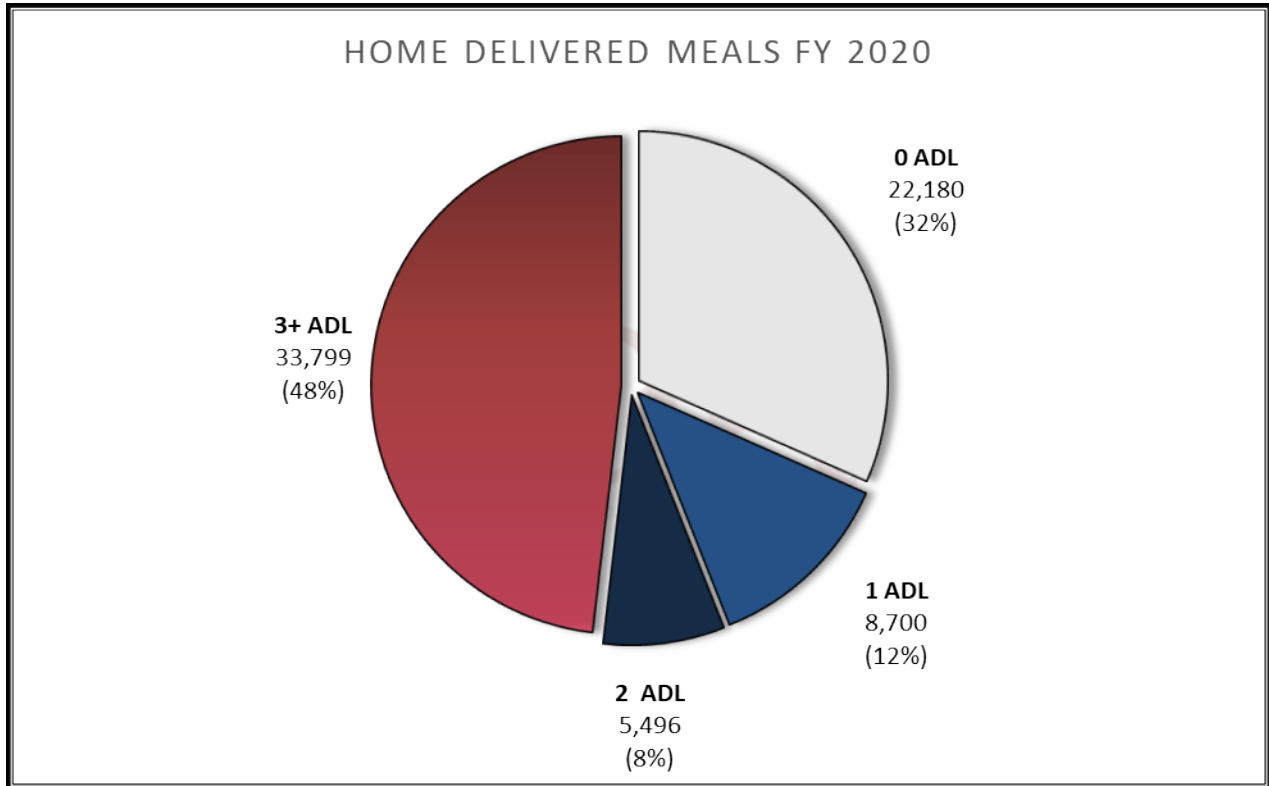
Note: The "Other" column includes Program Income, Local Match, Nutrition Services Incentive Program (NSIP) awards.

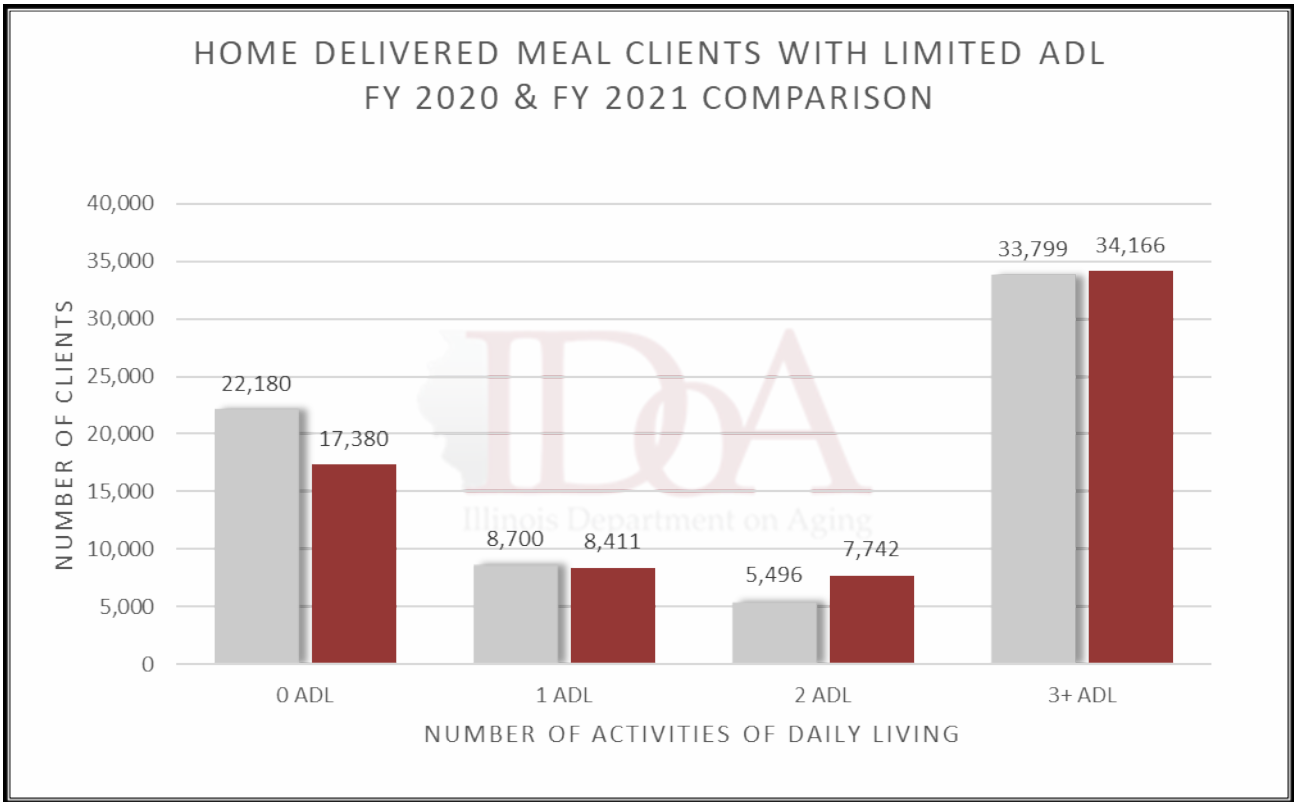
¹ FY 2021 is based on 4th Quarter Projections. The FY 2021 increase in "Other" expenditures for Home Delivered Meals is related to the shift in funding sources to the **Coronavirus Aid, Relief, and Economic Security (CARES) Act**, **The Families First Coronavirus Response Act (FFCRA)**, and the **Consolidated Appropriations Act (CAA)** funding due to the COVID-19 (Coronavirus) pandemic, which are included in the "Other" column.

² FY 2022 is based on the Area Plan projections, which do not reflect the additional CAA and ARPA funding in the "Other" column.

³ The FY 2020 decrease in Congregate expenditures is related to the temporary suspension of Congregate Meal Services due to the COVID-19 (coronavirus) pandemic.

Home Delivered Meal Clients with Limited Activities of Daily Living (ADL)





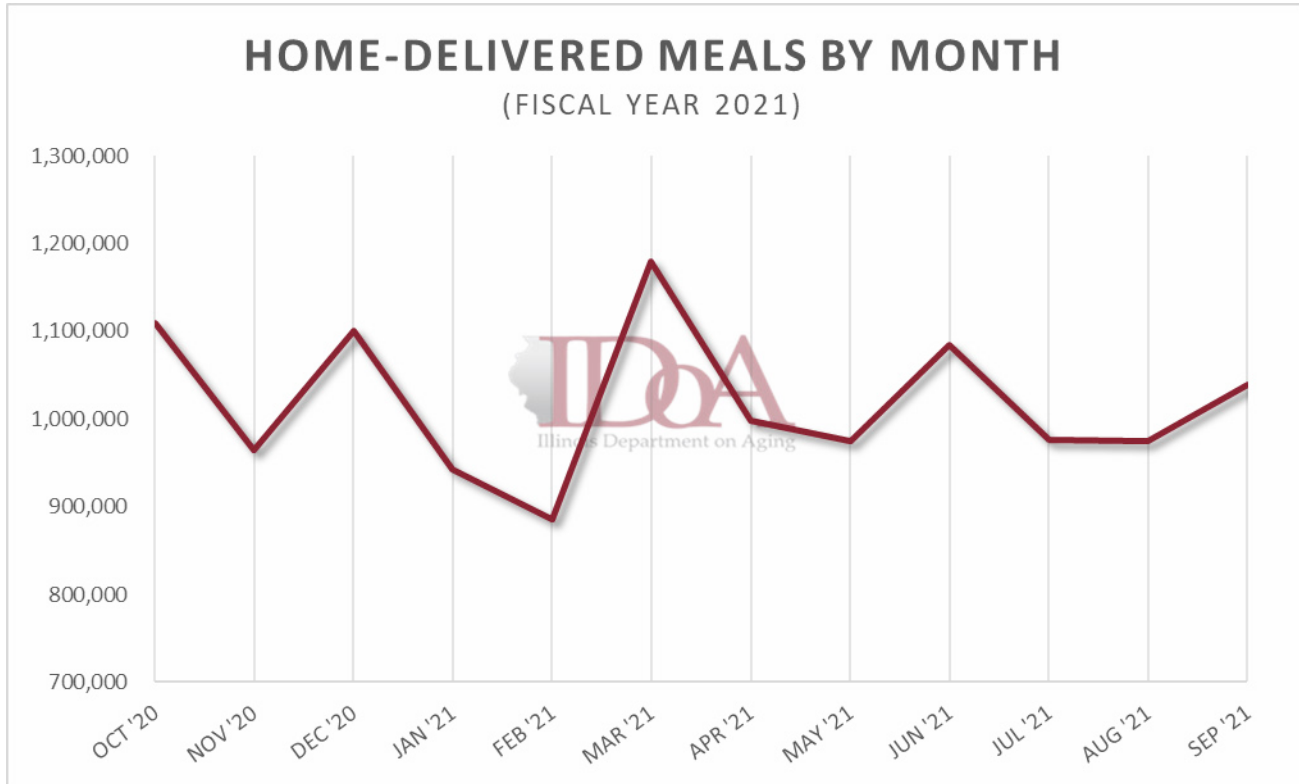
Note: Activities of Daily Living indicates the person’s total score on the Katz Index of Independence in Activities of Daily Living (ADL). Activities include bathing, dressing, toileting, transferring, continence, and feeding. Permissible values are 0-6.

A limitation is defined as unable to perform the activity without substantial assistance (including verbal reminding, physical cuing, or supervision).

(Source: NAMRS¹/OAA)

¹ NAMRS is the National Adult Maltreatment Reporting System.

FY 2021 Statewide Monthly Home Delivered Meals



Note: The Department temporarily suspended Congregate Meal services in March 2020 in an effort to stop the spread of COVID-19 (Coronavirus) pandemic. As a result, services provided under the Home Delivered Meals program began to increase, as many former Congregate Meal participants began to receive Home Delivered Meals for the first time. Congregate Meal sites remained temporarily suspended until July 1, 2021 due to the COVID-19 pandemic and its variants.

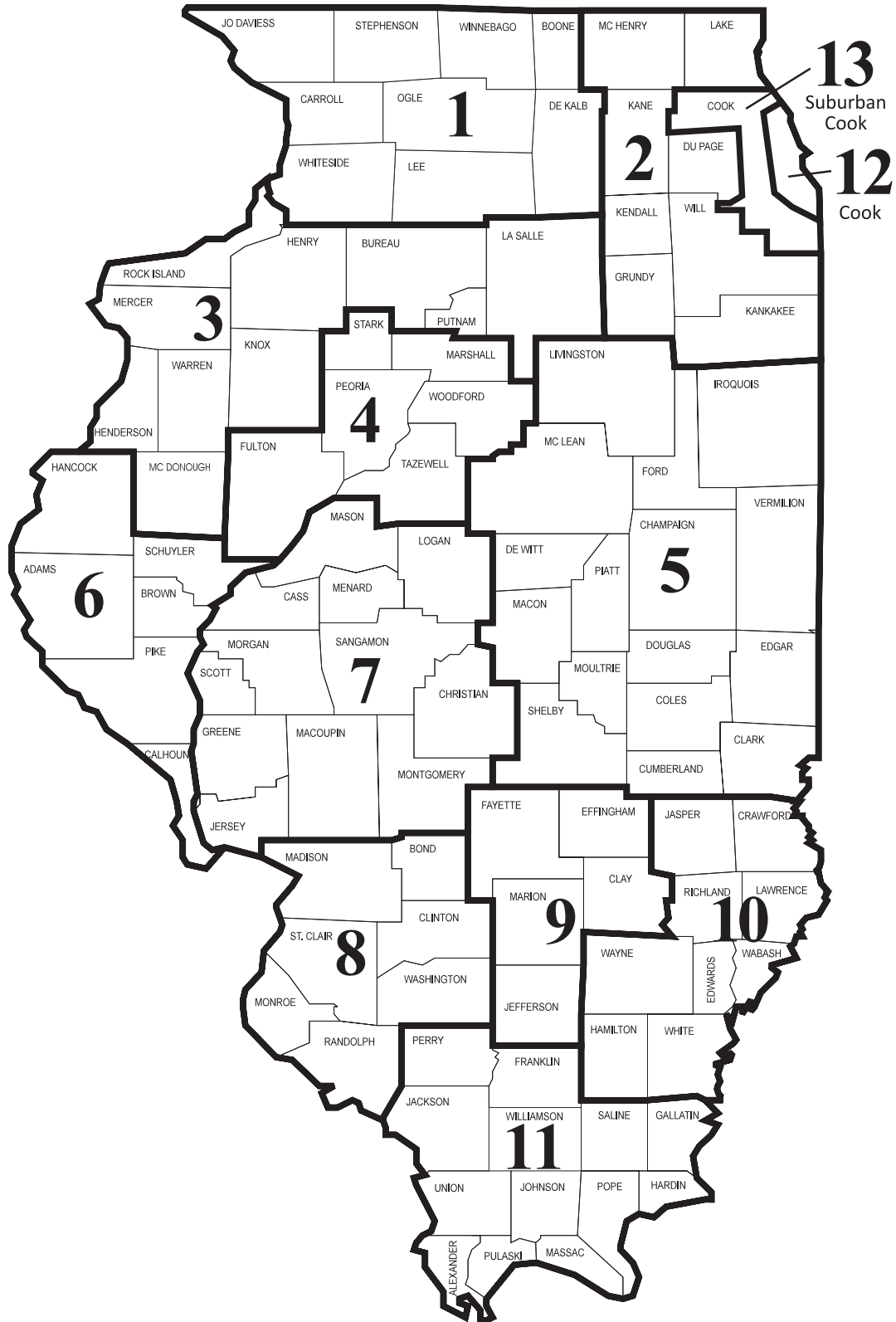
National Survey Results for Home Delivered Meals

The federal Administration on Aging conducted the Fourteenth National Survey of Program Clients in 2019. The purpose of this nationally representative sample survey was to collect information on client satisfaction, consumer assessment of service quality, and consumer reported outcomes of clients participating in OAA state and community programs on aging. The following table outlines the results for the home delivered meal service.

National Performance Measures Project Results	% of Home Delivered Meal Clients
Portion of Food Eaten that Home Delivered Meals Represents on a Daily Basis	
Less than 1/3 of all the food	6.4%
Between 1/3 and 1/2 of all the food	28.6%
About 1/2 of all the food	32.1%
More than 1/2 of all the food	23.1%
Other	0.3%
Health Issues	
Arthritis/Rheumatism	65%
High Blood Pressure/Hypertension	76.7%
Heart Attack/Coronary	42.7%
High Cholesterol	50.7%
Diabetes or High Blood Sugar	38.8%
Asthma	47.2%
Length of Time Receiving Home Delivered Meals	
6 months or less	24%
More than 6 months but less than 1 year	13.8%
At least 1 Year but less than 2 years	24%
2 to 5 years	27.8%
More than 5 years	6.2%
Home Delivered Meals Help Clients To	
Continue to live in own home	86.7%
Eat healthier foods	79.4%
Feel better	85%
Improve health	74.9%
HDMs Are Good or Excellent	90.9%
Older Adult Likes the HDMs	88.1%
Older Adults Would Recommend HDMs to Friend	93.6%

ACL Aging, Independence, and Disability (AGID) Program Data Portal
 2019 Home Delivered Meals (Weighted data)
<https://agid.acl.gov/DataFiles/NPS/Files.aspx?year=2019&serviceid=4>

Planning and Service Areas in Illinois



Area Agencies on Aging

AREA 01

Northwestern Illinois Area Agency on Aging

Grant Nyhammer, Executive Director & General Counsel
1111 South Alpine Road, Suite 600
Rockford, IL 61108
815/226-4901; FAX: 815/226-8984;
1-800-542-8402 (nine county area ONLY)
Web: www.nwilaaa.org
E-Mail: gnyhammer@nwilaaa.org

AREA 02

AgeGuide Northeastern Illinois

Marla Fronczak, CEO
1910 S. Highland Ave., Suite 100
Lombard, IL 60148
630/293-5990; FAX: 630/293-7488
Web: www.ageguide.org
E-Mail: info@ageguide.org or mfronczak@ageguide.org

AREA 03

Western Illinois Area Agency on Aging

Barbara Eskildsen, Executive Director
729 - 34th Avenue
Rock Island, IL 61201-5950
309/793-6800; FAX: 309/793-6807;
1-800-322-1051 (I & A)
Web: www.wiaaa.org
E-Mail: beskildsen@wiaaa.org

AREA 04

Central Illinois Agency on Aging, Inc.

Keith Rider, President & CEO
700 Hamilton Boulevard
Peoria, IL 61603-3617
309/674-2071; FAX: 309/674-3639;
1-877-777-2422; 309/674-1831 (TTY)
Web: www.ciaaa.net
E-Mail: krider@ciaaa.net

AREA 05

East Central Illinois Area Agency on Aging, Inc.

Susan Real, Executive Director
1003 Maple Hill Road
Bloomington, IL 61704-9327
309/829-2065; FAX: 309/829-6021;
1-800-888-4456 (I & A) (sixteen county area ONLY)
Web: www.eciaaa.org
E-Mail: SREAL@eciaaa.org

AREA 06

West Central Illinois Area Agency on Aging

Michael Drew, Director
639 York Street, Suite 333
Quincy, IL 62301
217/223-7904; FAX: 217/222-1220;
1-800-252-9027 (I & A) (Voice & TTY)
Web: www.wciagingnetwork.org
E-Mail: michael.drew@wciagingnetwork.org

AREA 07

AgeLinc

Carolyn Austin, Executive Director
2731 S. MacArthur Blvd.
Springfield, IL 62704
217/787-9234 (Voice & TTY); FAX: 217/787-6290;
1-800-252-2918 (I & A) (217, 309 & 618 area codes ONLY)
Web: www.agelinc.org
E-Mail: caustin@agelinc.org

AREA 08

AgeSmart Community Resources

Joy Paeth, Chief Executive Officer
801 W State St
O'Fallon, IL 62269
618/222-2561; FAX: 618/222-2567;
1-800-326-3221
Web: www.AgeSmart.org
E-Mail: jpaeth@AgeSmart.org

AREA 09

Midland Area Agency on Aging

Tracy Barczewski, Executive Director
434 South Poplar
Centralia, IL 62801-1420
618/532-1853; FAX: 618/532-5259;
1-877-532-1853
Web: www.midlandaaa.org
E-Mail: tracy@midlandaaa.org

AREA 10

Southeastern Illinois Agency on Aging, Inc.

Shana Holmes, Chief Executive Officer
516 Market Street
Mt. Carmel, IL 62863-1558
618/262-2306; FAX: 618/262-4967;
1-800-635-8544 (618 area code ONLY)
Web: www.seiaaa.com
E-Mail: southeasternaaaceoshana@gmail.com

AREA 11

Egyptian Area Agency on Aging, Inc.

Becky Salazar, Executive Director
200 East Plaza Drive
Carterville, IL 62918-1982
618/985-8311; FAX: 618/985-8315;
1-888-895-3306
Web: www.egyptianaaa.org
E-Mail: Becky.salazar@egyptianaaa.org

AREA 12

Senior Services Area Agency on Aging Chicago Department of Family and Support Services

Margaret Laraviere, Deputy Commissioner
1615 West Chicago Avenue, 3rd Floor
Chicago, IL 60622
312/746-5682; FAX: 312/744-8168;
312/744-6777 (TTY)
Web: www.cityofchicago.org/aging
E-Mail: Margaret.laraviere@cityofchicago.org

AREA 13

AgeOptions, Inc.

Diane Slezak, President & CEO
1048 Lake Street, Suite 300
Oak Park, IL 60301
708/383-0258; FAX: 708/524-0870; 708/524-1653 (TTY);
1-800-699-9043 (Suburban Cook County area ONLY)
Web: www.ageoptions.org
E-Mail: diane.slezak@ageoptions.org

Number of Older Adults Denied Home Delivered Meals and Number of Older Adults on Waiting Lists

The following information outlines the estimated number of older adults denied home delivered meals in FY 2021 and the current number of older adults on waiting lists due to insufficient funding. It is estimated that 79 older adults were denied home delivered meals in FY 2021 due to insufficient funding. This is a 66 percent decrease since FY 2020. At the present time, 151 older adults are on waiting lists for home delivered meals throughout Illinois; this is a 33 percent decrease over the past year.

Planning & Service Area	Name of County	FY2021 Number of Older Persons Denied HDMs Due to Lack of Funding	Current Number of Older Persons on Waiting Lists
01	Boone	0	0
01	Carroll	0	0
01	DeKalb	79	94
01	Jo Daviess	0	0
01	Lee	0	0
01	Ogle	0	0
01	Stephenson	0	0
01	Whiteside	0	0
01	Winnebago	0	0
Total		79	94
02	DuPage	0	0
02	Grundy	0	0
02	Kane	0	0
02	Kankakee	0	0
02	Kendall	0	0
02	Lake	0	0
02	McHenry	0	0
02	Will	0	0
Total		0	0
03	Bureau	0	0
03	Henderson	0	0
03	Henry	0	0
03	Knox	0	0
03	LaSalle	0	0
03	McDonough	0	0
03	Mercer	0	0
03	Putnam	0	0
03	Rock Island	0	0
03	Warren	0	0
Total		0	0

Planning & Service Area	Name of County	FY2021 Number of Older Persons Denied HDMs Due to Lack of Funding	Current Number of Older Persons on Waiting Lists
04	Fulton	0	0
04	Marshall	0	0
04	Peoria	0	0
04	Stark	0	0
04	Tazewell	0	0
04	Woodford	0	0
Total		0	0
<hr/>			
05	Champaign	0	0
05	Clark	0	0
05	Coles	0	0
05	Cumberland	0	0
05	De Witt	0	0
05	Douglas	0	0
05	Edgar	0	0
05	Ford	0	0
05	Iroquois	0	0
05	Livingston	0	0
05	Macon	0	0
05	McLean	0	0
05	Moultrie	0	0
05	Piatt	0	0
05	Shelby	0	0
05	Vermilion	0	0
Total		0	0
<hr/>			
06	Adams	0	0
06	Brown	0	0
06	Calhoun	0	0
06	Hancock	0	0
06	Pike	0	0
06	Schuyler	0	0
Total		0	0

Planning & Service Area	Name of County	FY2021 Number of Older Persons Denied HDMs Due to Lack of Funding	Current Number of Older Persons on Waiting Lists
07	Cass	0	0
07	Christian	0	0
07	Greene	0	0
07	Jersey	0	0
07	Logan	0	0
07	Macoupin	0	0
07	Mason	0	0
07	Menard	0	0
07	Montgomery	0	0
07	Morgan	0	0
07	Sangamon	0	57
07	Scott	0	0
Total		0	57
<hr/>			
08	Bond	0	0
08	Clinton	0	0
08	Madison	0	0
08	Monroe	0	0
08	Randolph	0	0
08	St. Clair	0	0
08	Washington	0	0
Total		0	0
<hr/>			
09	Clay	0	0
09	Effingham	0	0
09	Fayette	0	0
09	Jefferson	0	0
09	Marion	0	0
Total		0	0
<hr/>			
10	Crawford	0	0
10	Edwards	0	0
10	Hamilton	0	0
10	Jasper	0	0
10	Lawrence	0	0
10	Richland	0	0
10	Wabash	0	0
10	Wayne	0	0
10	White	0	0
Total		0	0

Planning & Service Area	Name of County	FY2021 Number of Older Persons Denied HDMs Due to Lack of Funding	Current Number of Older Persons on Waiting Lists
11	Alexander	0	0
11	Franklin	0	0
11	Gallatin	0	0
11	Hardin	0	0
11	Jackson	0	0
11	Johnson	0	0
11	Massac	0	0
11	Perry	0	0
11	Pope	0	0
11	Pulaski	0	0
11	Saline	0	0
11	Union	0	0
11	Williamson	0	0
Total		0	0
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12	Cook (Chicago)	0	0
Total		0	0
<hr/>			
13	Cook (Suburban)	0	0
Total		0	0

Note: The above table reflects the number of older adults still in need of home delivered meals and those on waiting lists due to lack of funding in each Planning and Service Area (PSA) as of November 2021 when the annual Home Delivered Meals survey data was collected.

The number of older adults on waiting lists and number of older adults still in need of meals continued to change as Federal funding (i.e. The Coronavirus Aid, Relief, and Economic Security (CARES) Act, The Families First Coronavirus Response Act (FFCRA), and The Consolidated Appropriations Act (CAA)) was released to the Area Agencies on Aging.

Several waiting lists have been eliminated since then, while other PSAs currently have a waiting list that previously did not have one.

Additional Funding Needed for Older Adults Denied Services and for Older Adults on Waiting Lists

PSA	Additional Funds Needed for Older Adults Denied Services	Additional Funds Needed for Older Adults on Waiting Lists	Comments
1	\$25,000	\$25,000	<p>VAC: 79 persons denied services in previous year. VAC is working on several solutions to address clients denied meals and wait list issues, including looking into route delivery efficiencies, which would allow us to effectively deliver 20% more meals on a daily basis without having to add costs beyond raw food. However, with declining volunteerism, VAC may be required to add two 29 hour/week staff positions to help us with delivery demand. We anticipate payroll and fuel costs would require an additional \$50,000 annually to support growing MOW demand. Currently 94 persons on the waiting list.</p> <p>Lifescape and NICAA: No Participants were denied meals and no one currently on a waiting list.</p>
2	\$0	\$0	Across the region, no one was denied home delivered meal service. There were no nutrition providers with a waiting list throughout FY2021.
3	\$0	\$0	<p>Across the region, no one was denied home delivered meal service and there were no nutrition providers with a waiting list due to the increase in federal funding provided or funding from other sources, however in order to sustain current levels of HDM participants and avoid waiting lists, providers have outlined their annual cost to sustain current levels:</p> <p>Henry County Senior Center: \$1,485.60 per person per year. Jamieson Community Services: \$123,600 per year Rock Island County Senior Center: \$794,812.50 VNA Community Services: \$109,472 YMCA of McDonough County: \$212,777</p>
4	\$0	\$0	There were no clients denied Home Delivered Meals services or currently on a waiting list.
5	\$0	\$0	<p>No persons were denied or on waiting lists during FY 2021. However, this could be an issue as we recognize more smaller communities needing additional services. The cost of items has not been identified, but theoretically additional funds could support the following:</p> <ul style="list-style-type: none"> • Vehicle (new/used, repairs, gas) • Driver(s) • Kitchen staff • Kitchen Equipment (pans, oven space, warmer, etc.) • Potential new Kitchen site depending on location of meals being prepared. (equipment and team set up costs at location)
6	\$0	\$0	No clients were denied services and there are currently no waiting lists for home delivered meal service in PSA06.

PSA	Additional Funds Needed for Older Adults Denied Services	Additional Funds Needed for Older Adults on Waiting Lists	Comments
7	\$0	\$0	<p>No clients were denied services, however, to be able to expand/add additional routes, some areas would need additional funding to address this.</p> <p>CEFS: Some clients were offered frozen meals because of where they live, and no volunteers were willing to drive that far every day. These clients refused frozen meals. Therefore, we could use additional money for reimbursement of volunteers for their mileage. 52 miles/day x 248 serving days @ \$.50/mile = \$6,448.00 Currently no waiting list but continue to be concerned about FY 22 funding, the high cost of food, and increasing minimum wage.</p> <p>PCoA: Additional funding to add another delivery route. Most churches in Morgan County are delivering for a "medically necessary, doctor prescribed, meals on wheels" program. Prairie Council on Aging pays the caterer for two routes daily at \$17/per route. Thus, 248 days of service x \$17/day= \$4216 x 3 routes = \$12,648.</p> <p>SSCI: Funding needed for two additional employees' wages and benefits: \$51,400 Mileage for 6 volunteers 20 miles a day @ 20 cents: \$6,240 Food Cost: \$38,000; Disposables: \$7,700 Total cost to feed an additional 57 people is \$ 103,340. Additional thermal carrying bags: \$500 Cost of marketing for additional employees and volunteer: \$2,300 Tags for additional options on meals \$350 The pandemic has caused Senior Services of Central Illinois Daily Bread Program to lose a significant number of our volunteers. Most of our volunteers are seniors. During the pandemic seniors were more vulnerable to the virus, which caused our volunteers to be hesitant to deliver meals to our meal participants. We have also found ourselves struggling to fill vacant positions. If we could fill our three vacant positions (cook assistants/drivers), and recruit 6 additional volunteers per day, that would help to reduce our current waiting list of 57 individuals. To continue to address a waiting list, funding would be needed for wages and benefits of two additional employees: \$51,400 Mileage for 15 volunteers 20 miles a day @ 20 cents: \$15,600 Food Cost: \$94,848 Disposables: \$19,265 Total cost to feed an additional 151 people is \$ 181,113. Additional thermal carrying bags: \$1500 Cost of marketing for additional employees and volunteer: \$2,300 Tags for additional options on meals \$350</p>

PSA	Additional Funds Needed for Older Adults Denied Services	Additional Funds Needed for Older Adults on Waiting Lists	Comments
8	\$ 107,700	\$0	<p>We have several unserved rural communities in Clinton, Randolph, and Southern St. Clair Counties as indicated in the survey part 1. The providers will need additional drivers and vehicles to provide HDM in these areas.</p> <p>Clinton 15,000 (driver) Randolph 15,000 (driver) + 25,000 (vehicle) + 5,000 (upkeep & gas) = 45,000 Southern St. Clair 3,500 (PT driver) Total delivery cost = \$63,500 Total meal cost for 34 individuals per year = (34* 5) * 52 * \$5 = \$44,200 An estimated total of \$ 107,700 would be needed for a full fiscal year to address the unserved areas. Currently AgeSmart does not have a waiting list.</p>
9	\$0	\$0	<p>CEFS I would like to receive additional money just to reimburse volunteers to deliver in the rural areas that we currently don't go to because no one wants to drive that far every day and I don't have money to pay mileage on those routes. 80 miles/day x 248 serving days x \$.50/day = \$9,920.00 I currently have no waiting list but may have to implement one during FY 22. With the high cost of raw food and the higher minimum wage and no additional dollars I will have no choice.</p> <p>Comp Services The Sunshine Center did not deny services, nor did we have a waiting list in the previous fiscal year (FY-21), nor the year before FY-20), however, this does not mean the funding is adequate. The number of Senior's needing meals surged during the pandemic and those numbers have not significantly decreased. The annual number of meals we have served since the beginning of the pandemic in March of 2020 have increased by 9,627. This number has not dropped to the pre-pandemic level and is not expected to. Our seniors are aging, and this pandemic shined the light on the need to increase the care we give to our most vulnerable citizens. While there has been a slight increase in funding, in addition to special Federal Funding being passed, there needs to be a steady increase in funding for these services. We are seeing increased cost of food, salaries, and a lack of workers and volunteers. We are faced with the cost of providing shelf stable meals to home delivered meal participants. We are also having to address the coming need to provide different meal options for different dietary needs. All this involved increased costs that are insufficiently addressed in the currently funding levels. We do not have a waiting list. We have done our very best to ensure all Seniors in our area who have contacted us in need of home delivered meals are served. It has not been easy, but that is what we have done.</p> <p><i>PSA 9 continued on next page...</i></p>

PSA	Additional Funds Needed for Older Adults Denied Services	Additional Funds Needed for Older Adults on Waiting Lists	Comments												
9	\$0	\$0	<p>Our offices have never been closed a day in this pandemic Our staff have shown up every workday and have taken the very best precautions we can take to serve our Seniors with the care and compassion they deserve. Our goal is to continue the level of service, but it cannot be done without continued increases in funding.</p> <p>BCMW We did not deny anyone services if they were eligible. The number of individuals needing meals has increased during the pandemic. New routes have been added, along with the addition of vehicles and need for volunteers or addition of paid staff. All increases the cost along with adding additional meal options in the future.</p> <p>We have not used a waiting list for several years. We have been adding individuals as we receive the request. During the pandemic it has been difficult at times to take on the additional requests, but we have added routes and we continue to plan for obtaining vehicles where needed, as well as additional paid staff, funding permitted. It is difficult to find workers. Increased funding will allow us to continue to serve those requesting meals and to make the additional changes that are needed to make it happen.</p>												
10	\$0	\$0	<p>Edwards/Wayne: We did not have seniors who were "denied" service. We do not have a waiting list. The major impact on our budget are the price of gasoline which has doubled our fuel costs, the 5-8 % increase in food costs, and the continue rise in the Minimum wage. The later will add an additional \$25,000 to our personnel cost for calendar year 2022. In addition, the effect of increasing the minimum up to \$15.00/hr over the next several years will probably lead to us having to close or cut back on services. I have been answering surveys like this one for over 11 years without seeing any different levels of funding for our centers. If we had the money for two additional personnel plus one to two additional vehicles, we could expand into other areas of Wayne County. Of course, it has been 15+ years since servicers were provided to the far reaches of the county.</p> <p>Embaras River Basin Authority: No one was denied services and we do not currently have a waiting list.</p> <p>Hamilton/White: At this time, we have not denied anyone home delivered meals. However, if we continue to receive new requests for HDMs in both our counties we will have to hire at least one driver in each county and purchase another delivery vehicle for each county, or we will have to start putting people on a waiting list. Below is a list of projected expenses we would have should we need to hire an additional driver and purchase an additional delivery van in each county.</p> <table data-bbox="698 1690 1299 1879"> <tr> <td>Personnel (2)</td> <td>\$ 34,000</td> </tr> <tr> <td>2 Delivery Vehicles</td> <td>\$ 60,000</td> </tr> <tr> <td>Fuel</td> <td>\$ 20,000</td> </tr> <tr> <td>Misc. Supplies</td> <td>\$ 8,000</td> </tr> <tr> <td>Food</td> <td>\$ 20,000</td> </tr> <tr> <td>Total</td> <td>\$142,000</td> </tr> </table> <p>Currently, we do not have anyone on our waiting list.</p>	Personnel (2)	\$ 34,000	2 Delivery Vehicles	\$ 60,000	Fuel	\$ 20,000	Misc. Supplies	\$ 8,000	Food	\$ 20,000	Total	\$142,000
Personnel (2)	\$ 34,000														
2 Delivery Vehicles	\$ 60,000														
Fuel	\$ 20,000														
Misc. Supplies	\$ 8,000														
Food	\$ 20,000														
Total	\$142,000														

PSA	Additional Funds Needed for Older Adults Denied Services	Additional Funds Needed for Older Adults on Waiting Lists	Comments
10	\$0	\$0	<p>Lawrence: Lawrence County Senior Citizens has been very fortunate to this point to have received so much community support that we have been able to serve every person who has requested service during this pandemic. It has been a real struggle and costly to us and the community, but it has been done. I just don't know how much longer we can expect our struggling community to continue supporting us this way.</p> <p>We have tried hard to keep our costs down but at minimum it has cost us \$27,470 this past year for those who prepare our 46,000 meals. and another \$34,000 for those who delivered those meals to all the home of our seniors. This doesn't even consider the volunteers who used their time and money to help in the delivery of the other meals. Along with these people to deliver we also had gasoline costs of over \$6,000 for the Fiscal Year. Already at the beginning of FY 22 we have seen a 30-cent increase in Gasoline so who knows what this new Fiscal year will bring for us. Items many of us don't consider when going to restaurants and receiving take-out is the cost of the takeout containers which happen to be expensive for not-for-profits like Lawrence County Senior Citizens. Before we begin to put items of food on trays, they must also be packaged in small container with lids to keep them from spilling. Like soup bowls or fruit bowls. We use metal container for some types of meals that don't stay hot when traveling long distances. We use Styrofoam for other types of meals and still other types for speed in packing. These packaging costs vary to the tune of approximately about \$11,000 a year, just to enable us to feed the homebound which is a valuable need for keeping our seniors safe in their homes. In Fiscal Year 21 we were also fortunate enough to have received a special grant that let us have a little extra funding to purchase special heat bags to transport our meals to our seniors homes which helps regulate the temperature of the meals. These were \$1,500. More of these types of containers will need to be purchased soon. No waiting list currently.</p> <p>Wabash: We did not have persons denied services and no one is currently on a waiting list.</p>

PSA	Additional Funds Needed for Older Adults Denied Services	Additional Funds Needed for Older Adults on Waiting Lists	Comments
11	\$0	\$0	<p>Our Providers have not implemented waiting lists this year or denied anyone due to their commitment to older adults and ensuring seniors in their community receive meals. They have gone over budget and served more meals than paid for by OAA funds. Providers incurred costs 33.2 percent over what they received this past fiscal year for meal units, even after the additional meal funds were added. They have also been struggling with the challenges of repairs to old buildings, vehicle issues due to increased mileage covering more areas, and lack of enough appliances to meet the increased number of meals prepared. This includes oven space, freezer space, counter space, among other shortcomings. There is also an increase in staff costs with minimum wage increasing, as well as rising gas and food costs. With CARES Act funds, \$15000 was available to each county to purchase vehicles, ovens, freezers, etc. and this enabled the Providers to get through the first year of Covid-19. Our Providers report that additional funding would allow them to continue functioning at a level to keep up with their current meal counts. Each county would need at least \$15000 additional funds to maintain at current level, with some counties requiring more funding. These funds would be to repair and purchase equipment specific for meal preparation and delivery.</p> <p>For 13 counties, that would equate to at least \$180,000 just for repairs and equipment replacement.</p>
12	\$0	\$0	Not applicable
13	\$0	\$0	<p>In PSA 13, there were no persons denied home delivered meals (HDMs) during FY21. Although the monthly average for new HDM referrals returned to pre-pandemic levels in FY21, the total number of people receiving home delivered meals did not diminish, even after the re-opening of many congregate meal sites in the final quarter of the fiscal year. Cost-saving measures, such as frozen-five packs to minimize delivery days, and the use of emergency funding allowed us to meet the elevated demand throughout FY21. At the current, post-pandemic baseline of client need, serving additional clients may stretch resources without additional funding.</p> <p>In addition to the general increase in demand for home delivered meals, our ability to continue meeting the needs of older adults in PSA 13 may be affected by the following:</p> <p>Ethnic Meals: AgeOptions and our nutrition provider partners continue to see an increase in demand for meals that are culturally appropriate. For many older adults, the lack of culturally appropriate meals may preclude them from participating in the nutrition program. Projections for the 60-year-old-plus Latinx population of Suburban Cook County indicate it will be the fastest-growing segment at least through 2024.</p>

PSA	Additional Funds Needed for Older Adults Denied Services	Additional Funds Needed for Older Adults on Waiting Lists	Comments
13	\$0	\$0	<p>Some Townships are predicted to see increases greater than 100%. The need for Korean, Chinese, South Asian and Middle Eastern (Halal or vegetarian) meals also is growing. To serve all older adults with projected need, we may require additional funding to expand partnerships with ethnic meal providers. (Note that ethnic meal providers tend to operate at lower volumes and higher costs-per-unit than our general meal providers.)</p> <p>Therapeutic Diets: AgeOptions expects demand for therapeutically tailored meals will grow as our populations' average age continues to increase. It is estimated that the number of over-60 adults in our service area will reach 650,899 by 2024, with the 70-79 age group projected to be the fastest-growing segment. These projections, combined with the higher cost for some therapeutic meals compared to general wellness diets, may make it difficult to serve all older adults in need of these diets.</p> <p>Emergency Shelf-Stable Meals: Pre-pandemic, AgeOptions provided emergency meals for clients to keep on hand in case of winter weather-related site closures. In FY22, following IDoA guidance, we have shifted to a permanent, year-round emergency meal program featuring regular, twice-yearly emergency meal deliveries. The program will provide meals for our entire population, plus a small reserve for new clients coming on board between deliveries. Additionally, meals used due to emergencies between twice-yearly deliveries will be replenished. This expansion of the Emergency Meal program will require a greater funding commitment to ensure that all nutrition clients can be supplied with year-round shelf-stable meals.</p> <p>In PSA 13, there are currently no persons on home delivered meal waiting lists. However, AgeOptions has identified several trends that may affect our ability to continue serving all clients in a timely manner without additional funding:</p> <p>Increased need for 2nd and weekend meals: AgeOptions anticipates the number of homebound individuals will increase in proportion to the rise in the average age of our population (see "1b" above). This could result in an increased need for 2nd and weekend meals. Thanks to CARES Act and FFCRA funding, our nutrition providers have been able to recover from their diminished ability to provide 2nd and weekend meals after the onset of the pandemic. As emergency funding is expended, additional support may be needed to meet the anticipated rise in need for 2nd and weekend meals.</p> <p><i>PSA 13 continued on next page...</i></p>

PSA	Additional Funds Needed for Older Adults Denied Services	Additional Funds Needed for Older Adults on Waiting Lists	Comments
13	\$0	\$0	<p>Increased Referrals from Managed Care Organizations (MCOs): In FY20, the pandemic caused MCO referrals for home delivered meals to increase 200% over FY19 levels. MCOs referrals as a percentage of total referrals increased by 40% in that time frame. Even though we have now seen the rate of new referrals for home delivered meals edge back to pre-pandemic levels, the percentage of those referrals coming from MCOs has stayed at the elevated rate. We believe this is due to our ongoing outreach to MCOs which has increased awareness of AgeOptions programs (including therapeutic diet options). Thanks to the many new MCO relationships established during the past two years, along with the increasing average age of our over-60 population, the higher referral rates are being sustained. This could add to funding needs.</p> <p>Decreased Project Income: Overlying all these concerns is a decline in per-meal project income. AgeOptions observed a decline in project income for 2nd and weekend meals for two years before the pandemic. Since the onset of the pandemic, donations for all categories of meals have taken a further downturn. (See table below.) If the decline in project income continues even as effects of the pandemic wane, it will be difficult to maintain current levels of support for our providers, or to increase levels of support, without additional funding.</p>

Note: The above table reflects the additional funding needed by each Planning and Service Area (PSA) as of November 2021 when the annual Home Delivered Meals survey data was collected.

Waiting lists and the number of older adults still in need of services continued to change as Federal funding (i.e. The Coronavirus Aid, Relief, and Economic Security (CARES) Act, The Families First Coronavirus Response Act (FFCRA), and The Consolidated Appropriations Act (CAA)) was released to the Area Agencies on Aging.

Several waiting lists have been eliminated since then, while other PSAs currently have a waiting list that did not previously have one.

Expansion and Modifications to the Home Delivered Meal Program with Coronavirus Aid, Relief, and Economic Security (CARES) Act, The Families First Coronavirus Response Act (FFCRA), and The Consolidated Appropriations Act (CAA) Funding

PSA	Expansion and Modifications
1	<p>VAC: Used CARES and CAA funding for supporting HDM services, including the increase in raw food costs, travel and payroll costs, and purchase of emergency meal inventories during the pandemic. CARES and CAA funding were not used for the purchase of equipment, however, using those funds for operational needs allowed us to tap Title III for equipment purchases.</p> <p>NICAA: We expanded our delivery area and hired additional drivers. We offered additional meals to those in need. We did regular wellness calls to all HDM clients.</p> <p>Lifescape: 3 new HDM routes were established. We purchased 3 new vehicles for these routes. The delivery vehicles cost \$55,000 each.</p>
2	<ul style="list-style-type: none"> • Purchased a new delivery/food van (food truck) to deliver food to targeted parts of Kane county. The delivery/food van (food truck) will be retrofitted with a freezer and refrigerator to store cold and frozen meals. A generator will be installed to power the freezer and refrigerator. Additionally, funds were used to purchase a new delivery vehicle to meet increase capacity in Will county. • Continued to provide additional meals to ensure food security to older adults. • Continued to outreach and directly market to maintain/increase the number of volunteers to implement the Home Delivered Meals Program. • Continued to implement the COVID-19 5-Pack Meal distribution initiative to accommodate the closing of Congregate Dining. • Created minimal contact pick up curb-side locations where multiple meals were made available. • Partnered with other caterers that delivered multiple meals to participants as needed. Utilized Mom’s Meals to get food to participants and was able to partner with a local Korean service provider to create and distribute multiple meal boxes which included recipes and ingredients. • In Lake County, they partnered with a local restaurant to offer additional access to nutrition for within the county.
3	<p>Henry County Senior Center: We purchased vans and hired two more people; our route went from 7 towns to 10 towns for delivery. It took too long to get food if we did not split the routes. At the beginning of the pandemic, we had 169 HDM deliveries a day. Now we are up to 279 HDM a day. We also purchased hot food carriers, containers, and of course more food, milk, butter, and bread had to be ordered.</p> <p>Jamieson Community Services (serving Henderson & Warren counties): We added a new route to accommodate the volume of meal requests from people over 60 who were staying at home due to the pandemic. People who requested meal service were added to a route within a week.</p> <p>Putnam Achievement Center: CARES Act funds were used to provide HDM (through Mom’s Meals) to those who would have regularly been attending meals at our Congregate Site had it not been shut down due to COVID-19. CARES Act funds were also used to purchase foldable dollies to ensure meals could be taken inside the house with ease.</p>

PSA	Expansion and Modifications
4	<p>Rock Island County Senior Center: The CARES Act funds helped to eliminate the waitlist, provide shelf stable meals, and continue to provide shelf stable meals to those who might need food in an emergency if the deliveries would need to discontinue. No areas in Mercer County and Rock Island County were denied due to all participants were switched to meal delivery service through Mom's Meals, so everyone who qualified regardless of area were able to be served.</p> <p>Voluntary Action Center (serving Bureau & Putnam – HDM only and LaSalle – both HDM & Cong): VAC used CARES and CAA funding to provide funding for supporting HDM services, including the increase in raw food costs, travel and payroll costs, and purchase of emergency meal inventories during the pandemic. CARES and CAA funding were not used for the purchase of equipment, however, using those funds for operational needs allowed us to tap Title III for equipment purchases.</p> <p>VNA Community Services (serving Knox County): We were able to end all waitlists and take on any recipient who needed help. We currently serve anyone who meets the requirements.</p> <p>YMCA of McDonough County: We expended those funds readily by serving more HDM participants than usual and by adding anyone to the route that was over 60 who may not have qualified in a non-pandemic time. CARES Act funds were used partly to fund increases in home delivered meal client delivery routes. CARES Act funds were also used to purchase and assemble boxes of 5 shelf stable meals for home delivered meal clients, which are used as emergency meals in the winter if our drivers are unable to deliver due to inclement weather. Funds were also used to purchase disinfectant sprays/wipes, hand sanitizers, masks, and other PPE.</p> <p>The CARES Act & Families First funds were used to provide meals to congregate clients who did not feel safe leaving their homes and additional home delivered meal clients in the current areas where meals are currently being served to avoid being put on a waiting list. Additional meal carriers, hot packs, and plug in heaters were purchased to be able to serve extra meals at safe temperatures. A new delivery van was purchased as the existing van has over 100,000 miles and mechanical issues. CARES Act funds were also used for marketing materials such as magnets to put on volunteer delivery vehicles while delivering meals, refrigerator magnets for each nutrition site to give to current and potential clients, and shirts for staff to wear while working at any future marketing events. The magnets are a way to for the clients to identify the volunteer delivering the meal and a way to have the nutrition site information in a convenient place when needing to call. CARES Act funds will also be used to purchase new computers, printers, and software for the office staff to ensure productivity and ease of work.</p> <p>Funds from the Coronavirus Aide Relief and Economic Security (CARES) Act funds and Families First Coronavirus Response Act (FFCRA) funds, and the Consolidated Appropriations Act (CAA) funds were utilized to create new meal routes to meet the need of increased meal recipients.</p>

PSA	Expansion and Modifications
5	<p>FFCRA and CARES were expended in FY 2020 PSA wide.</p> <p>OSF: CCA funds were utilized to prevent waiting lists and to purchase equipment including a delivery vehicle and shelf stable meals. Ongoing supplies such as delivery bags, gloves, masks, and hand sanitizer were purchased.</p> <p>SBL:</p> <ul style="list-style-type: none"> • Emergency meals in anticipation of pandemic related closings. • Shelf stable meals to supplement hot meals. • Frozen meals to supplement hot meals. • Weekend meals for those identified as having greatest risk of malnutrition. • Second meals for those identified as having greatest risk of malnutrition. • Durable supplies to allow for expanded meals described above (carriers, coolers, etc.) • Replacement of durable supplies due to shorter life created by increased use. • Increased repairs/maintenance of vehicles and equipment created by increased use. <p>CRIS: Participants whose assessment showed they could benefit from more than 1 meal per day was offered an additional meal. We purchased a new meal delivery van and a new meal tracking data base (serv-tracker).</p>
6	<p>CARES Act, FFCRA Funds, CAA Funds were used as follows:</p> <ul style="list-style-type: none"> • Sustain existing Home Delivered Meal routes in our six-county service area, some of which saw an increase in participants • Transition congregate meal sites to takeaway service • Transition a Congregate Meal Site (Lampe Hi-Rise, Quincy) into a HDM route • HDM Clients were provided a two-week supply of frozen meals to supplement the shelf-stable meals supplied by IEMA/FEMA • Purchase of an additional 5-day supply of shelf-stable meals for HDM clients • Supplies: <ul style="list-style-type: none"> ○ Personal Protective Equipment, thermometers, sanitizing products ○ Materials for meal packaging (trays, plastic film, sealed plasticware sets); consumption of these supplies increased significantly when transition was made to trayed meals ○ Coolers/insulated transport bags for food delivery to HDM clients ○ Coolers for meal drop-off to HDM clients in need ○ Increased cost of food and materials due to supply chain issues • Staff time: <ul style="list-style-type: none"> ○ Changing to more labor-intensive service delivery method ○ Coordination of program transition throughout the PSA ○ Staff delivery of HDM when older volunteers opted out for health concerns

PSA	Expansion and Modifications
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7

CAPCIL

The CARES funds were used to purchase a new temperature-controlled food delivery truck to replace the old truck that had over 200,000 miles and was continuously breaking down and to cover additional wages necessary to cover the additional time needed to implement the process of engaging new clients needing the service during the pandemic.

The FFCRA Funds were used to cover the additional meals and fuel gained during the pandemic.

The CAA Funds were used to help cover the additional cost of the new temperature-controlled food delivery truck due to shortage of vehicles from the pandemic, the registration of the truck, maintenance costs to keep the old food truck in operation while waiting for the new truck, the additional supplies and fuel needed to cover meals gained during pandemic and increased advertising to announce the services offered to meet the needs of this vulnerable population.

IVEDC

Funds were utilized primarily on food costs and food supply containers to expand home delivery meal service by serving everyone who registered. We did not establish a waiting list. All were served. New meal routes were not established. However, the number of meals delivered was increased on several routes. Routes were divided in half as needed - on days when we had sufficient volunteers. More miles traveled by staff delivery drivers increased fuel expenses. If a participant requested more than one meal, especially on Fridays, the extra meals were always provided as requested. No one was denied.

A new stove was purchased for the Carlinville site. The oven was no longer working, and the service technician advised repairs would cost more than a new unit. The purchase was made in June 2021 and the new stove was delivered and installed on 07/01/2021. The purchase price was \$628.00

A refrigerator at the Centralized Kitchen in Carrollton, IL, also stopped working around the same time as the stove in Carlinville. Due to the increased need for food storage a new refrigerator and upright freezer were purchased in June 2021 and delivered on July 1, 2021. The refrigerator purchase price was \$678.00, and the new upright freezer purchase price was \$928.00.

An electric can opener was purchased in May due to the increased number of large (#10 cans) that had to be opened to serve the increased number of program participants, and to reduce the repetitive motion strain on cooks who were previously manually opening 25-30 more cans daily. The purchase price was \$883.98.

PCoA

The Cares Act, FFCRA, and CAA funds helped eliminate wait lists by paying for additional meals. Increased outreach also occurred to additional families in need.

Prairie Council on Aging hired a Spanish speaking Assistant Bread of Love Site Manager. This helped attract the underserved Hispanic population. This person also worked for many years training new employees who immigrated from outside the USA. PCoA is also working to provide services to a Congolese population that speaks French.

The site manager wage at Prairie Council was raised from \$9.50 to \$13 to attract and retain staff.

SSCI

We were not able to add more people to current routes due to decreased volunteers and team members. Individuals on the waiting list have been provided a weekly emergency grocery order. However, we have found that this is not always the best solution. Some participants have difficulty preparing their own meals. We do provide items in the emergency orders that are easy to prepare. These include microwavable items, individual fruit cups, Jell-o cups, and snack packs, etc.

PSA	Expansion and Modifications
8	<p>In St. Clair and Madison counties, fresh produce care packages were provided to HDM participants. The care packages also included cereals and canned food items. AgeSmart also collaborated with senior centers to provide increased access to Senior Farmers Market Nutrition Program for homebound older adults. Utilizing the existing HDM delivery system, fresh produce was delivered to low-income HDM participants. Many congregate dining participants who are unable to drive are receiving meals at home. During the lockdown, HDMs were provided to low-income housing residents who were isolated and unable to shop for food.</p> <p>In FY21, AgeSmart distributed 21,830 Shelf-stable meals to both congregate and HDM participants. Carry-out meals continue to expand offering an additional meal option for at-risk older adults in the region.</p>
9	<p>CEFS The funds allowed us to expand services to meet the increasing need and without it we would have had waiting list. We were able to offer second meals during some of the past year.</p> <p>Comp Services The additional funds received from Coronavirus Aid Relief and Economic Security (CARES) Act Funds and Families First Coronavirus Response Act (FFCRA) and the Consolidated Appropriations Act (CAA) funds enabled services to be expanded to meet the need, however, those funds have been exhausted and additional funds are needed to continue at the current level of service and without having a waiting list.</p> <p>We had to establish a new county route which meant hiring a new driver. We are currently using our vehicle that we used for our congregate site, but once that re-opens, a vehicle will be needed to serve this new route. Our city routes are covered by volunteers, however, due to the lack of volunteers during this time, staff have had to help cover some of those routes which increases our payroll and spreads an already small staff and resources even thinner.</p> <p>BCMW Since last year, BCMW has maintained their routes where they had added new routes and kept them up since starting them last year. We purchased a new vehicle for our Centralia meal site and plan to purchase a vehicle for the Salem meal site when possible. Staff has absorbed the additional duties of covering routes. We will continue to adjust routes or add routes when needed as well as work to get additional staff to meet the need, if funding allows.</p>

PSA	Expansion and Modifications
10	<p>Edwards/Wayne: We provided weekend meals for our seniors</p> <p>Embarras River Basin Authority: Our total meals and number of clients have increased.</p> <p>Hamilton/White: We used the CARES Act Funds, FFCRA Funds, and CAA Funds, to provide 2 meals per day, 7 days a week. To do this, we had to hire 3 new employees and increase the pay of some of our current employees. There were additional costs for food, supplies, gasoline, etc., that these funds helped pay for. In addition, we had borrowed money to purchase delivery vehicles the previous year and we used these funds to help make the payments on these vehicles. Some of the supplies that were purchased with these funds were additional hot boxes to keep the meals warm during delivery.</p> <p>Lawrence: All these additional funds were put into our funding sources and spent as it was received to keep our programs running. When the pandemic hit us so quickly, no one was prepared, and we had no idea in March of 2020 it would have devastated us the way it did. We had chosen to tell our senior who had been faithful congregante members, if they were frightened to go out in public, which they had been advised not to, we would be happy to deliver them our Home Delivered Meals just as we were continuing to deliver those we had always delivered meals to before the pandemic. In the beginning weeks, most of them told us, "no". Slowly, our Congregante Meal Persons began asking for Home Delivered Meals. Soon others in the community who were over 60 began calling to see if they could get meals and regardless of their health, we delivered to them. Our costs skyrocketed. We were able to keep delivering to anyone who called but we were never able to do more than one meal a day and no special diets other than maybe switching one type of dessert for a different type of fruit. With a CAA SBA Loan we were able to acquire, we were able to keep our whole 13 employee throughout this pandemic and keep them from leaving us, even though they got Covid-19 and drawing unemployment, they came back to us after their illness. They could have made so much more on unemployment but they stayed with us, we used the SBA loan and gave them a small increase in salary for 2 months not near as much as unemployment would have given them but a small token of our appreciation of them. They are here because they love our seniors and their jobs. The CAA helped save our staff and our seniors. Only items purchased were heated bags for food transport mentioned in question #1.</p> <p>Wabash: Our HDM's have doubled since the pandemic started, we have had to hire another delivery driver and get our old delivery van running again.</p>
11	<p>The CARES, FFCRA, and CAA funds were used to eliminate waiting lists, expand service areas, and add more older adults to C2 services. Additional meals were provided for those with the most food insecurity. There were also extra frozen meals given out to all meal recipients to ensure a supply of at least 10 days-worth of emergency meals in case a meal site had to close due to Covid-19. Meal sites also utilized funds to purchase freezers to help with storage of extra meals, ovens to allow preparation of more food, and counter tops to allow more room for extra food activity. Vehicles were also purchased as additional meal routes were added. Some Providers also offered an increase in pay to keep employees to ensure enough support for meal preparation and delivery. Each Provider was allowed up to \$15000 for equipment or other additional expenses.</p>

PSA	Expansion and Modifications
12	<p>As part of the COVID-19 strategy, a primary focus of the CDFSS-SS/AAA was to ensure the provision of home delivered meals to older adults who did not have any other resources for obtaining meals which included seniors without available supports to assist them during the “Stay at Home” order. The success of the strategy implemented by DFSS to ensure older adults in Chicago have access to food during the COVID-19 Pandemic resulted in an increase in the HDM Program of more than 60% from the period before the outbreak. Nearly 4,000 clients were added to the program within a two-month period between mid-March of 2020 to mid-May of 2020.</p> <p>Our Home Delivered Meals (HDM) Provider, Open Kitchens, had to scale up their operation to keep pace with the burgeoning client demand including hiring additional staff and leasing and buying new delivery vehicles (customized with oven, refrigerator, and freezer compartments) to accommodate additional routes that were added to the program in order to keep up with daily client enrollments. Additionally, in order to ensure the prevention of the spread of the virus in the facility where the meals were prepared, the HDM provider had to procure triple the number of PPE supplies, purchased thermal cameras that detect fever-like temperatures of staff entering the workplace, and implemented procedures for all employees to be screened for COVID-19.</p> <p>Over 1.5 million meals were provided with the additional COVID related funding including approximately 500,000 shelf stable meals to our HDM clients. The Home Delivered Meals Provider hired temporary staff that was assigned to assemble emergency shelf stable meals for the Home Delivered Meals Program. The shelf stable distribution was intended to provide continued access to meals for seniors in the event there was an interruption or impediment in the delivery of meals to the clients enrolled in the program during the pandemic.</p>
13	<p>a. Re-opening expenses: IDOA issued guidelines in March 2021 encouraging congregate meal sites to re-open on or after July 1, 2021. Precautions and modifications prescribed in the guidelines necessitated the purchase of many items that the sites would not normally require. Some of these items included capital investments. Using CARES Act funding, AgeOptions provided stipends totaling \$327,939 to help meal sites meet the guidelines for the first six months of re-opening. The stipend usage fell into these categories:</p> <ul style="list-style-type: none"> • Additional Staff \$132,346 <ul style="list-style-type: none"> ○ Monitoring client compliance ○ Disinfecting ○ Screening and check-in ○ Added meal service duties • Durable Goods and Equipment \$83,847 <ul style="list-style-type: none"> ○ Refrigerators and freezers ○ Thermal and heated delivery boxes and bags ○ Tables and chairs for proper distancing ○ Tents for increased space or isolated screening areas ○ Electric fans ○ Touchless hand sanitizers • Disposables \$69,414 <ul style="list-style-type: none"> ○ Single-use masks, gloves, face shields and other PPE ○ Disposable plates, sealed plasticware, tablecloths ○ Individual condiment packets ○ Bottled water ○ Hand sanitizer and other disinfectants • Education/Communication/Outreach \$42,332 <ul style="list-style-type: none"> ○ Printing & signage ○ Outreach to participants ○ Outreach, staff/volunteer recruitment ○ Outreach activities/events <p><i>PSA 13 continued on next page...</i></p>

PSA	Expansion and Modifications
13	<p>Emergency funding was also used to pay for expenses sites incurred before they re-opened for in-person dining. One of the largest expenses was the added per-unit meal costs for individualized, sealed packaging for pickup meals. Since re-opening, nutrition sites have continued to order individually packaged meals because the sites cannot predict which clients will want to eat meals on site or take meals to go. Emergency funding was also used to help some HDM sites purchase additional insulated delivery bags or insulated storage boxes due to the increasing demand for HDMs early in FY21.</p> <p>b. Increased Demand for Home Delivered Meals: While the referral rate for home delivered meals declined to pre-pandemic levels in FY21 (see answer to question #1), the number of units delivered increased by 7% (79,000 meals). This was due in part to an increase in 2nd and weekend meals that became available as nutrition sites continued to expand their capacities to meet the needs of increased client loads. If the number of older adults eligible for home delivered meals does not diminish by the time CARES and FFCRA funds are spent, additional funding may be required.</p> <p>AgeOptions anticipates using American Rescue Plan Act (ARPA) funding being provided over the next three years to expand access to nutrition sites and increase therapeutic and culturally appropriate meals. To do so, stable program support for the current demand home delivered meals, and other nutrition programs, will be critical.</p> <p>c. Mom Meals Emergency Program: AgeOptions continued to use emergency funding to provide Mom's Meals to some clients as nutrition sites worked to build capacity and catchup with the surge in demand for home delivered meals. A total of \$67,400 in emergency funds were needed to provide 10,368 Mom's Meals through February 28 in our service area.</p> <p>d. Top Box Foods: Recognizing that many older adults would no longer feel safe going to a grocery store after the pandemic began, AgeOptions used emergency funding to provide grocery deliveries of fresh produce and fruits, frozen meats, and packaged staples. Partnering with local organization Top Box Foods, the program delivered an additional 121,000 units in FY21, requiring a total of \$583,300 in emergency funding. AgeOptions is now entering the second year of a three-year grant award from the Administration on Community Living to study how grocery delivery programs might fit with the Older Americans Act. Additionally, the grant pilot program is studying how grocery deliveries can be tailored to meet medical needs or cultural preferences.</p>

Number of Older Adults Needing Home Delivered Meals in Unserved Areas

The Illinois Department on Aging surveyed the 13 Area Agencies on Aging (AAA) on the estimated number of older adults needing home delivered meals in unserved areas. "Unserved areas" is defined as geographic areas (e.g., rural township areas or neighborhoods in cities, etc.) that are not served by the home delivered meal program due to lack of funding or the need for additional volunteers to deliver the meals.

In Fiscal Year 2022, the Area Agencies on Aging estimate that a total of 909 older adults need home delivered meals in unserved areas of Illinois. In Fiscal Year 2021, this number was 832.

The following pages outline the results of the survey by PSA and by county.

Planning & Service Area	Name of County	Unserved/ Underserved Townships/Communities/ Neighborhoods	# of Older Persons Needing HDMs
01	Boone	Bonus	1
01	Boone	Boone	4
01	Carroll	N/A	0
01	DeKalb	Franklin Township	3
01	DeKalb	Squaw Grove Township	2
01	DeKalb	Shabbona Township	3
01	DeKalb	Genoa Township	4
01	DeKalb	Mayfield township	1
01	DeKalb	Cortland Township	4
01	Jo Daviess	N/A	0
01	Lee	Lee Center	2
01	Lee	Viola	1
01	Lee	W Brooklyn	2
01	Ogle	N/A	0
01	Stephenson	N/A	0
01	Whiteside	N/A	0
01	Winnebago	Durand	3
01	Winnebago	Winnebago	7
01	Winnebago	Pecatonica	8
01	Winnebago	Harrison	2
Total			47

Planning & Service Area	Name of County	Unserved/ Underserved Townships/Communities/ Neighborhoods	# of Older Persons Needing HDMs
02	DuPage	N/A	0
02	Grundy	N/A	0
02	Kane	N/A	0
02	Kankakee	N/A	0
02	Kendall	N/A	0
02	Lake	N/A	0
02	McHenry	N/A	0
02	Will	N/A	0
Total			0
<hr/>			
03	Bureau	N/A	0
03	Henderson	N/A	0
03	Henry	N/A	0
03	Knox	N/A	0
03	LaSalle	N/A	0
03	McDonough	N/A	0
03	Mercer	N/A	0
03	Putnam	N/A	0
03	Rock Island	N/A	0
03	Warren	N/A	0
Total			0
<hr/>			
04	Fulton	N/A	0
04	Marshall	Pattonsburg	5
04	Marshall	Wilburn	1
04	Marshall	Hopewell	5
04	Marshall	LaPrairie	5
04	Marshall	Lawn Ridge	2
04	Marshall	Whitefield	2
04	Peoria	N/A	0
04	Stark	Castleton	5
04	Stark	Duncan	2
04	Stark	Elmira	2
04	Stark	Lombardville	3
04	Stark	Modena	3
04	Tazewell	N/A	0
04	Woodford	El Paso	6
04	Woodford	Eureka	6
04	Woodford	Minonk	5
04	Woodford	Bayview Gardens	2

Planning & Service Area	Name of County	Unserved/ Underserved Townships/Communities/ Neighborhoods	# of Older Persons Needing HDMs
04	Woodford	Congerville	3
04	Woodford	Germantown Hills	6
04	Woodford	Goodfield	4
04	Woodford	Panola	2
04	Woodford	Secor	3
04	Woodford	Spring Bay	3
Total			75
05	Champaign	Ayers	3
05	Champaign	Compromise	9
05	Champaign	Crittenden	3
05	Champaign	East Bend	3
05	Champaign	Kerr	1
05	Champaign	Ogden	8
05	Champaign	Raymond	2
05	Champaign	Stanton	3
05	Champaign	St. Joseph	23
05	Clark	N/A	0
05	Coles	N/A	0
05	Cumberland	N/A	0
05	De Witt	Barnett	13
05	De Witt	Creek	1
05	De Witt	DeWitt	2
05	De Witt	Harp	2
05	De Witt	Rutledge	1
05	De Witt	Texas	9
05	De Witt	Tunbridge	3
05	De Witt	Wapella	3
05	De Witt	Wilson	1
05	Douglas	N/A	0
05	Edgar	Brouilletts Creek	2
05	Edgar	Elbridge	2
05	Edgar	Hunter	2
05	Edgar	Prairie	2
05	Edgar	Stratton	2
05	Ford	Brenton	4
05	Ford	Button	1
05	Ford	Dix	3
05	Ford	Mona	1

Planning & Service Area	Name of County	Unserved/ Underserved Townships/Communities/ Neighborhoods	# of Older Persons Needing HDMs
05	Ford	Pella	2
05	Ford	Rogers	2
05	Ford	Sibley	1
05	Ford	Wall	1
05	Iroquois	Artesia	3
05	Iroquois	Ashkum	3
05	Iroquois	Beaverville	1
05	Iroquois	Chebanse	6
05	Iroquois	Concord	2
05	Iroquois	Crescent	2
05	Iroquois	Danforth	3
05	Iroquois	Douglas	5
05	Iroquois	Fountain Creek	1
05	Iroquois	Iroquois	2
05	Iroquois	Loda	4
05	Iroquois	Lovejoy	1
05	Iroquois	Martinton	2
05	Iroquois	Milks Grove	1
05	Iroquois	Onarga	3
05	Iroquois	Papineau	1
05	Iroquois	Prairie Green	1
05	Iroquois	Ridgeland	1
05	Iroquois	Sheldon	2
05	Iroquois	Stockland	1
05	Livingston	Amity	1
05	Livingston	Avoca	1
05	Livingston	Belle Prairie	1
05	Livingston	Broughton	1
05	Livingston	Chatsworth	3
05	Livingston	Charlotte	1
05	Livingston	Eppards Point	1
05	Livingston	Esmen	1
05	Livingston	Forrest	3
05	Livingston	Germanville	1
05	Livingston	Indian Grove	11
05	Livingston	Long Point	1
05	Livingston	Newton	2
05	Livingston	Nevada	1

Planning & Service Area	Name of County	Unserviced/ Underserved Townships/Communities/ Neighborhoods	# of Older Persons Needing HDMs
05	Livingston	Odell	3
05	Livingston	Owego	1
05	Livingston	Pike	1
05	Livingston	Pleasant Ridge	1
05	Livingston	Rooks Creek	2
05	Livingston	Round Grove	1
05	Livingston	Saunemin	1
05	Livingston	Sullivan	2
05	Livingston	Sunbury	1
05	Livingston	Stawn	1
05	Livingston	Union	1
05	Livingston	Waldo	1
05	McLean	N/A	0
05	Moultrie	Dora	5
05	Moultrie	Lovington	5
05	Moultrie	Low	5
05	Piatt	Cerro Gordo	4
05	Piatt	Sangamon	6
05	Piatt	Unity	3
05	Piatt	Willow Branch	2
05	Shelby	Flat Branch	2
05	Shelby	Penn	2
05	Shelby	Pickaway	2
05	Shelby	Ridge	2
05	Shelby	Rural	2
Total			245
06	Adams	Mendon	10
06	Adams	Ursa	10
06	Adams	Lima	5
06	Adams	Payson	20
06	Adams	Marblehead	10
06	Adams	Camp Point	10
06	Adams	Clayton	5
06	Adams	Golden	5
06	Brown	N/A	0
06	Calhoun	Kampsville	5
06	Calhoun	Michael	3
06	Calhoun	Mozier	3

Planning & Service Area	Name of County	Unservd/ Underserved Townships/Communities/ Neighborhoods	# of Older Persons Needing HDMs
06	Calhoun	Hamburg	4
06	Calhoun	Batchtown	5
06	Calhoun	Brussels	6
06	Calhoun	Golden Eagle	4
06	Hancock	La Harpe area	35
06	Hancock	Nauvoo area	30
06	Pike	Griggsville area	25
06	Pike	Pleasant Hill	15
06	Pike	Nebo area	5
06	Schuyler	N/A	0
Total			215
07	Cass	N/A	0
07	Christian	Bolivia	2
07	Christian	Clarksdale	2
07	Christian	Langleyville	5
07	Christian	Osbernvillle	2
07	Christian	Milleville	2
07	Christian	Rosamond	2
07	Christian	Sharpsburg	2
07	Christian	Sicily	2
07	Christian	Zenobia	2
07	Jersey	Elsah	2
07	Jersey	Fieldon	2
07	Logan	N/A	0
07	Macoupin	Nilwood	2
07	Macoupin	Atwater	2
07	Macoupin	Medora	4
07	Macoupin	Rural Carlinville	6
07	Macoupin	Chesterfield	4
07	Mason	N/A	0
07	Montgomery	Chapman	3
07	Montgomery	Coalton	3
07	Montgomery	Honey Bend	3
07	Montgomery	Schram City	3
07	Montgomery	Vanburensburg	3
07	Morgan	N/A	0
07	Sangamon	Springfield	57
07	Scott	N/A	0
Total			115

Planning & Service Area	Name of County	Unserviced/ Underserved Townships/Communities/ Neighborhoods	# of Older Persons Needing HDMs
08	Bond	N/A	0
08	Clinton	Pocohontas	2
08	Clinton	Shattuc	4
08	Clinton	Boulder	1
08	Clinton	Patoka	3
08	Clinton	Jamestown	1
08	Madison	N/A	0
08	Monroe	N/A	0
08	Randolph	Outskirts of Steeleville & Percy	20
08	St. Clair	Fayetteville	3
08	Washington	N/A	0
Total			34
09	Clay	Hord (Blair Township)	3
09	Clay	Lola (Larkinsburg Township)	3
09	Clay	Sailor Springs	4
09	Clay	Ingraham	3
09	Clay	Wendelin (Pixley Township)	3
09	Effingham	Keptown	4
09	Effingham	Dexter	3
09	Effingham	Gillmore	2
09	Effingham	Funkhouser	8
09	Fayette	Ingram	3
09	Fayette	Bayle City	2
09	Fayette	Schaeffer	2
09	Fayette	Shobnier	3
09	Fayette	Vena	3
09	Fayette	Hagerstown	2
09	Jefferson	Outlying areas of County	12
09	Marion	Luka	8
09	Marion	Outlying areas of County	10
Total			78

Planning & Service Area	Name of County	Unservd/ Underserved Townships/Communities/ Neighborhoods	# of Older Persons Needing HDMs
10	Crawford	N/A	0
10	Edwards	N/A	0
10	Hamilton	McLeansboro	60
10	Jasper	N/A	0
10	Lawrence	N/A	0
10	Richland	N/A	0
10	Wabash	N/A	0
10	Wayne	N/A	0
10	White	Carmi	40
Total			100
11	Alexander	N/A	0
11	Franklin	N/A	0
11	Gallatin	N/A	0
11	Hardin	N/A	0
11	Jackson	N/A	0
11	Johnson	N/A	0
11	Massac	N/A	0
11	Perry	N/A	0
11	Pope	N/A	0
11	Pulaski	N/A	0
11	Saline	N/A	0
11	Union	N/A	0
11	Williamson	N/A	0
Total			0
12	Cook (Chicago)	N/A	0
Total			0
13	Cook (Suburban)	N/A	0
Total			0

Average Number of Older Adults Served Meals Each Day

The Illinois Department on Aging surveyed the 13 Area Agencies on Aging (AAA) on the average number of persons served each day with congregate meals and home delivered meals by nutrition site. An average number of 3,044 persons are served per day by the congregate meal program (based on period from October 1, 2020 to September 30, 2021). Congregate Meal Sites were encouraged to reopen starting July 1, 2021 due to the COVID-19 pandemic. Due to rising numbers of COVID-19 cases in some areas of the state, not all Congregate sites were able to reopen for dine-in service. An average number of 36,252 are served per day by the home delivered meal program (based on period from October 1, 2020 to September 30, 2021).

Planning & Service Area	Name of County	Name of Nutrition Site/ Community	# of Older Persons Served Congregate Meals Each Serving Day	# of Older Persons Served HDMs Each Serving Day
01	Boone	Lifescape - Keen Age Center	35	0
01	Boone	Lifescape - Neds Rest.	45	0
01	Carroll	Goldenmeals	22	92
01	DeKalb	VAC	25	325
01	Jo Daviess	Goldenmeals	0	40
01	Lee	Lifescape - Amboy	9	0
01	Lee	Lifescape - Dixon Senior Center	0	0
01	Ogle	Lifescape - Rochelle	37	0
01	Ogle	Lifescape - Oregon RRC	11	0
01	Stephenson	Goldenmeals	36	202
01	Whiteside	Goldenmeals	0	165
01	Winnebago	Lifescape - Benton St Diner	20	0
01	Winnebago	Lifescape - Gpac	25	0
01	Winnebago	Lifescape - Skyrise	32	15
01	Winnebago	Lifescape - Valley View	25	7
01	Winnebago	Lifescape	0	950
01	Winnebago	Lifescape - Hollywood Rest.	40	0
Total			362	1,796
02	DuPage	Castle Towers - Bensenville	-	120
02	DuPage	Peace Memorial Manor - Downers Grove	-	25
02	DuPage	Glendale Heights Center for Sr. Citizens	-	95
02	DuPage	York Township Senior Center	-	100
02	DuPage	Mercy Housing Marian Park	-	95
02	DuPage	Addison Park District	-	40
02	DuPage	Bloomingtondale Township Sr. Center	-	80
02	DuPage	Alfred Rubin Riverwalk Community Center	-	110
02	DuPage	Westmont Park District	-	170
02	DuPage	Central DuPage Mobile Site	-	35

Planning & Service Area	Name of County	Name of Nutrition Site/ Community	# of Older Persons Served Congregate Meals Each Serving Day	# of Older Persons Served HDMs Each Serving Day
02	DuPage	Northwest DuPage Mobile Site	-	45
02	DuPage	East DuPage Mobile Site	-	40
02	DuPage	Southern DuPage Mobile Site	-	40
02	DuPage	Vaishnav Samaj of Midwest Temple	-	-
02	DuPage	Bawarchi Biryani's Restaurant	-	-
02	DuPage	Shahi Nihari Restaurant	-	-
02	DuPage	Abbington Banquets	-	-
02	DuPage	Abbington Banquets - Asian Meals	-	160
02	DuPage	Downers Grove Township	-	240
02	DuPage	DuPage County Sheriff's Department	-	250
02	Grundy	Saratoga Tower	9	48
02	Grundy	Coal City Lions Club	-	-
02	Grundy	Mazon American Legion	1	-
02	Grundy	Village of Minooka	-	-
02	Grundy	R Place Anytime Meal Voucher	-	-
02	Grundy	Whistle Stop Anytime Meal V.	-	-
02	Grundy	R Place Congregate	1	-
02	Grundy	Whistle Stop Congregate	1	-
02	Kane	Elgin Senior Services Associates	-	100
02	Kane	Green Castle of North Aurora	-	100
02	Kane	United Methodist Church of Geneva	-	75
02	Kane	Truck Aurora 109	-	65
02	Kane	Truck West Kane 110	-	55
02	Kane	Truck North Kane 111	-	65
02	Kane	Truck Elgin 112	-	55
02	Kane	Truck Southwest Kane 113	-	30
02	Kane	Gaslight Manor	-	-
02	Kane	Aurora Senior Services Assoiates	-	30
02	Kane	Springhill Residence - West Dundee	-	25
02	Kane	Elgin Township	-	30
02	Kane	Dundee Township	-	60
02	Kane	Hampshire Township	-	40
02	Kane	Wayne Township	-	50
02	Kane	St. Paul United Methodist Church	-	50
02	Kane	Community Congregational Church - Elburn	-	10
02	Kane	Kane County Cougars	-	50
02	Kane	St. Athanasios Greek Orthodox Church	-	50
02	Kane	Kane County Sheriff's Department	-	200

Planning & Service Area	Name of County	Name of Nutrition Site/ Community	# of Older Persons Served Congregate Meals Each Serving Day	# of Older Persons Served HDMs Each Serving Day
02	Kankakee	Direct Service Waiver-AgeGuide	-	350
02	Kankakee	Pembroke Township	-	-
02	Kankakee	Limestone Township	-	-
02	Kankakee	Sun River Terrace	-	-
02	Kankakee	Kankakee County Community Services Inc.	-	-
02	Kendall	Beecher Center	-	100
02	Lake	Hanul Family Alliance	-	-
02	Lake	N & T's Restaurant	-	-
02	Lake	Foss Park Districk	-	-
02	Lake	Antioch/Lake Villa Township Center	-	-
02	Lake	Nuestro Center	-	-
02	Lake	Lamb's Farm	-	-
02	Lake	Maravela' Banquets	-	-
02	Lake	Island Lake Café	-	-
02	Lake	Grayslake Senior Center	-	-
02	Lake	Antioch Township	-	49
02	Lake	Catholic Charities Round Lake	-	205
02	Lake	Park Place Senior Center-Waukegan Township	-	341
02	McHenry	McHenry Senior Center	-	-
02	McHenry	Walden Oaks Apartment	-	-
02	McHenry	Marengo Park District	-	-
02	McHenry	Dorr Township	-	-
02	McHenry	Maravela's Banquets	-	-
02	McHenry	McHenry Senior Center	-	233
02	McHenry	Walden Oaks Apt.	-	39
02	Will	Central Nutrition Site/Mom's Meals	-	406
02	Will	Frankfort Township	-	30
02	Will	Guy A. Sell	2	46
02	Will	J & S Levy Center	-	99
02	Will	Joshua Arms	-	68
02	Will	Lockport Township	2	58
02	Will	Park Towers	-	10
02	Will	St. Paul UCC	-	65
02	Will	Wilmington Lions Club	-	19
02	Will	Troy Township	-	1
02	Will	Channahon United Methodist Church	-	-
02	Will	Monee Township	-	-
02	Will	Sara's Grill	-	40

Planning & Service Area	Name of County	Name of Nutrition Site/ Community	# of Older Persons Served Congregate Meals Each Serving Day	# of Older Persons Served HDMs Each Serving Day
02	Will	Absolute BBQ	-	40
Total			16	5,032
03	Bureau	Bureau County Senior Center	25	25
03	Henderson	Jamieson Community Center	4	28
03	Henry	Henry Co Senior Citizens	40	280
03	Knox	Galesburg	2	5
03	Knox	Abingdon	15	5
03	Knox	Victoria	2	3
03	LaSalle	La Salle Main	3	148
03	LaSalle	Streator Fornoff Manor	3	80
03	LaSalle	Ottawa Ravlin	20	148
03	LaSalle	Fox Valley Community Center	8	30
03	McDonough	YMCA Senior Center	0	79
03	McDonough	Bushnell Program Center	0	33
03	McDonough	Colchester	0	9
03	Mercer	Mercer County Senior Center	5	0
03	Putnam	Putnam Community Center	5	0
03	Rock Island	Rock Island County Senior Center	7	0
03	Rock Island	Westwood Terrace	10	5
03	Rock Island	Colona House	23	3
03	Rock Island	Edgington	9	0
03	Rock Island	Reynolds	4	0
03	Rock Island	Port Byron	0	0
03	Warren	Jamieson Community Center	10	76
Total			195	957
04	Marshall	Henry Nutrition Site	0	33
04	Marshall	Henry	0	30
04	Marshall	Lacon	0	15
04	Marshall	Sparland	0	6
04	Marshall	Toluca/Varna	0	15
04	Marshall	Lake Wildwood	0	1
04	Marshall	Wenona Nutrition Site	0	0
04	Marshall	Wenona	0	6
04	Stark	Toulon Nutrition Site	0	22
04	Stark	Toulon	0	18
04	Stark	Wyoming Nutrition Site	0	5
04	Stark	Wyoming	0	7
04	Stark	Bradford	0	6

Planning & Service Area	Name of County	Name of Nutrition Site/ Community	# of Older Persons Served Congregate Meals Each Serving Day	# of Older Persons Served HDMs Each Serving Day
04	Stark	LaFayette	0	1
04	Tazewell	Pekin Miller Center	0	0
04	Tazewell	Hopedale	0	0
04	Tazewell	Leisure Acres	0	0
04	Tazewell	Tremont	0	0
04	Woodford	Washburn Nutrition Site	0	0
04	Woodford	Washburn	0	12
04	Woodford	Benson/Roanoke	0	3
04	Woodford	Metamora	0	7
Total				187
05	Champaign	Champaign HDM	-	173
05	Champaign	Rural Champaign	-	47
05	Champaign	Champaign Housing	9	-
05	Champaign	Fisher	-	7
05	Champaign	Homer	2	5
05	Champaign	Ludlow	12	1
05	Champaign	Mahomet	-	20
05	Champaign	Rantoul	11	86
05	Champaign	Sidney	-	5
05	Champaign Special	Champaign County	-	474
05	Clark	Casey	5	33
05	Clark	Martinsville	-	8
05	Coles	Charleston	15	71
05	Coles	LifeSpan	7	0
05	Coles	Mattoon	23	133
05	Coles	Oakland	5	21
05	Cumberland	Toledo	10	61
05	De Witt	Clinton	-	48
05	De Witt	Farmer City Site	1	16
05	De Witt	Farmer City Restaurant	3	-
05	De Witt	Weldon	-	4
05	DeWitt Special	DeWitt County	-	103
05	Douglas	Arcola	-	7
05	Douglas	Atwood	-	13
05	Douglas	Murdock	-	7
05	Douglas	Tuscola	2	25
05	Douglas	Villa Grove	2	11
05	Edgar	Brocton	-	4

Planning & Service Area	Name of County	Name of Nutrition Site/ Community	# of Older Persons Served Congregate Meals Each Serving Day	# of Older Persons Served HDMs Each Serving Day
05	Edgar	Chrisman	-	6
05	Edgar	Hume	-	2
05	Edgar	Kansas	-	11
05	Edgar	Paris	3	21
05	Edgar	Paris Restaurant	10	-
05	Ford	Gibson City	4	4
05	Ford	Paxton	7	15
05	Ford	Roberts	7	7
05	Ford Special	Ford County	-	69
05	Iroquois	Cissna Park	171	15
05	Iroquois	Milford	3	7
05	Iroquois	Watseka	10	-
05	Iroquois Special	Iroquois County	-	576
05	Livingston	Dwight	-	28
05	Livingston	Pontiac	1	36
05	Livingston	Flanagan	-	7
05	Livingston	Streator	-	6
05	Livingston Special	Livingston County	-	88
05	Macon	DMH	-	437
05	McLean	Bloomington HDM	4	290
05	McLean	Bloomington Lincoln Towers	6	12
05	McLean	Bloomington Phoenix Towers	40	25
05	McLean	Bloomington Woodhill Towers	1	23
05	McLean	McLean County Rural	-	41
05	McLean	Chenoa	8	16
05	McLean	Danvers	3	5
05	McLean	LeRoy	2	14
05	McLean	Lexington	7	9
05	McLean	Normal	20	-
05	McLean	Saybrook	19	2
05	McLean	Heyworth	-	11
05	McLean Special	McLean County	-	681
05	Moultrie	Bethany	17	13
05	Moultrie	Sullivan	8	15
05	Piatt	Bement	-	14
05	Piatt	Monticello	4	29
05	Piatt	Mansfield	-	7
05	Piatt Special	Piatt County	-	71
05	Shelby	Findlay	-	6

Planning & Service Area	Name of County	Name of Nutrition Site/ Community	# of Older Persons Served Congregate Meals Each Serving Day	# of Older Persons Served HDMs Each Serving Day
05	Shelby	Herrick	1	20
05	Shelby	Moweaqua	-	7
05	Shelby	Shelbyville	1	54
05	Shelby	Windsor	4	7
05	Vermilion	cris breakfast opened 9/8	5	-
05	Vermilion	cris hdm	-	356
05	Vermilion	hoopeston	-	30
Total			473	4,476
06	Adams	Quincy Senior Center	33	265
06	Adams	Harvest Hills	2	4
06	Adams	Sunset	15	21
06	Adams	Versailles	3	2
06	Adams	Lampe	0	20
06	Brown	Brown County Senior Center	4	15
06	Calhoun	Hardin Senior Center	8	28
06	Hancock	Marion Corner Apartments	2	13
06	Hancock	Hamilton Senior Center	5	24
06	Pike	Findley Place Apartments	2	44
06	Schuyler	Browning Senior Center	2	2
06	Schuyler	Charles Place Apartments	2	13
Total			78	451
07	Cass	Ashland	0	9
07	Cass	Beardstown	9	37
07	Cass	Virginia	0	10
07	Christian	Assumption	0	5
07	Christian	Kincaid	10	14
07	Christian	Morrisonville	7	4
07	Christian	Pana	15	9
07	Christian	Taylorville	25	48
07	Greene	Greene Co. Sr. Ctr.	5	105
07	Greene	Jersey County Sr. Ctr.	6	90
07	Logan	Friendship Manor	0	37
07	Logan	Logan Courts	0	35
07	Logan	Atlanta	0	22
07	Logan	Hartsburg Emden	0	1
07	Logan	Lincoln	0	144
07	Logan	Mt. Pulaski	0	43
07	Logan	New Holland	0	6

Planning & Service Area	Name of County	Name of Nutrition Site/ Community	# of Older Persons Served Congregate Meals Each Serving Day	# of Older Persons Served HDMs Each Serving Day
07	Logan	Silver Strands Sr. Ctr.	6	65
07	Logan	Carlinville Sr. Ctr.	5	45
07	Logan	So. MacoupinSr. Ctr. Benld	1	109
07	Mason	Forest City/Manito	0	20
07	Mason	Havana	0	51
07	Mason	Mason City	0	18
07	Mason	Topeka	0	12
07	Menard	Athens	0	23
07	Menard	Greenview	0	20
07	Menard	Petersburg	40	96
07	Menard	Tallula	10	18
07	Montgomery	Litchfield	0	75
07	Montgomery	Raymond	0	12
07	Montgomery	Witt	0	12
07	Montgomery	Hillsboro	0	60
07	Montgomery	Fillmore	0	9
07	Morgan	Beecher	12	23
07	Morgan	Franklin	0	3
07	Morgan	Laborer's Home	0	18
07	Morgan	Turner	5	58
07	Morgan	Waverly	9	17
07	Sangamon	Auburn	0	25
07	Sangamon	Divernon	0	8
07	Sangamon	Chatham	16	46
07	Sangamon	Pawnee	0	19
07	Sangamon	Sherman/Williamsville	0	18
07	Sangamon	Springfield	154	562
07	Scott	Winchester	0	10
Total			335	2,071
08	Bond	Bond County Senior Center	10	70
08	Clinton	Clinton County Collaborative-Carlyle	9	88
08	Clinton	Clinton County Collaborative-Trenton	13	52
08	Madison	Senior Services Plus	10	917
08	Monroe	WEEOC -Waterloo	3	95
08	Randolph	Northeastern Randolph Senior Center	0	48
08	Randolph	Steeleville Senior Center	25	25
08	Randolph	WEEOC - Chester	13	120
08	St. Clair	Mascoutah Senior Center	15	32

Planning & Service Area	Name of County	Name of Nutrition Site/ Community	# of Older Persons Served Congregate Meals Each Serving Day	# of Older Persons Served HDMs Each Serving Day
08	St. Clair	Millstadt Senior Center	30	117
08	St. Clair	Lessie Bates Seasoned Circle Café	6	340
08	Washington	Washington County Senior Center-Okawville	5	86
08	Washington	Washington County Senior Center-Nashville	5	36
Total			144	2,026
09	Clay	CEFS Flora	21	118
09	Clay	CEFS Louisville	0	19
09	Clay	CEFS Clay City	0	0
09	Effingham	CEFS Altamont	15	57
09	Effingham	CEFS Dieterich	85	109
09	Effingham	CEFS Effingham/Evening Meal	0	0
09	Effingham	CEFS Effingham	22	258
09	Effingham	CEFS Teutopolis	0	59
09	Effingham	CEFS Beecher City	18	44
09	Fayette	CEFS Vandalia	50	229
09	Fayette	CEFS Ramsey	22	50
09	Jefferson	Comprehensive Connections	15	240
09	Marion	BCMW Centralia	45	303
09	Marion	BCMW Salem	30	229
Total			323	1,715
10	Crawford	Crawford Senior Center	24	100
10	Edwards	Albion/Grayville/West Salem	35	110
10	Hamilton	McLeansboro	16	45
10	Jasper	Jasper	19	57
10	Lawrence	Bridgeport/Lawrence/St Francisville/ Sumner	37	192
10	Richland	Richland Senior Center	34	75
10	Wabash	WC Cafeteria & Senior Center	15	120
10	Wayne	Fairfield	25	60
10	White	Carmi	27	130
Total			232	889
11	Alexander	Southern Pride	17	61
11	Franklin	Franklin County Sr Services	24	326
11	Gallatin	Golden Circle	26	68
11	Hardin	Golden Circle	17	65
11	Jackson	Senior Adult Services	50	230

Planning & Service Area	Name of County	Name of Nutrition Site/ Community	# of Older Persons Served Congregate Meals Each Serving Day	# of Older Persons Served HDMs Each Serving Day
11	Jackson	Murphysboro	49	0
11	Johnson	Southern Pride	18	63
11	Massac	Southern Pride	35	61
11	Perry	Gold Plate	0	133
11	Pope	Golden Circle	34	24
11	Pulaski	Southern Pride	15	63
11	Saline	Golden Circle	28	87
11	Union	Southern Pride	22	59
11	Williamson	Williamson Co. Prog. On Aging	75	269
11	Williamson	Andressen's Café	20	0
11	Williamson	Cambria	5	0
Total			435	1,509
12	Cook (Chicago)	Chinese Community Center	-	-
12	Cook (Chicago)	Hanul Family Alliance	2	-
12	Cook (Chicago)	Indo American Center	3	-
12	Cook (Chicago)	Metropolitan Asian Family Serv	3	-
12	Cook (Chicago)	Southeast Asia Center	-	-
12	Cook (Chicago)	Paul G. Stewart Apts.	-	-
12	Cook (Chicago)	Central West Regional Center	12	-
12	Cook (Chicago)	Racine Apts.	-	-
12	Cook (Chicago)	Montrose Baptist Church	-	-
12	Cook (Chicago)	Gaines Apts.	-	-
12	Cook (Chicago)	Judge Green Apts.	-	-
12	Cook (Chicago)	91st & S. Chicago Apts.	-	-
12	Cook (Chicago)	Division/LaSalle Apts.	-	-
12	Cook (Chicago)	Southeast Regional Center	5	-
12	Cook (Chicago)	Northwest Regional Center	12	-
12	Cook (Chicago)	Montclare Senior Residences	-	-
12	Cook (Chicago)	Minnie Riperton Apts.	-	-
12	Cook (Chicago)	Hilliard Apts	-	-
12	Cook (Chicago)	Lincoln Perry Apts.	-	-
12	Cook (Chicago)	Ada S. McKinley Apts.	-	-
12	Cook (Chicago)	Sullivan Apts.	-	-
12	Cook (Chicago)	Vivian Carter Apts.	-	-
12	Cook (Chicago)	Portage Park Satellite	5	-
12	Cook (Chicago)	Southwest Regional Center	2	-
12	Cook (Chicago)	Garfield Ridge Satellite Senior Ct	2	-
12	Cook (Chicago)	Japanese American Service Cent	20	-
12	Cook (Chicago)	Dickens/Burling Apts	-	-

Planning & Service Area	Name of County	Name of Nutrition Site/ Community	# of Older Persons Served Congregate Meals Each Serving Day	# of Older Persons Served HDMs Each Serving Day
12	Cook (Chicago)	Fisher Apts.	-	-
12	Cook (Chicago)	North Center Senior Satellite	2	-
12	Cook (Chicago)	Edgewater Satellite Senior Centr	7	-
12	Cook (Chicago)	Abbott Park Satellite Senior Ctr	5	-
12	Cook (Chicago)	Englewood Senior Satellite Centr	2	-
12	Cook (Chicago)	Clark/Irving Apts.	-	-
12	Cook (Chicago)	Lincoln/Sheffield Apts.	-	-
12	Cook (Chicago)	Schneider Apts.	-	-
12	Cook (Chicago)	Devon/Sheridan Apts.	-	-
12	Cook (Chicago)	West Town Logan Square Satell	12	-
12	Cook (Chicago)	Center on Halsted	20	-
12	Cook (Chicago)	Sheridan/Leland Apts.	-	-
12	Cook (Chicago)	Austin Satellite Senior Center	7	-
12	Cook (Chicago)	Britton Budd Apts.	-	-
12	Cook (Chicago)	Northeast Regional Center	6	-
12	Cook (Chicago)	Pilsen Satellite Senior Center	1	-
12	Cook (Chicago)	South Chicago Satellite Ctr	3	-
12	Cook (Chicago)	Roseland Satellite Senior Ct.	-	-
12	Cook (Chicago)	Auburn Gresham Satellite Ctr	1	-
12	Cook (Chicago)	Chatham Satellite Senior Ctr.	2	-
12	Cook (Chicago)	Norwood Park Satellite	2	-
12	Cook (Chicago)	Kelvyn Park Satellite Ctr.	5	-
12	Cook (Chicago)	Home Delivered Meals Program	-	9,000
Total			141	9,000
13	Cook (Suburban)	AgeOptions direct	-	47
13	Cook (Suburban)	Aging Care Connections	-	48
13	Cook (Suburban)	Aging Care Connections - Salerno's	-	27
13	Cook (Suburban)	American Association of Retired Asians	-	108
13	Cook (Suburban)	Arab American Family Services	-	168
13	Cook (Suburban)	Bremen Township	11	14
13	Cook (Suburban)	Calumet Township	13	81
13	Cook (Suburban)	Catholic Charities Northwest	-	9
13	Cook (Suburban)	Catholic Charities South Suburban	-	67
13	Cook (Suburban)	CCLM - Arlington Heights	15	8
13	Cook (Suburban)	CCLM - Bremen Township	-	279
13	Cook (Suburban)	CCLM - Calumet/Argento	21	3
13	Cook (Suburban)	CCLM - Clyde Park District	7	28
13	Cook (Suburban)	CCLM - Maine & Wheeling Townships	-	186
13	Cook (Suburban)	CCLM - Markham	13	5

Planning & Service Area	Name of County	Name of Nutrition Site/ Community	# of Older Persons Served Congregate Meals Each Serving Day	# of Older Persons Served HDMs Each Serving Day
13	Cook (Suburban)	CCLM - Rich Township	-	92
13	Cook (Suburban)	CCLM - Thornton Township	-	332
13	Cook (Suburban)	City of Evanston - Fleetwood Jourdain	-	15
13	Cook (Suburban)	City of Evanston - Levy Senior Center	8	18
13	Cook (Suburban)	CJE SeniorLife	-	206
13	Cook (Suburban)	CNN - Berwyn & Cicero Townships	-	162
13	Cook (Suburban)	CNN - Bloom Township	-	144
13	Cook (Suburban)	CNN - Brookfield	14	23
13	Cook (Suburban)	CNN - Calumet Township	-	129
13	Cook (Suburban)	CNN - Calumet/Phoenix/Robbins	-	15
13	Cook (Suburban)	CNN - Chicago Heights	9	7
13	Cook (Suburban)	CNN - Dolton	-	12
13	Cook (Suburban)	CNN - Franklin Park	23	11
13	Cook (Suburban)	CNN - Hometown	9	13
13	Cook (Suburban)	CNN - Lemont	11	18
13	Cook (Suburban)	CNN - Lemont Township	-	36
13	Cook (Suburban)	CNN - Leyden Township	-	167
13	Cook (Suburban)	CNN - Lyons Township	-	257
13	Cook (Suburban)	CNN - Melrose Park	16	12
13	Cook (Suburban)	CNN - Proviso Township	-	381
13	Cook (Suburban)	CNN - Schaumburg	12	37
13	Cook (Suburban)	CNN - Worth Township	-	470
13	Cook (Suburban)	Cornerstone Comm. Dev. Center	-	36
13	Cook (Suburban)	Hanover Township	39	149
13	Cook (Suburban)	Hanul Family Alliance	5	114
13	Cook (Suburban)	Kenneth Young Center	-	318
13	Cook (Suburban)	Metro. Asian Family Svc - Niles	1	55
13	Cook (Suburban)	Metro. Asian Family Svc - Schaumburg	9	35
13	Cook (Suburban)	North Shore Senior Center	-	18
13	Cook (Suburban)	Oak Park Township Senior Services	-	310
13	Cook (Suburban)	OPTSS - DineOut	-	3
13	Cook (Suburban)	Our Lady of Mt. Carmel	17	34
13	Cook (Suburban)	Palatine Township Senior Citizens Council	-	70
13	Cook (Suburban)	Pathlights	-	197
13	Cook (Suburban)	Salvation Army Blue Island	-	74
13	Cook (Suburban)	Seniors Assistance Center	-	80
13	Cook (Suburban)	Seniors Assistance Center - Vince's	-	22
13	Cook (Suburban)	Solutions For Care	-	101
13	Cook (Suburban)	Stickney Township Office on Aging	-	174
13	Cook (Suburban)	Stickney Township Office on Aging-LSV	12	104

Planning & Service Area	Name of County	Name of Nutrition Site/ Community	# of Older Persons Served Congregate Meals Each Serving Day	# of Older Persons Served HDMs Each Serving Day
13	Cook (Suburban)	Stickney Township Office on Aging-North	8	53
13	Cook (Suburban)	The Center of Concern - Des Plaines	13	94
13	Cook (Suburban)	Village of Wheeling	12	171
13	Cook (Suburban)	Xilin-China Buffet (Noodle Deli)	-	142
13	Cook (Suburban)	Xilin-Super China Buffet	-	101
13	Cook (Suburban)	YMCA of Berwyn/Cicero	11	52
Total			310	6,143

Type of Congregate Meals Provided

The Illinois Department on Aging surveyed the 13 Area Agencies on Aging (AAA) on the number of congregate meals that were served hot, cold, or frozen (for later reheating). Approximately 91.5% of the congregate meals were hot meals, 8.5% were cold meals, and 0% were frozen meals.

Planning & Service Area	Name of Nutrition Program	Number of Hot Congregate Meals	Number of Cold Congregate Meals	Number of Frozen Congregate Meals	Total Number of Congregate Meals Served
1	Golden Meals - Carrolll	2,920	-	-	2,920
1	Golden Meals - Jo Daviess	-	-	-	-
1	Golden Meals - Stephenson	8,086	-	-	8,086
1	Golden Meals - Whiteside	-	-	-	-
1	Lifescape - Skyrise	600	-	-	600
1	Lifescape - Amboy	107	-	-	107
1	Lifescape - Belvidere	295	-	-	295
1	Lifescape - Benton	13,561	-	-	13,561
1	Lifescape - Dixon Senior Center	-	-	-	-
1	Lifescape - Gpac	292	-	-	292
1	Lifescape - Hollywood Rest	262	-	-	262
1	Lifescape - Neds Rest.	12,397	-	-	12,397
1	Lifescape - Oregon RRC	423	-	-	423
1	Lifescape - Rochelle	502	-	-	502
1	Lifescape - Valley View	769	-	-	769
1	VAC	2,670	1,141	-	3,811
Total		42,884	1,141		44,025
2	Catholic Charities of the Archdiocese of Chicago-Lake Nutrition	-	-	-	-
2	Catholic Charities of the Archdiocese of Chicago-McHenry Nutrition	-	-	-	-
2	Community Nutrition and Network Senior Svcs-Grundy	424	-	-	424
2	Community Nutrition and Network Senior Svcs-Kendall	-	-	-	-
2	Community Nutrition and Network Senior Svcs-Will	306	-	-	306
2	DSW-AgeGuide -Kankakee	-	-	-	-
2	DuPage Senior Citizens Council	-	-	-	-
2	Kane Senior Council	-	-	-	-
Total		730			730

Planning & Service Area	Name of Nutrition Program	Number of Hot Congregate Meals	Number of Cold Congregate Meals	Number of Frozen Congregate Meals	Total Number of Congregate Meals Served
3	Aledo	171	-	-	171
3	Bureau County Senior Center	5,813	-	-	5,813
3	Bushnell Program Center	-	-	-	-
3	Colchester Senior Center	-	-	-	-
3	Colona	917	-	-	917
3	Edgington	238	-	-	238
3	Henry Co Senior Citizens	9,527	-	-	9,527
3	Jamieson Community Center	4,632	-	-	4,632
3	La Salle Main	2,478	1,624	-	4,102
3	Ottawa Ravlin	11,225	6,126	-	17,351
3	Port Byron	-	-	-	-
3	Putnam Community Center	418	-	-	418
3	Reynolds	31	-	-	31
3	Rock Island County	253	-	-	253
3	Sandwich Fox Valley Center	870	-	-	870
3	Streator Fornoff Manor	968	558	-	1,526
3	VNA Community Center	3,846	-	-	3,846
3	Westwood	381	-	-	381
3	YMCA Senior Center	-	-	-	-
Total		41,768	8,308		50,076
4	City of Peoria	-	-	-	-
4	Fulton County	554	-	-	554
4	MSW - Henry Nutrition Site	-	-	-	-
4	MSW - Toulon Nutrition Site	-	-	-	-
4	MSW - Washburn Nutrition Site	-	-	-	-
4	MSW - Wyoming Nutrition Site	-	-	-	-
4	MSW -Wenona Nutrition Site	-	-	-	-
4	Rural Peoria	49	-	-	49
4	Tazewell Pekin Miller Cnt	-	-	-	-
4	Tazewell-Hopedale	-	-	-	-
4	Tazewell-Leisure Acres	-	-	-	-
4	Tazewell-Tremont	-	-	-	-
Total		603			603
5	CRIS	94	-	-	94
5	Macon County Meals on Wheels	-	-	-	-
5	OSF Peace Meal	23,709	-	-	23,709
5	SBL Peace Meal	6,571	-	-	6,571
5	SBL Peace Meal Special	-	-	-	-
Total		30,374			30,374

Planning & Service Area	Name of Nutrition Program	Number of Hot Congregate Meals	Number of Cold Congregate Meals	Number of Frozen Congregate Meals	Total Number of Congregate Meals Served
6	WCI NUTRITION PROJECT	7,176	-	-	7,176
Total		7,176			7,176
7	CAPCIL	-	-	-	-
7	CEFS	3,158	-	-	3,158
7	IVEDC	870	-	-	870
7	PCoA Bread of Love	913	90	-	1,003
7	SSCI	4,430	-	-	4,430
Total		9,371	90		9,461
8	Bond County Senior Center	524	-	-	524
8	Clinton County Collaborative-Carlyle	524	-	-	524
8	Clinton County Collaborative-Trenton	617	-	-	617
8	Lessie Bates Seasoned Circle Café	241	-	-	241
8	Mascoutah Senior Center	854	-	-	854
8	Millstadt Senior Center	3,049	-	-	3,049
8	Northeastern Randolph Senior Center	-	-	-	-
8	Senior Services Plus	570	-	-	570
8	Steeleville Senior Center	1,333	-	-	1,333
8	Washington County Senior Center-Nashville	137	-	-	137
8	Washington County Senior Center-Okawville	194	-	-	194
8	WEEOC - Chester	821	-	-	821
8	WEEOC -Waterloo	130	-	-	130
Total		8,994			8,994
9	Bcmw Comm. Services	-	-	-	-
9	Comp Connections Meals	-	-	-	-
9	Meals on Wheels of Cefs	2,357	-	-	2,357
Total		2,357			2,357

Planning & Service Area	Name of Nutrition Program	Number of Hot Congregate Meals	Number of Cold Congregate Meals	Number of Frozen Congregate Meals	Total Number of Congregate Meals Served
10	Crawford	1,522	-	-	1,522
10	Edwards	35	-	-	35
10	Hamilton	873	-	-	873
10	Jasper	1,192	-	-	1,192
10	Lawrence	647	-	-	647
10	Richland	2,131	-	-	2,131
10	Wabash	1,109	-	-	1,109
10	Wayne	25	-	-	25
10	White	1,494	-	-	1,494
Total		9,028			9,028
11	Alexander	1,094	-	-	1,094
11	Andressen's Café-Williamson	1,290	-	-	1,290
11	Cambria-Williamson	324	-	-	324
11	Eldorado-Saline	2,062	-	-	2,062
11	Franklin	1,561	-	-	1,561
11	Gallatin	1,149	-	-	1,149
11	Hardin	1,242	-	-	1,242
11	Jackson	2,260	-	-	2,260
11	Johnson	1,022	-	-	1,022
11	Massac	2,384	-	-	2,384
11	Murphysboro-Jackson	2,259	-	-	2,259
11	Perry	-	-	-	-
11	Pope	1,906	-	-	1,906
11	Pulaski	1,198	-	-	1,198
11	Saline	2,062	-	-	2,062
11	Union	1,328	-	-	1,328
11	Williamson	4,838	-	-	4,838
Total		27,979			27,979
12	CDFSS/Senior Services Area Agency on Aging -Congregate Dining Program	309	8,413	-	8,722
Total		309	8,413		8,722
13	Bremen Township	306	-	-	306
13	Calumet Township	440	-	-	440
13	CCLM - Arlington Heights	319	-	-	319
13	CCLM - Calumet/Argento	446	-	-	446
13	CCLM - Clyde Park District	148	-	-	148
13	CCLM - Markham	279	-	-	279
13	City of Evanston - Levy Senior Center	502	-	-	502

Planning & Service Area	Name of Nutrition Program	Number of Hot Congregate Meals	Number of Cold Congregate Meals	Number of Frozen Congregate Meals	Total Number of Congregate Meals Served
13	CNN - Brookfield	585	-	-	585
13	CNN - Chicago Heights	374	-	-	374
13	CNN - Franklin Park	974	-	-	974
13	CNN - Hometown	385	-	-	385
13	CNN - Lemont	466	-	-	466
13	CNN - Melrose Park	707	-	-	707
13	CNN - Schaumburg	524	-	-	524
13	Hanover Township	1,302	-	-	1,302
13	Hanul Family Alliance	250	-	-	250
13	Metro. Asian Family Svc - Niles	78	-	-	78
13	Metro. Asian Family Svc - Schaumburg	581	-	-	581
13	Our Lady of Mt. Carmel	903	-	-	903
13	Stickney Township Office on Aging-LSV	708	-	-	708
13	Stickney Township Office on Aging-North	185	-	-	185
13	The Center of Concern - Des Plaines	38	-	-	38
13	Village of Wheeling	763	-	-	763
13	YMCA of Berwyn/Cicero	708	-	-	708
Total		11,971			11,971

Type of Home Delivered Meal Provided

The Illinois Department on Aging surveyed the 13 Area Agencies on Aging (AAA) on the number of home delivered meals that were served hot, cold, frozen (for later reheating), or shelf stable. Approximately 37% of the home delivered meals were hot meals, 32% were cold meals, 27% were frozen meals, and 4% were shelf stable. "Take Out/To-Go" meals represented 11.5% of the total home delivered meals provided statewide.

Planning & Service Area	Name of Nutrition Program	Number of Hot HDM Meals	Number of Cold HDM Meals	Number of Frozen HDM Meals	Number of Shelf-Stable HDM Meals	Total Number of HDM Meals Served	Number of HDMs that were considered "Take Out" or "To-Go"
1	Golden Meals - Carroll	18,572	2,006	5,200	-	25,778	-
1	Golden Meals - Jo Daviess	7,952	7,622	1,017	45	16,636	-
1	Golden Meals - Stephenson	30,534	32,350	4,557	332	67,773	-
1	Golden Meals - Whiteside	27,589	17,307	5,605	256	50,757	-
1	Lifescape	222,132	122,135	40,537	1,000	385,804	-
1	VAC	63,317	5,722	1,554	1,548	72,141	-
Total		370,096	187,142	58,470	3,181	618,889	
2	American Association of Retired Asians	5,842	-	-	-	5,842	-
2	Catholic Charities of the Archdiocese of Chicago-Lake Nutrition	145,407	12,593	9,548	5,526	173,074	48,578
2	Catholic Charities of the Archdiocese of Chicago-McHenry Nutrition	69,851	2,004	1,800	2,155	75,810	19,017
2	Community Nutrition and Network Senior Services -Kendall	19,475	8,789	7,705	435	36,404	1,315
2	Community Nutrition Network & Senior Services Association- Grundy	17,864	9,280	11,608	1,050	39,802	4,052
2	Community Nutrition Network & Senior Services Association- Will	184,424	70	10,831	14,798	210,123	7,605
2	DSW-AgeGuide -Kankakee	-	84,750	-	3,130	87,880	-

Planning & Service Area	Name of Nutrition Program	Number of Hot HDM Meals	Number of Cold HDM Meals	Number of Frozen HDM Meals	Number of Shelf-Stable HDM Meals	Total Number of HDM Meals Served	Number of HDMs that were considered "Take Out" or "To-Go"
2	DuPage Senior Citizens Council	169,274	13,795	107,536	12,455	303,060	62,601
2	Kane Senior Council	101,905	9,706	51,461	11,535	174,607	30,255
Total		714,042	140,987	200,489	51,084	1,106,602	173,423
3	Bureau County Senior Center	5,813	-	-	3,000	8,813	-
3	Bushnell Program Center	8,046	-	-	20	8,066	-
3	Colchester Senior Center	1,498	664	-	-	2,162	5
3	Colona House	115	-	-	-	115	-
3	Henry Co. Senior Citizens	52,271	-	-	3,465	55,736	-
3	Jamieson Community Ctr	17,791	-	6,855	1,988	26,634	-
3	La Salle Main	28,056	23,402	-	610	52,068	-
3	Mercer County	-	6,924	-	-	6,924	-
3	Ottawa Ravlin	15,702	10,093	6,392	1,105	33,292	-
3	Putnam Community Ctr	-	-	1,793	-	1,793	-
3	Rock Island County	6,210	90,783	-	690	97,683	-
3	Sandwich Fox Valley Center	7,595	718	479	153	8,945	-
3	Streator Fornoff Manor	10,012	8,574	-	10	18,596	-
3	VNA Community Center	-	22,298	-	8,520	30,818	319
3	Westwood	88	-	-	-	88	-
3	YMCA Senior Ctr	19,570	154	-	75	19,799	15
Total		172,767	163,610	15,519	19,636	371,532	339
4	City of Peoria Nutrition (Congregate)	14,790	-	-	995	15,785	15,785
4	Fulton County Nutrition (Congregate)	48,110	-	6,878	2,790	57,778	57,778
4	MSW - Benson/Roanoke	524	8	79	10	621	-
4	MSW - Bradford	1,366	14	184	20	1,584	-
4	MSW - Henry	10,515	74	925	169	11,683	4,118
4	MSW - Lacon	3,142	38	242	74	3,496	-

Planning & Service Area	Name of Nutrition Program	Number of Hot HDM Meals	Number of Cold HDM Meals	Number of Frozen HDM Meals	Number of Shelf-Stable HDM Meals	Total Number of HDM Meals Served	Number of HDMs that were considered "Take Out" or "To-Go"
4	MSW - LaFayette	267	3	8	4	282	-
4	MSW - Lake Wildwood	206	2	62	10	280	-
4	MSW - Metamora	1,633	23	300	54	2,010	-
4	MSW - Sparland	1,419	17	203	25	1,664	-
4	MSW - Toluca/Varna	3,018	33	230	64	3,345	-
4	MSW - Toulon	5,459	43	436	66	6,004	1,887
4	MSW - Washburn	2,512	34	233	78	2,857	-
4	MSW - Wenona	741	10	163	26	940	1
4	MSW - Wyoming	2,233	18	214	36	2,501	686
4	NH MOW - City of Peoria	88,145	-	15,791	-	103,936	281
4	NH MOW - Rural Peoria	47,052	-	6,091	-	53,143	-
4	NH MOW - Tazewell	30,823	-	3,155	-	33,978	-
4	Rural Peoria Nutrition (Congregate)	9,118	-	-	400	9,518	9,518
Total		271,073	317	35,194	4,821	311,405	90,054
5	CRIS	-	-	95,924	12,810	108,734	-
5	Macon County Meals on Wheels	111,641	2,315	-	609	114,565	-
5	OSF Peace Meal	256,272	-	530	6,251	263,053	50,764
5	SBL Peace Meal	158,019	-	281	3,829	162,129	21,920
5	Special SBL Peace Meal	54,369	-	-	-	54,369	-
Total		580,301	2,315	96,735	23,499	702,850	72,684
6	WCI NUTRITION PROJECT	127,691	20,415	9,832	1,740	159,678	1,467
Total		127,691	20,415	9,832	1,740	159,678	1,467
7	CAPCIL	25,838	24,136	-	-	49,974	4,190
7	CEFS	70,560	-	-	-	70,560	-
7	IVEDC	99,347	-	-	-	99,347	9,570
7	PCoA	33,437	4,956	-	-	38,393	-
7	SSCI	61,476	54,358	-	2,840	118,674	915
Total		290,658	83,450		2,840	376,948	14,675

Planning & Service Area	Name of Nutrition Program	Number of Hot HDM Meals	Number of Cold HDM Meals	Number of Frozen HDM Meals	Number of Shelf-Stable HDM Meals	Total Number of HDM Meals Served	Number of HDMs that were considered "Take Out" or "To-Go"
8	Bond County Senior Center	19,550	-	3,432	900	23,882	2,869
8	Clinton County Collaborative-Carlyle	22,670	-	150	800	23,620	1,432
8	Clinton Cty Collaborative -Trenton	15,739	-	355	600	16,694	2,667
8	Lessie Bates Seasoned Circle Café	15,588	-	86,056	3,390	105,034	15,588
8	Mascoutah Senior Center	20,186	-	-	450	20,636	9,174
8	Millstadt Senior Ctr	25,802	-	3,384	1,250	30,436	11,247
8	Northeastern Randolph Senior Center	18,514	-	558	490	19,562	7,945
8	Senior Services Plus	2,874	-	238,875	10,100	251,849	2,874
8	Steeleville Senior Center	10,655	-	-	500	11,155	6,558
8	Washington County Senior Center-Nashville	8,031	-	315	260	8,606	2,132
8	Washington County Senior Center-Okawville	16,280	-	5,627	840	22,747	3,247
8	WEEOC - Chester	19,871	-	7,273	1,210	28,354	3,839
8	WEEOC -Waterloo	5,430	-	15,455	1,040	21,925	708
Total		201,190		361,480	21,830	584,500	70,280
9	Bcmw Comm. Svcs	69,859	-	-	50	69,909	18,450
9	Comp Connections Meals	25,863	2,094	263	833	29,053	3,198
9	Meals on Wheels of Cefs	100,867	-	88	2,110	103,065	35,670
Total		196,589	2,094	351	2,993	202,027	57,318
10	Crawford	24,963	-	-	-	24,963	-
10	Edwards	50	-	-	-	50	25
10	Hamilton	19,065	-	-	-	19,065	-
10	Jasper	14,220	-	-	-	14,220	-
10	Lawrence	45,806	-	34	1,841	47,681	-
10	Richland	18,520	-	-	-	18,520	-
10	Wabash	30,631	1,080	4,864	1,200	37,775	5,400

Planning & Service Area	Name of Nutrition Program	Number of Hot HDM Meals	Number of Cold HDM Meals	Number of Frozen HDM Meals	Number of Shelf-Stable HDM Meals	Total Number of HDM Meals Served	Number of HDMs that were considered "Take Out" or "To-Go"
10	Wayne	60	-	-	-	60	10
10	White	41,551	-	-	-	41,551	-
Total		194,866	1,080	4,898	3,041	203,885	5,435
11	Alexander	9,355	-	9,065	-	18,420	4,500
11	Franklin	81,637	-	1,348	-	82,985	7,454
11	Gallatin	27,407	-	801	-	28,208	4,250
11	Hardin	25,167	-	1,226	-	26,393	2,278
11	Jackson	30,615	-	37,961	-	68,576	6,342
11	Johnson	10,686	-	3,483	-	14,169	3,345
11	Massac	20,147	-	4,713	-	24,860	5,012
11	Perry	13,990	-	15,166	-	29,156	9,002
11	Pope	14,011	-	887	-	14,898	2,800
11	Pulaski	16,228	-	6,679	-	22,907	6,103
11	Saline	44,252	-	5,980	-	50,232	4,987
11	Union	23,435	-	3,491	-	26,926	6,012
11	Williamson	80,623	-	-	-	80,623	15,879
Total		397,553		90,800		488,353	77,964
12	CDFSS/Senior Services Area Agency on Aging - Home Delivered Meals Program	440,144	2,512,860	1,844,126	355,320	5,152,450	478,721
Total		440,144	2,512,860	1,844,126	355,320	5,152,450	478,721
13	AgeOptions direct	-	29,575	-	-	29,575	-
13	Aging Care Connections	6,925	5,291	-	355	12,571	-
13	Aging Care Connections - Salerno's	-	5,163	-	-	5,163	5,163
13	American Association of Retired Asians	28	18,005	-	-	18,033	15,153
13	Arab American Family Services	-	18,305	-	37	18,342	18,305
13	Bremen Township	-	-	2,143	205	2,348	2,143
13	Calumet Township	-	20,656	-	-	20,656	20,656
13	Catholic Charities Northwest	-	9,549	-	-	9,549	-
13	Catholic Charities South Suburban	-	72,735	-	-	72,735	-
13	CCLM - Arlington Heights	-	4,064	-	125	4,189	4,064

Planning & Service Area	Name of Nutrition Program	Number of Hot HDM Meals	Number of Cold HDM Meals	Number of Frozen HDM Meals	Number of Shelf-Stable HDM Meals	Total Number of HDM Meals Served	Number of HDMs that were considered "Take Out" or "To-Go"
13	CCLM - Bremen Township	4,926	3,892	61,967	3,260	74,045	-
13	CCLM - Calumet/Argento	-	-	1,744	-	1,744	1,744
13	CCLM - Clyde Park District	-	-	14,397	875	15,272	14,397
13	CCLM - Maine & Wheeling Twps	6,927	5,103	35,547	1,830	49,407	-
13	CCLM - Markham	-	3,069	-	320	3,389	3,069
13	CCLM - Rich Twp	1,372	1,368	20,540	1,230	24,510	-
13	CCLM - Thornton Township	5,125	18,728	60,521	2,640	87,014	-
13	City of Evanston - Fleetwood Jourdain	-	-	2,915	194	3,109	2,915
13	City of Evanston - Levy Senior Center	-	-	5,263	685	5,948	5,263
13	CJE SeniorLife	18,365	-	39,123	2,025	59,513	-
13	CNN - Berwyn & Cicero Townships	36,063	10,493	6,416	1,760	54,732	-
13	CNN - Bloom Twp	24,449	7,882	14,505	-	46,836	-
13	CNN - Brookfield	-	6,305	-	-	6,305	6,305
13	CNN - Calumet Township	31,740	26,857	6,045	-	64,642	-
13	CNN - Calumet/Phoenix/Robbins	-	3,761	-	-	3,761	3,761
13	CNN - Chicago Hts	-	4,615	-	-	4,615	4,615
13	CNN - Dolton	-	1,898	-	60	1,958	1,898
13	CNN - Franklin Park	-	3,270	-	-	3,270	3,270
13	CNN - Hometown	-	3,041	-	-	3,041	3,041
13	CNN - Lemont	-	4,883	-	-	4,883	4,883
13	CNN - Lemont Township	8,015	1,863	462	430	10,770	-
13	CNN - Leyden Twp	38,875	19,003	8,223	2,715	68,816	-
13	CNN - Lyons Twp	58,654	20,165	12,163	3,305	94,287	-
13	CNN - Melrose Park	-	3,168	-	-	3,168	3,168
13	CNN - Proviso Twp	91,429	20,921	11,120	5,235	128,705	-
13	CNN - Schaumburg	-	12,185	-	500	12,685	12,185
13	CNN - Worth Twp	86,548	24,318	12,755	3,660	127,281	-
13	Cornerstone Comm. Dev. Ctr	-	31,068	-	1,042	32,110	6,006
13	Hanover Township	22,366	15,435	4,724	1,510	44,035	10,907

Planning & Service Area	Name of Nutrition Program	Number of Hot HDM Meals	Number of Cold HDM Meals	Number of Frozen HDM Meals	Number of Shelf-Stable HDM Meals	Total Number of HDM Meals Served	Number of HDMs that were considered "Take Out" or "To-Go"
13	Hanul Family Alliance	5,227	9,168	16	400	14,811	9,168
13	Kenneth Young Center	30,190	7,674	49,276	1,000	88,140	-
13	Metro. Asian Family Svc - Niles	-	14,069	-	-	14,069	14,069
13	Metro. Asian Family Svc - Schaumburg	-	8,954	-	-	8,954	8,954
13	North Shore Senior Center	-	19,574	-	-	19,574	-
13	Oak Park Township Senior Services	-	18,681	82,540	3,660	104,881	26,170
13	OPTSS - DineOut	1,113	-	-	-	1,113	1,113
13	Our Lady of Mt. Carmel	-	8,916	-	1,040	9,956	8,916
13	Palatine Township Senior Citizens Council	10,478	-	7,953	356	18,787	-
13	Pathlights	-	23,890	38,245	2,420	64,555	-
13	Salvation Army Blue Island	-	18,734	-	870	19,604	18,734
13	Seniors Assistance Center	19,595	13,382	-	1,535	34,512	-
13	Seniors Assistance Center - Vince's	-	4,529	-	-	4,529	4,529
13	Solutions For Care	-	110,268	-	-	110,268	-
13	Stickney Township Office on Aging	42,096	27,619	-	1,900	71,615	-
13	Stickney Township Office on Aging-LSV	-	26,296	-	625	26,921	26,296
13	Stickney Township Office on Aging-North	-	5,541	-	425	5,966	5,541
13	The Ctr of Concern - Des Plaines	-	-	24,506	44	24,550	24,506
13	Village of Wheeling	-	15,254	-	575	15,829	15,254
13	Xilin-China Buffet (Noodle Deli)	-	21,401	-	-	21,401	21,401
13	Xilin-Super China Buffet	-	25,647	-	-	25,647	25,647
13	YMCA of Berwyn/Cicero	-	7,239	-	1,835	9,074	7,239
Total		550,506	823,470	523,109	50,683	1,947,768	370,448

Congregate Meals - Number of Serving Days per Week

The Illinois Department on Aging surveyed the 13 Area Agencies on Aging (AAA) on the number of serving days that each nutrition program provided with the congregate meal program. Approximately 5% of the nutrition sites served congregate meals 6 to 7 days per week, 72% of the nutrition sites served congregate meals 5 days per week, 9% of the nutrition sites served congregate meals 3 to 4 days per week, and 14% of the nutrition sites served congregate meals 1 or 2 days per week. Congregate Meal sites included those that were open from the period of October 1, 2020 to September 30, 2021. Congregate Meal sites were encouraged to reopen starting July 1, 2021 due to the COVID-19 pandemic. Due to rising numbers of COVID-19 cases in some areas of the state, not all Congregate sites were able to reopen for dine-in service.

Planning & Service Area	Name of Nutrition Program	Number of Sites Serving 6-7 Days per Week	Number of Sites Serving 5 Days per Week	Number of Sites Serving 3-4 Days per Week	Number of Sites Serving 1-2 Days per Week
01	Golden Meals - Carroll	1	1	-	-
01	Golden Meals - JoDavie	1	1	-	-
01	Golden Meals - Stephenson	1	4	-	-
01	Golden Meals - Whiteside	1	1	-	-
01	Lifescape - Dixon	-	1	-	-
01	Lifescape - Rochelle	-	1	-	-
01	Lifescape - Amboy	-	1	-	-
01	Lifescape - Benton St.	1	-	-	-
01	Lifescape - Gpac	-	1	-	-
01	Lifescape - Hollywood	1	-	-	-
01	Lifescape - Keen Age Center	-	1	-	-
01	Lifescape - Ned's Rest.	1	-	-	-
01	Lifescape - Rock River Center	-	1	-	-
01	Lifescape - Skyrise	-	1	-	-
01	Lifescape - Valley View	-	1	-	-
01	VAC	-	1	-	-
Total		7	16		
02	American Association of Retired Asians	-	-	-	2
02	Catholic Charities of the Archdiocese of Chicago-Lake Nutrition	2	-	-	7
02	Catholic Charities of the Archdiocese of Chicago-McHenry Nutrition	-	2	-	3
02	Community Nutrition and Network Senior Services -Kendall	-	-	-	-
02	Community Nutrition and Network Senior Services -Will	-	3	2	5
02	Community Nutrition Network & Senior Services Association-Grundy	2	1	-	3
02	DSW-AgeGuide -Kankakee	-	2	-	2

Planning & Service Area	Name of Nutrition Program	Number of Sites Serving 6-7 Days per Week	Number of Sites Serving 5 Days per Week	Number of Sites Serving 3-4 Days per Week	Number of Sites Serving 1-2 Days per Week
02	DuPage Senior Citizens Council	-	4	1	4
02	Kane Senior Council	-	2	-	1
Total		4	14	3	27
03	Bureau County Senior Center	-	1	-	-
03	Bushnell Program Center	-	-	-	-
03	Colchester Senior Center	-	-	-	-
03	Colona House	-	1	-	-
03	Edgington	-	-	1	-
03	Henry Co. Senior Citizens	-	1	-	2
03	Jamieson Community Center	-	2	1	2
03	La Salle Main	-	-	-	-
03	Mercer County Senior Center	-	1	-	-
03	Ottawa Ravlin	-	-	-	-
03	Port Byron	-	-	-	1
03	Putnam Community Center	-	1	-	-
03	Reynolds	-	-	-	1
03	Rock Island County Senior Center	-	1	-	-
03	Sandwich Fox Valley Center	-	-	-	-
03	Streator Fornoff Manor	-	-	-	-
03	VNA Community Center	-	3	-	-
03	Westwood Terrace	-	1	-	-
03	YMCA Senior Center	-	-	-	-
Total			12	2	6
04	City of Peoria Congregate	-	-	-	-
04	Fulton County Nutrition	-	4	1	-
04	MSW-Henry Nutrition Site	-	-	-	-
04	MSW-Toulon Nutrition Site	-	-	-	-
04	MSW-Washburn Nutrition Site	-	-	-	-
04	MSW-Wenona Nutrition Site	-	-	-	-
04	MSW-Wyoming Nutrition Site	-	-	-	-
04	NH - Hopedale	-	-	-	-
04	NH - Pekin Miller Center	-	-	-	-
04	NH - Tremont	-	-	-	-
04	Rural Peoria Congregate	-	-	1	-
Total			4	2	
05	CRIS	-	1	-	-
05	Macon County Meals on Wheels	-	-	-	-
05	OSF Peace Meal	2	26	-	2

Planning & Service Area	Name of Nutrition Program	Number of Sites Serving 6-7 Days per Week	Number of Sites Serving 5 Days per Week	Number of Sites Serving 3-4 Days per Week	Number of Sites Serving 1-2 Days per Week
05	SBL Peace Meal	-	19	-	-
05	SBL Peace Meal Special	-	-	-	-
Total		2	46		2
06	WCI NUTRITION PROJECT	1	10	1	-
Total		1	10	1	
07	CAPCIL	-	1	12	1
07	IVEDC	-	5	-	-
07	Meals on Wheels of CEFS	-	4	-	-
07	PCoA	-	3	-	-
07	SSCI	-	3	1	-
Total			16	13	1
08	Bond County Senior Center	-	1	-	-
08	Clinton County Collaborative-Carlyle	-	-	1	1
08	Clinton County Collaborative-Trenton	-	1	-	-
08	Lessie Bates Seasoned Circle Café	-	1	-	-
08	Mascoutah Senior Center	-	1	-	-
08	Millstadt Senior Center	-	1	-	-
08	Northeastern Randolph Senior Center	-	1	-	-
08	Senior Services Plus	-	1	-	-
08	Steeleville Senior Center	-	1	-	-
08	Washington County Senior Center-Nashville	-	1	-	-
08	Washington County Senior Center-Okawville	-	1	-	-
08	WEEOC - Chester	-	1	-	-
08	WEEOC -Waterloo	-	1	-	-
Total			12	1	1
09	Bcmw Comm. Services	-	2	-	-
09	Comp Connections Meals	-	1	-	-
09	Meals on Wheels of Cefs	-	7	-	-
Total			10		
10	Crawford	-	2	-	-
10	Edwards	-	3	-	-
10	Hamilton	-	1	-	-
10	Jasper	-	1	-	-
10	Lawrence	-	4	-	-
10	Richland	-	1	-	-

Planning & Service Area	Name of Nutrition Program	Number of Sites Serving 6-7 Days per Week	Number of Sites Serving 5 Days per Week	Number of Sites Serving 3-4 Days per Week	Number of Sites Serving 1-2 Days per Week
10	Wabash	-	1	-	-
10	Wayne	-	1	-	-
10	White	-	1	-	-
Total			15		
11	Alexander	-	1	-	1
11	Franklin	-	1	-	-
11	Gallatin	-	1	-	-
11	Hardin	-	1	-	-
11	Jackson	-	2	-	-
11	Johnson	-	1	-	-
11	Massac	-	1	-	-
11	Perry	-	1	-	2
11	Pope	-	1	-	-
11	Pulaski	-	1	-	-
11	Saline	-	2	-	-
11	Union	-	1	-	-
11	Williamson	-	3	-	-
Total			15		
12	CDFSS/Senior Services Area Agency on Aging	-	23	2	-
Total			23	2	
13	Bremen Township	-	-	1	-
13	Calumet Township	-	1	-	-
13	CCLM - Arlington Heights	-	1	-	-
13	CCLM - Calumet/Argento	-	1	-	-
13	CCLM - Clyde Park District	-	1	-	-
13	CCLM - Markham	-	1	-	-
13	City of Evanston - Levy Senior Center	-	1	-	-
13	CNN - Brookfield	-	1	-	-
13	CNN - Chicago Heights	-	1	-	-
13	CNN - Franklin Park	-	1	-	-
13	CNN - Hometown	-	1	-	-
13	CNN - Lemont	-	1	-	-
13	CNN - Melrose Park	-	1	-	-
13	CNN - Schaumburg	-	1	-	-
13	Hanover Township	-	1	-	-
13	Hanul Family Alliance	-	-	1	-
13	Metro. Asian Family Svc - Niles	-	1	-	-
13	Metro. Asian Family Svc - Schaumburg	-	1	-	-

Planning & Service Area	Name of Nutrition Program	Number of Sites Serving 6-7 Days per Week	Number of Sites Serving 5 Days per Week	Number of Sites Serving 3-4 Days per Week	Number of Sites Serving 1-2 Days per Week
13	Our Lady of Mt. Carmel	-	1	-	-
13	Stickney Township Office on Aging-LSV	-	1	-	-
13	Stickney Township Office on Aging-North	-	-	-	1
13	The Center of Concern - Des Plaines	-	-	1	-
13	Village of Wheeling	-	1	-	-
13	YMCA of Berwyn/Cicero	-	1	-	-
Total			20	3	1

Home Delivered Meals - Number of Serving Days per Week

The Illinois Department on Aging surveyed the 13 Area Agencies on Aging (AAA) on the number of serving days that each nutrition program provided with the home delivered meal program. Approximately 3.5% of the nutrition sites served home delivered meals 6 to 7 days per week, 84% of the nutrition sites served home delivered meals 5 days per week, 7% of the nutrition sites served home delivered meals 3 to 4 days per week, and 5.5% of the nutrition sites served home delivered meals 1 or 2 days per week.

Planning & Service Area	Name of Nutrition Program	Number of Sites Serving 6-7 Days per Week	Number of Sites Serving 5 Days per Week	Number of Sites Serving 3-4 Days per Week	Number of Sites Serving 1-2 Days per Week
01	Golden Meals - Carroll	1	1	-	-
01	Golden Meals - JoDaviess	1	1	-	-
01	Golden Meals - Stephenson	1	4	-	-
01	Golden Meals - Whiteside	1	1	-	-
01	Lifescape	-	1	-	-
01	Lifescape - Skyrise	-	1	-	-
01	Lifescape - Valley View	-	1	-	-
01	VAC	-	3	-	-
Total		4	13		
02	American Association of Retired Asians	-	-	-	2
02	Catholic Charities of the Archdiocese of Chicago-Lake Nutrition	-	3	-	-
02	Catholic Charities of the Archdiocese of Chicago-McHenry Nutrition	-	2	-	-
02	Community Nutrition and Network Senior Services -Kendall	-	1	-	-
02	Community Nutrition Network & Senior Services Association- Grundy	1	-	-	-
02	Community Nutrition Network & Senior Services Association- Will	-	8	-	-
02	DSW-AgeGuide -Kankakee	-	-	-	1
02	DuPage Senior Citizens Council	-	13	-	-
02	Kane Senior Council	-	9	-	-
Total		1	36		3
03	Bureau County Senior Ctr	-	-	-	-
03	Bushnell Program Center	-	1	-	-
03	Colchester Senior Center	-	1	-	-
03	Colona House	-	1	-	-

Planning & Service Area	Name of Nutrition Program	Number of Sites Serving 6-7 Days per Week	Number of Sites Serving 5 Days per Week	Number of Sites Serving 3-4 Days per Week	Number of Sites Serving 1-2 Days per Week
03	Henry Co. Senior Citizens	-	1	-	2
03	Jamieson Community Center	5	-	-	-
03	La Salle Main	-	-	-	-
03	Ottawa Ravlin	-	-	-	-
03	Putnam Community Center	-	1	-	-
03	Rock Island County Senior Center	-	1	-	-
03	Sandwich Fox Valley Center	-	-	-	-
03	Streator Fornoff Manor	-	-	-	-
03	VNA Community Center	-	-	-	-
03	Westwood Terrace	-	1	-	-
03	YMCA Senior Center	-	1	-	-
Total		5	8		2
04	Fulton County Nutrition	-	4	2	-
04	MSW Projects of Henry	-	2	-	-
04	NH Meals on Wheels	-	3	-	-
Total			9	2	
05	CRIS	-	2	-	-
05	Macon County Meals on Wheels	-	1	-	-
05	OSF Peace Meal	2	26	-	2
05	SBL Peace Meal	-	23	-	-
05	SBL Peace Meal	-	26	-	-
Total		2	78		2
06	WCI NUTRITION PROJECT	1	10	1	-
Total		1	10	1	
07	CAPCIL	-	1	12	1
07	IVEDC	-	5	-	-
07	Meals on Wheels CEFS	-	9	-	-
07	PCoA	-	9	-	1
07	SSCI	-	9	1	-
Total			33	13	2
08	Bond County Senior Center	-	1	-	-
08	Clinton County Collaborative-Carlyle	-	1	-	-
08	Clinton County Collaborative-Trenton	-	1	-	-
08	Lessie Bates Seasoned Circle Café	-	1	-	-
08	Mascoutah Senior Center	-	1	-	-

Planning & Service Area	Name of Nutrition Program	Number of Sites Serving 6-7 Days per Week	Number of Sites Serving 5 Days per Week	Number of Sites Serving 3-4 Days per Week	Number of Sites Serving 1-2 Days per Week
08	Millstadt Senior Center	-	1	-	-
08	Northeastern Randolph Senior Center	-	1	-	-
08	Senior Services Plus	-	1	-	-
08	Steeleville Senior Center	-	1	-	-
08	Washington County Senior Center-Nashville	-	1	-	-
08	Washington County Senior Center-Okawville	-	1	-	-
08	WEEOC - Chester	-	1	-	-
08	WEEOC -Waterloo	-	1	-	-
Total			13		
09	Bcmw Comm. Services	-	2	-	-
09	Comp Connections Meals	-	1	-	-
09	Meals on Wheels of Cefs	-	7	-	-
Total			10		
10	Crawford	-	1	-	-
10	Edwards	-	3	-	-
10	Hamilton	-	1	-	-
10	Jasper	-	1	-	-
10	Lawrence	-	1	-	-
10	Richland	-	1	-	-
10	Wabash	-	1	-	-
10	Wayne	-	1	-	-
10	White	-	1	-	-
Total			11		
11	Alexander	-	1	-	-
11	Franklin	-	1	-	-
11	Gallatin	-	1	-	-
11	Hardin	-	1	-	-
11	Jackson	-	2	-	-
11	Johnson	-	1	-	-
11	Massac	-	1	-	-
11	Perry	-	1	-	2
11	Pope	-	1	-	-
11	Pulaski	-	1	-	-
11	Saline	-	2	-	-
11	Union	-	1	-	-
11	Williamson	-	3	-	-
Total			17		2

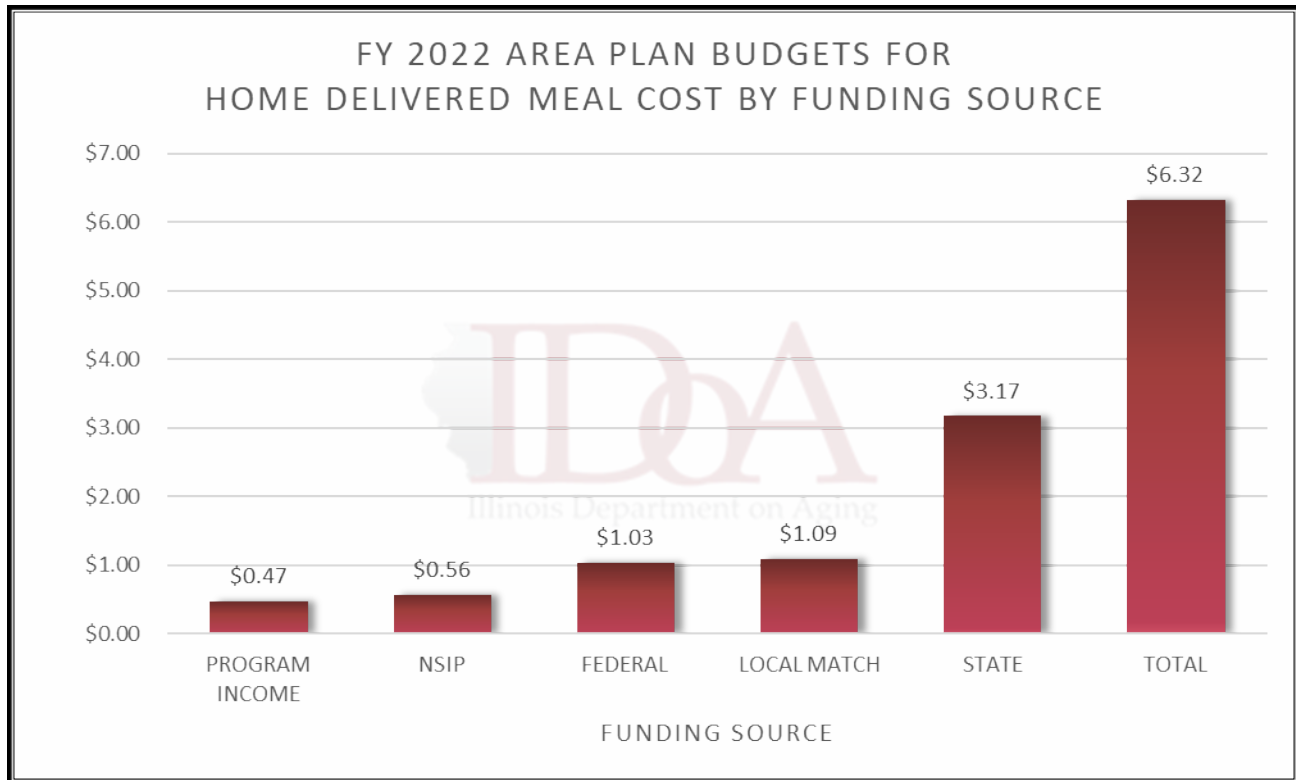
Planning & Service Area	Name of Nutrition Program	Number of Sites Serving 6-7 Days per Week	Number of Sites Serving 5 Days per Week	Number of Sites Serving 3-4 Days per Week	Number of Sites Serving 1-2 Days per Week
12	*CDFSS To Go Meal Program	-	47	2	-
Total			47	2	
*Note: DFSS/Senior Services AAA provides home delivered meals for 2 through 7 days of the week depending on the needs of the clients. All meals are delivered directly to the clients' homes and not to designated nutrition sites.					
13	AgeOptions direct	-	-	-	1
13	Aging Care Connections	-	1	-	-
13	Aging Care Connections - Salerno's	-	1	-	-
13	American Association of Retired Asians	-	-	1	-
13	Arab American Family Services	-	-	1	-
13	Bremen Township	-	-	1	-
13	Calumet Township	-	1	-	-
13	Catholic Charities Northwest	-	-	-	1
13	Catholic Charities South Suburban	-	-	-	1
13	CCLM - Arlington Heights	-	1	-	-
13	CCLM - Bremen Township	-	1	-	-
13	CCLM - Calumet/Argento	-	1	-	-
13	CCLM - Clyde Park District	-	1	-	-
13	CCLM - Maine & Wheeling Townships	-	1	-	-
13	CCLM - Markham	-	1	-	-
13	CCLM - Rich Township	-	1	-	-
13	CCLM - Thornton Township	-	1	-	-
13	City of Evanston - Fleetwood Jourdain	-	-	-	1
13	City of Evanston - Levy Senior Center	-	1	-	-
13	CJE SeniorLife	-	1	-	-
13	CNN - Berwyn & Cicero Townships	-	1	-	-
13	CNN - Bloom Township	-	1	-	-
13	CNN - Brookfield	-	1	-	-
13	CNN - Calumet Township	-	1	-	-
13	CNN - Calumet/Phoenix/Robbins	-	1	-	-
13	CNN - Chicago Heights	-	1	-	-
13	CNN - Dolton	-	-	1	-
13	CNN - Franklin Park	-	1	-	-
13	CNN - Hometown	-	1	-	-
13	CNN - Lemont	-	1	-	-
13	CNN - Lemont Township	-	1	-	-

Planning & Service Area	Name of Nutrition Program	Number of Sites Serving 6-7 Days per Week	Number of Sites Serving 5 Days per Week	Number of Sites Serving 3-4 Days per Week	Number of Sites Serving 1-2 Days per Week
13	CNN - Leyden Township	-	1	-	-
13	CNN - Lyons Township	-	1	-	-
13	CNN - Melrose Park	-	1	-	-
13	CNN - Proviso Township	-	1	-	-
13	CNN - Schaumburg	-	1	-	-
13	CNN - Worth Township	-	1	-	-
13	Cornerstone Comm. Dev. Center	-	-	1	-
13	Hanover Township	-	1	-	-
13	Hanul Family Alliance	-	-	1	-
13	Kenneth Young Center	-	-	1	-
13	Metro. Asian Family Svc - Niles	-	1	-	-
13	Metro. Asian Family Svc - Schaumburg	-	1	-	-
13	North Shore Senior Center	-	-	-	1
13	Oak Park Township Senior Services	-	-	-	1
13	OPTSS - DineOut	1	-	-	-
13	Our Lady of Mt. Carmel	-	-	-	1
13	Palatine Township Senior Citizens Council	-	-	1	-
13	Pathlights	-	-	-	1
13	Salvation Army Blue Island	-	1	-	-
13	Seniors Assistance Center	-	1	-	-
13	Seniors Assistance Center - Vince's	-	-	1	-
13	Solutions For Care	-	-	-	1
13	Stickney Township Office on Aging	-	1	-	-
13	Stickney Township Office on Aging-LSV	-	1	-	-
13	Stickney Township Office on Aging-North	-	-	-	1
13	The Center of Concern - Des Plaines	-	-	-	1
13	Village of Wheeling	-	1	-	-
13	Xilin-China Buffet (Noodle Deli)	-	1	-	-
13	Xilin-Super China Buffet	-	1	-	-
13	YMCA of Berwyn/Cicero	-	1	-	-
Total		1	40	9	11

Local Cash Match and Program Income Resources

Based on Area Plan budgets submitted by the 13 Area Agencies on Aging, local resources (both cash and in-kind) and program income (client contributions) provide significant financial support to the nutrition program. In FY 2022, it is estimated that local match will provide almost \$11 million (17% of total budget) statewide and that program income will provide \$4.6 million (7.5% of total budget) to support the home delivered meal program.

The following charts outline how the various resources are used to fund the average cost of a home delivered meal (HDM) and congregate meals.

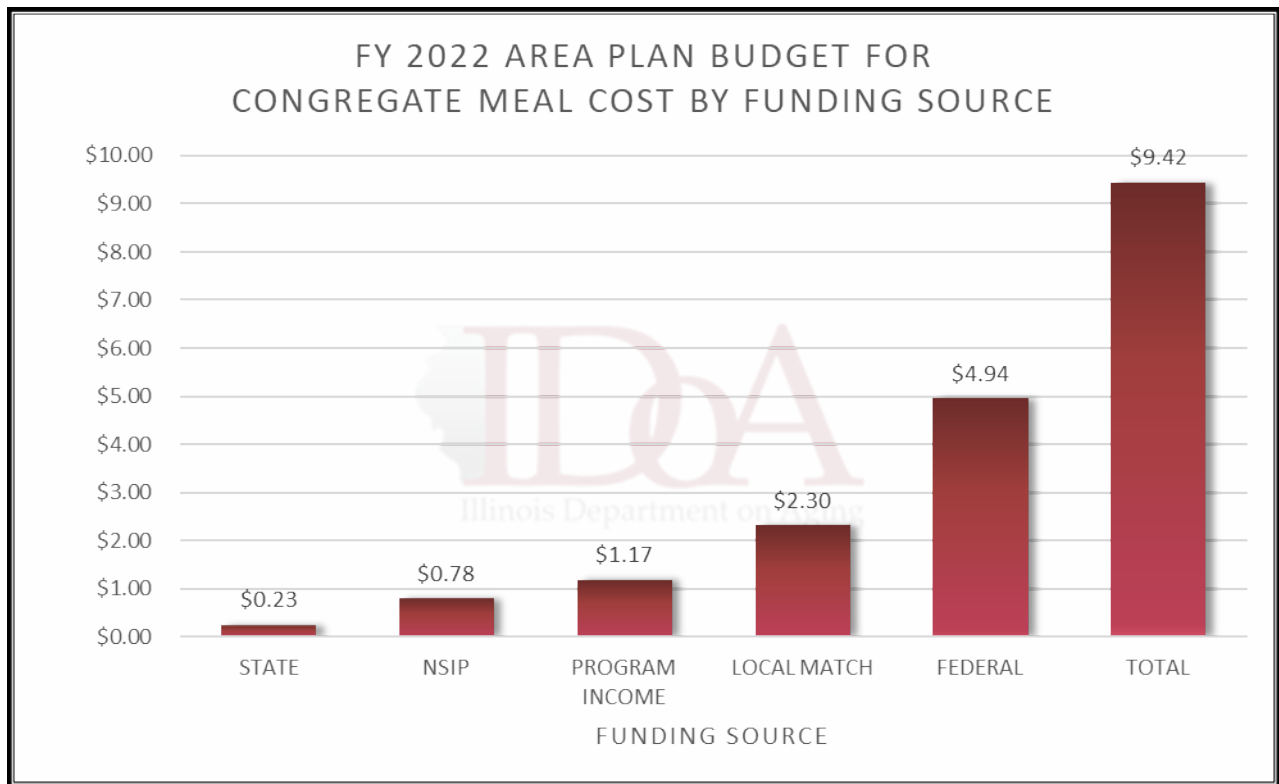


Note: NSIP stands for the Nutrition Services Incentive Program. Meal count used to determine a states allotment under the OAA Title III, Part A (Section 311).

A meal provided to a qualified individual in his/her place of residence through a program that meets all the criteria for payment using OAA funds (see OAA Title III-C):

- Served to an eligible individual, i.e. a person who is qualified to receive services under the OAA as defined in Title III; and
- Served to an eligible person who has NOT been means-tested for participation; and
- Compliant with the nutrition requirements; and
- Served by an eligible agency, i.e. has a grant or contract with a SUA or AAA; and
- Served to a person who has an opportunity to contribute toward the cost of the meal.

Meals served under Title III-E supplemental services may be included if all the above criteria are met. (Source: OAA)



Note: NSIP stands for the Nutrition Services Incentive Program. Meal count used to determine a states allotment under the OAA Title III, Part A (Section 311).

A meal provided to a qualified individual in a congregate or group setting, through a program that meets all the criteria for payment using OAA funds (see OAA Title III-C):

- Served to an eligible individual, i.e. a person who is qualified to receive services under the OAA as defined in Title III; and
- Served to an eligible person who has NOT been means-tested for participation; and
- Compliant with the nutrition requirements; and
- Served by an eligible agency, i.e. has a grant or contract with a SUA or AAA; and
- Served to a person who has an opportunity to contribute toward the cost of the meal.

Meals served under Title III-E supplemental services may be included if all the above criteria are met. (Source: OAA)

FY 2022 Recommendations from the Aging Network on Potential Ways to Increase Federal Funding

The Department on Aging surveyed the 13 Area Agencies on Aging (AAAs) and nutrition service providers on potential ways to increase the amount of federal funding captured for the home delivered meal program. The following page outlines the results of these sections of the survey.

PSA	Recommendations for Potential Ways to Increase Federal Funding
1	<p>VAC</p> <ul style="list-style-type: none"> • Increase local match credit for volunteers • Allow more flexibility for use of Congregate and HDM funding to maximize existing awards. As COVID looks to be with us for a long time to come, traditional congregate services may be forced to shift to accommodate virus mitigation efforts. • Offer an additional allotment of federal funds for capital needs in nutrition programs. Ongoing maintenance and replacement of aged equipment is a struggle to address while also maintaining current services. <p>NICAA</p> <ul style="list-style-type: none"> • More money for lobbyists • Provide more data on the need <p>Lifescape</p> <p>IDOA should be the provider’s main advocate. IDOA has access to federal officials and elected representatives. IDOA should engage the local providers to discover issues they are having.</p> <p>Change the way nutrition is funded. Currently, there are two (2) types of nutrition programs; HDM and Congregate. Many times, congregate is not a feasible way to feed food insecure seniors. If, instead of separating the programs, just fund “Nutrition” and allow local AAA’s to establish the needs in each PSA. More story telling. Our HDM programs are truly remarkable. The public should be made aware of it.</p>
2	<ul style="list-style-type: none"> • Identify participants and their families that benefit from home delivered meals and discuss how receiving meals has allowed them to remain at their own homes and then connect a price saving by not having to place that person in LTC. • Demonstrate that the COVID-19 pandemic uncovered a new group of older adults that are food insecure but do not qualify for home delivered meals and do not choose to attend strictly regulated in-person community dining locations. • Identify additional community resources for program and services for older adults.

PSA	Recommendations for Potential Ways to Increase Federal Funding
3	<p>Henry County Senior Center:</p> <ul style="list-style-type: none"> • More funding for Seniors that want 2 meals a day • More funding for vehicle repairs or replacement. • More funding for better carriers and hot delivery. <p>Jamieson Community Center:</p> <ul style="list-style-type: none"> • Share stories. • Invite our representatives to a meal site or deliver meals for a day. • Quantify the return on investment (i.e. long-term savings healthcare costs covered by Medicaid.) <p>Rock Island County Senior Center:</p> <ul style="list-style-type: none"> • Local Grants. • Make electronic donation available all year for specific grants. • Increase awareness of need via social media, local news, advertisement, etc. throughout the year. <p>Voluntary Action Center (serving Bureau & Putnam – HDM only and LaSalle – both HDM & Cong):</p> <ul style="list-style-type: none"> • Increase local match credit for volunteers. • Allow more flexibility for use of Congregate and HDM funding to maximize existing awards. As COVID looks to be with us for a long time to come, traditional congregate services may be forced to shift to accommodate virus mitigation efforts. • Offer an additional allotment of federal funds for capital needs in nutrition programs. Ongoing maintenance and replacement of aged equipment is a struggle to address while also maintaining current levels. <p>VNA Community Services:</p> <ul style="list-style-type: none"> • Show the inherent need and how it was always there even pre-COVID. • Have Staff and Recipients contact local politicians to inform them of the current need of food insecurity among our seniors. • Speak to State Reps about the need for funding for food and administration costs. <p>YMCA of McDonough County:</p> <ul style="list-style-type: none"> • Share some of the stories of people who have benefited from the service. • Advocate with legislative branches. • Raise awareness of this important service.
4	N/A

PSA	Recommendations for Potential Ways to Increase Federal Funding
5	<p>OSF:</p> <ul style="list-style-type: none"> • Advocacy – education of all the moving parts within the meal program. For example, money to support one piece of funding is often affected by other pieces of the program (we are grateful for all/any financial support), but all spokes of the program need support as they impact each other intricately. For example: increase in HDM clients (need money for kitchen team to prepare food, vehicles to transport food, gas money, vehicle repairs, kitchen equipment, etc., not just the cost of food and food containers). • Advocacy – raising money in local communities. It’s tough to continuously ask local support when many companies/entities/individuals are struggling financially as well. <p>SBL:</p> <ul style="list-style-type: none"> • Advocacy that educates legislators about the non-food associated costs of doing business. The perception appears to be that increased funding must lead to increased meals, while not providing for the infrastructure necessary to make that happen. • Interchangeable or combined funding for C1 and C2 that allow the funds to be used where most needed. • Advocacy that educates legislators about the struggle for raising local cash match in rural areas and areas that do not have foundations, funding sources, etc. <p>CC MOW:</p> <ul style="list-style-type: none"> • Advocacy on the federal level • Have law makers come and see the program in action. • Have law makers interview clients in need <p>CRIS: The only way we know how to increase federal funding is to apply for additional grant funding.</p>
6	<p>Find ways to reduce overhead and other operating costs to stretch existing Title III and NSIP funds. Examples might include:</p> <ul style="list-style-type: none"> • Identify opportunities for grants to be made to municipalities/counties/townships, etc. that could be used to support local OAA nutrition sites by covering operating expenses and upkeep costs for community-owned facilities (e.g. utilities, repairs, pay or subsidize rent). This would reduce costs for the service providers, enabling more Title III/NSIP funds to go to direct service provision. • Explore partnerships with community businesses, organizations, and/or educational institutions (e.g. restaurants, grocery stores, culinary training programs, vocational training providers) and OAA nutrition program service providers/sites to expand capacity and to foster innovation. As in the above example, offsetting startup and/or maintenance costs, along with potentially expanding the pool of staff and/or volunteers, could extend the life of existing Title III grant funds. • Collaborate with the Veterans Administration or other groups serving veterans and their family caregivers to build and/or enhance Meals on Wheels service capacity.

PSA	Recommendations for Potential Ways to Increase Federal Funding
7	<p>CEFS To emphasize: That we are serving a rapidly growing aging population. And that in-home services are much less expensive than costs for those institutionalized in long-term care.</p> <p>IVEDC</p> <ol style="list-style-type: none"> 1. Seek out large corporate funding sponsors, especially those in the food service industry. 2. Offer the opportunity for employees of the U.S Department of Health and Human Services to voluntarily designate a portion of their salaries to a “Feed the People” fund. These funds could be allocated or made available for grant applications. 3. Federal Tax Referendum; increase sales, wealth, taxes, etc. or create laws in which a certain amount of all property taxes collected must be reserved for an account for taking care of the senior populations in all counties. <p>PCoA</p> <ol style="list-style-type: none"> 1. Ask for delivery van funding program to provide related delivery transport. 2. Provide meal choice to participants. 3. Ask for help tracking meals served by allowing programs to purchase bar coding technology. This will lead to less administrative costs and provide more money for food as well as efficient, accurate data entry. <p>SSCI Track the number of individuals on waiting lists due to the shortage of staff and volunteers. We find ourselves, as a not for profit, struggling to recruit team members because of our limitation on competitive wages. Federal funding could allow non-profit organizations to be more competitive, decrease turnover and increase the benefits to our seniors in need. Such funds could help with operating costs (payroll, insurance benefits, etc.), incentives for volunteers and incentives for new employees.</p>
8	<ul style="list-style-type: none"> • Highlight success stories that demonstrate the impact of the program • Analyze and present the measurable outcomes – improved health status
9	<p>CEFS</p> <ul style="list-style-type: none"> • To show we are an aging country • To show that it is cheaper to provide in home services rather than long term care of taxpayers. <p>Comp Services</p> <ul style="list-style-type: none"> • Educate our legislators on the need for these services and ask for more funding. • By decreasing other federally funded programs. • Special funding for special projects. <p>BCMw</p> <p>Highlight the benefits of the meal program, always and especially during the last two Years. The meal program shows that they are one program that is part of being in the lives of persons on a regular basis. The importance of a regular contact in the lives of a person(s) that would otherwise have no-one, along with giving them a nutritious meal. This helps during the time of Social Isolation.</p>

PSA	Recommendations for Potential Ways to Increase Federal Funding
10	<p>Edwards/Wayne: The recommendation would be to redesign the intra-state formulary to funnel some additional dollars for rural community seniors.</p> <p>Hamilton/White: Advocate for passage of human infrastructure bills and educate seniors about which law makers have consistently voted against senior issues. As prices continue to rise on food, gasoline, paper products, etc., increased federal and state funding will be essential in keeping the home delivered meal program going. In addition, we should commemorate and celebrate the Older Americans Act passage and renewal.</p> <p>Lawrence: We need to accommodate meal delivery times and on-site availability for our seniors that are still working full time.</p> <p>The Home Delivered Meal Program is expensive but vital in keeping the cost of caring for seniors down. It is less expensive to deliver a meal than to put a senior in a nursing home for malnutrition because they haven't had a nutritious meal in months and their health has steadily gone downhill.</p> <p>Maybe instead of restructuring congregate centers we need to look at restructuring how meals are offered, schedules of our working seniors</p> <p>and include drive-thru meals. Not everyone lives on a day schedule and not all can attend the congregate sites. They will find a drive-thru but with poor nutrition guidelines, they could utilize ours and meet the 33 1/3 criteria. Those who do not work, could be night owls and still on a night schedule, maybe they would like their breakfast at 3 in the afternoon? Maybe funding for a new type of Home Delivered Meal Program would help everyone more.</p> <p>Wabash: Increase HDM clients, increase number of days served, and increase number of meals served each day</p>
11	<ul style="list-style-type: none"> • Collaborate with AARP, IAA, and other strong advocacy groups to increase the knowledge of federal legislators on the prevalence of malnutrition and the necessity of the meal programs for older adults. Ensure a strong group of lobbyists in Washington by networking with AARP and other strong advocacy groups. • Utilize social media to educate the community about the importance of home-delivered meals. Use human interest stories and get more publicity on the impact this service provides. Find someone well-known to do a public service announcement on the meal services of the OAA. A sports professional or a Tik Tok star who has had a grandmother or someone close to them benefit from the meals do a short ad on the importance of funding HDMs. • Find a university with students interested in doing a study of the health differences between older adults who receive HDMs and those who do not and see if there are better health outcomes for those who receive HDMs. This would be evidence to share with legislators on the importance and necessity of the service.
12	<ul style="list-style-type: none"> • Earmarking new or existing revenue streams toward funding for Home Delivered Meals.

PSA	Recommendations for Potential Ways to Increase Federal Funding
13	<p>Increasing data collection to track the longitudinal benefits of congregate and home delivered meals. The near-daily contact that our providers have with meal recipients represents a unique opportunity to harvest long-term local data on client health. This effort would require an investment of resources (i.e., funding) to collect the data and demonstrate the return on investment for nutrition programs. We would work with IDoA to explore how this might be done effectively and determine funding needs to support the effort.</p> <p>Providing deeper analysis of the needs of our population(s). For example: documenting how many older adults may be unable to attend congregate meal sites because of work or caregiver conflicts. Uncovering these needs may lead to additional service options.</p> <p>Piloting program enhancements to justify additional funding. These could include:</p> <ul style="list-style-type: none"> • Documenting the effects of expanded meal choice to determine if choice affects participation rates, outlook and attitudes, and physical health. Areas to study: • Providing a minimum of two meal choices for general wellness diets each day, both congregate and home delivered. • Offering therapeutic diets (including but not limited to diabetic, renal, and very low sodium) at congregate dining sites. • Making culturally appropriate meals more accessible, perhaps by using restaurant partnerships. • Expanding the Older Americans Act nutrition services to include grocery boxes and accompanying menus. Thanks to a three-year grant from the Administration on Community Living, AgeOptions is currently conducting a pilot program to study how grocery deliveries can become a funded Older Americans Act program. We are targeting the little-studied segment of older adults who may not be benefitting from either congregate or home delivered meals. These include individuals who may live in food deserts and may have limited transportation options or other limits on their mobility away from home. Yet they are still able, willing, and often enthusiastic about cooking for themselves. Now entering the second year of the pilot, we are also exploring how deliveries of fresh produce, fruits, frozen meats, and packaged staples can be tailored to therapeutic needs or cultural preferences.

FY 2022 Recommendations from the Aging Network on Potential Ways to Reach Unserved/Underserved Areas and Special Populations

The Department on Aging surveyed the 13 Area Agencies on Aging (AAAs) and nutrition service providers on potential ways to reach unserved and underserved areas and special populations in the home delivered meal program. The following page outlines the results of these sections of the survey.

PSA	Recommendations for Serving Unserved/Underserved Areas and Special Populations
1	<p>VAC</p> <ul style="list-style-type: none"> • Investment in new systems, such as routing software, has the potential to create delivery efficiencies to allow for more service with current resources. • More standardized tools for outreach will allow a template for better communications with clients within confines of existing staffing. • Development of more partnerships at the regional and state level will offer more resources at the local level to offer to individuals served. <p>NICAA</p> <ul style="list-style-type: none"> • Increase marketing • Hire more drivers • More funding <p>Lifescape</p> <ul style="list-style-type: none"> • Change the Congregate / HDM funding to just “Nutrition” and allow local programs to decide what is the best use of the nutrition funding. • Policy makers should be made to understand the difference between “rural” and “urban” clients. Currently, funding is divided based on population. It is much more efficient to deliver meals in an urban setting. The cost per meal rises exponentially in rural areas. • Understand that small HDM providers are not as equipped to handle “special populations” in rural areas as larger ones are. Cost per meal rates explode with these two populations and smaller organizations may not be equipped to absorb those additional costs.
2	<ul style="list-style-type: none"> • Provide additional meal options, this can include medically- tailored diet options and ethnic meals. • Provide a wider range of meal service. Offer additional funds to cover personnel costs to accommodate meal service times later in the day. Host pick-up Meal Program in the community. • Outreach to older adults of racial ethnic minority for elderly nutrition program.

PSA	Recommendations for Serving Unserved/Underserved Areas and Special Populations
3	<p>Bureau County:</p> <ul style="list-style-type: none"> • Need additional funding to open another congregate meal site. <p>Henry County Senior Center:</p> <ul style="list-style-type: none"> • More funds for vehicles. • More funding to pay for personnel salaries. • More funding for giving them extra food in case of bad weather in the winter. <p>Jamieson Community Center:</p> <ul style="list-style-type: none"> • Increased funding is needed to allow for delivery to unserved and underserved areas. • Increased funding for additional meal choices. • Develop additional relationships between providers. <p>Putnam Achievement Center:</p> <ul style="list-style-type: none"> • Using Outreach to spread the word about the meal site. • Networking with other agencies in your area to identify potential nutrition clients • Short presentations at low-income or senior housing to educate residents about meal programs in their area. <p>Rock Island County Senior Center:</p> <ul style="list-style-type: none"> • Mail Order Meals. • Increase funding, either through donation or fundraising to help for mileage costs for volunteers and/or more paid meal drivers. • Increase canvassing to HDM drivers and volunteers to help increase awareness. <p>Voluntary Action Center (serving Bureau & Putnam – HDM only and LaSalle – both HDM & Cong):</p> <ul style="list-style-type: none"> • Investment in new systems, such as routing software, has the potential to create delivery efficiencies to allow for more service with current resources. • More standardized tools for outreach will allow a template for better communications with clients within confines of existing staffing. • Development of more partnerships at the regional and state level will offer more resources at the local level to offer to individuals served. <p>VNA Community Services:</p> <ul style="list-style-type: none"> • Utilize canvassing techniques to better served the community. • Try to go to areas where you know have a high population of unserved/underserved folks. (i.e. Government housing, adult day care centers, high rises etc.) • Reach out to social groups/agencies that already serve vulnerable and underserved populations. <p>YMCA of McDonough County:</p> <ul style="list-style-type: none"> • Do an informal screening when interacting with clients who come for other services and suggest the meal service if applicable. • Connect with local social workers agencies like hospitals to encourage them to refer people to our program. • Advertise the program in free publications that might reach those in need.
4	<ul style="list-style-type: none"> • Increase funding for additional meal delivery vehicles and associated cost, as well as additional meal delivery drivers to serve outlying areas. Increase funding to serve populations to make up for the added costs associated with modified diets. Increase funding to support expansion of service to less populated areas of all PSA 04 areas served.

PSA	Recommendations for Serving Unserved/Underserved Areas and Special Populations
5	<p>OSF: I think about the locations of where special populations/underserved/unserved areas are located:</p> <ul style="list-style-type: none"> • Funding vehicles - keeping food hot/cold long enough to be food safe upon delivery, having a vehicle available to travel, paying for repairs, oil changes, gas, new tires, etc. • Paid staff – extending service areas - Kitchen team to prepare/plate additional food, kitchen equipment and kitchen space (seeking new location or use of current location), driver(s) available to deliver. <p>SBL:</p> <ul style="list-style-type: none"> • Funding for delivery vehicles (heated and cooled), including maintenance and fuel, to allow for safe transport of meals into isolated/rural areas. • Funding for paid staff for delivery into isolated/rural areas. • Funding for equipment in kitchens to increase capacity. <p>CC MOW:</p> <ul style="list-style-type: none"> • Address the staffing shortages in the workforce. <p>CRIS:</p> <ul style="list-style-type: none"> • We would have additional significant funding marketing campaigns designed for volunteers. • We would have additional significant funding to reimburse them for their mileage.
6	<ul style="list-style-type: none"> • Find ways to build and/or increase mobile service provision and seek out partnerships with groups who may not already be part of the conversation in some areas. Examples might include: • Develop mobile/flexible HDM provision that is less reliant on traditional brick-and-mortar infrastructure. For example, Meals on Wheels “food trucks” (retrofitted school buses) that are self-contained small kitchens, and that could access rural/remote communities unable to be served through typical HDM routes. A mobile unit could provide a hybrid service that offered hot meals a few days a week supplemented with frozen meals. The service schedule would incorporate stops at the “home base” and routes into several underserved communities during the week. • Partner with Centers for Independent Living and other community service providers who work with older adults who are deaf, deaf/mute, blind, or have other disabilities who may not be accessing OAA nutrition services due to barriers, to recruit HDM volunteers who have ASL skills (and to provide for outreach materials in audio format or braille.) • Partner with local mass transit providers to build a “Lunch Hour” program. Transit providers could potentially assign a smaller van to do “lunch duty”, taking Meals on Wheels volunteers around the community to deliver each day of the week. This could expand service route capacity, open up volunteer opportunities to people who don’t drive/don’t have their own cars, etc., and have the added benefit of demonstrating the value/availability of mass transit for potential senior riders.

PSA	Recommendations for Serving Unserved/Underserved Areas and Special Populations
7	<p>CEFS Additional money for mileage of reimbursement of volunteers to reach those areas.</p> <p>Where you live shouldn't matter for services but for very rural areas it's difficult to get volunteers to go that far without reimbursement.</p> <p>IVEDC</p> <ul style="list-style-type: none"> • Grants to award delivery vehicles to providers, along with fuel discounts for agencies providing the service. • Larger pool of volunteers to select from, especially in downstate rural areas, to offer delivery to those who are sparsely located; sometimes driving 20 miles just to serve 5 people in one general area. • IDOA or other IL state agency create committees devoted to delivering meals, throughout the state, on a regular, routine basis. This may be individuals working remotely, volunteers provided by IDOA, IDOA staff and/or relatives, political leaders, advocacy groups, etc. The larger number of individuals devoted to serving others is, the more likely providers will be able to serve ALL. "It takes a village." <p>PCoA</p> <ul style="list-style-type: none"> • Work with PSA07/AgeLinc's Aging and Disability Resource Collaborative (L-ADRC) to have existing programs reach a larger, more diverse populations including NAACP, LGBTQ, Congolese, and Hispanic groups. • Connect with church coalitions to share program services. • Be sure that current staff across all 5 counties (Morgan, Cass, Scott, Greene, and Jersey) are fully educated to coordinate referrals and attend all interagency meetings to disseminate information. <p>SSCI</p> <ul style="list-style-type: none"> • Work with our team members to better educate ourselves about more effectively meeting the needs of those unserved, those underserved, and special populations. • We are working with the local Phoenix Center in Springfield to offer training and education for team members on engaging with the LGBTQ community as well as the importance of diversity and inclusion for all seniors in our service area. • Working to build more positive engagement for our seniors at our congregate sites throughout our service areas. We have seen a significant decline in the number of seniors at the congregate sites. Some of this is because of the closures during the initial onset of COVID, but many seniors are still hesitant to return. We were having discussions about engagement, looking at what interests and needs would bring more seniors to the sites even before COVID. • Working to look at ways to decrease social isolation for our participants.
8	<ul style="list-style-type: none"> • Increase funding to provide additional drivers and routes to cover unserved area. • Campaign/education to inform the public about HDM and dispel the myths and stigma related to the program. • Continue to offer HDM to congregate clients to increase access to nutritious meals.

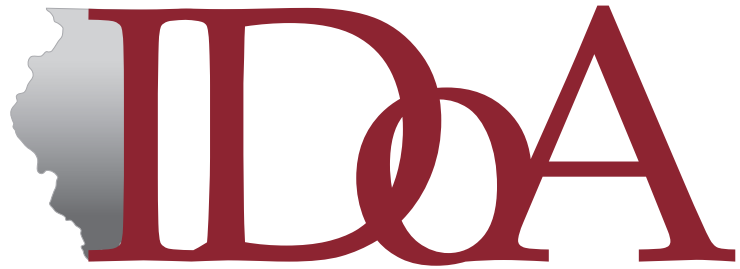
PSA	Recommendations for Serving Unserved/Underserved Areas and Special Populations
9	<p>CEFS</p> <ul style="list-style-type: none"> • Receive additional money just to reimburse volunteers to drive that far in the rural areas five days a week. <p>Comp Services</p> <ul style="list-style-type: none"> • Build a Senior Center in Mt. Vernon. • Expand funding for Congregate and Home Delivered Meals. • Educate Seniors about the Home Delivered Meal Program. <p>BCMw</p> <ul style="list-style-type: none"> • Expand funding for meals, and the additional choices we will have to put in place. Funding for meeting the needs of the existing clients, as well as additional/new clients that we have seen during the past two years.
10	<p>Edwards/Wayne: N/A</p> <p>Hamilton/White: We need to continue to work with other agencies, hospitals, churches, etc. to get the word out to those who need our services. Also, law makers need to remember that just because we have a lower population in the southern part of the state, it is more rural and more expensive for us to provide meals to those who need them. However, we receive considerably less money than those in larger cities. Hamilton County has a population of approximately 8,200 people, and White County has a population of approximately 13,700. Most of these people live in the country on gravel and dirt roads that it can take as long as an hour one-way to get to. This isn't taken into consideration when funding is provided for our centers. Senior citizens in rural areas need our services as much, if not more than those in the big cities. They don't have the other resources and options available to them that those in the city have available. This needs to be considered and addressed when funding is provided to the different centers and PSAs. You can't just look at the number of people served. You must also look at what all went in to serving those people. What works in Chicago, Peoria, or Springfield, does not work in Carmi or McLeansboro. One size fits all does not work and never will work when it comes to providing services for our senior citizens.</p> <p>Lawrence: Our recommendation for serving underserved is to revisit the intra-state funding formula to develop a stronger infrastructure including buildings and regular route transportation.</p> <p>Wabash: Finding available space to provide meals in rural areas.</p>
11	<ul style="list-style-type: none"> • Have printed materials available on the meals and greater flexibility of food options at trusted sites for these populations. This would include local churches, coffee shops, or other locations where rural persons, minorities, or those who socially isolate visit. • Have trusted messengers refer or invite these populations to receive a home-delivered meal and try to arrange for the trusted messengers to deliver the meal the first time. • Utilize outreach staff to focus on going to the areas with these populations to encourage "trying" HDMs for a trial period and assessing for social isolation.
12	<ul style="list-style-type: none"> • Not applicable. We are serving meals citywide.

PSA	Recommendations for Serving Unserved/Underserved Areas and Special Populations
13	<p>Continue the availability of take-out meals. It is difficult to measure the number of younger, over-60 adults who are currently underserved, or perhaps unable to take advantage of current meal programs due to their limited serving times. Increasingly, people are continuing to work full or part-time into their 70's. Many others are time constrained because they care for grandchildren or other older adults. Continuing the availability of take-out meals, especially configurations such as frozen five-packs, will allow many of these time-constrained older adults to take advantage of the program, learn about other services that might be available to them, and feel supported.</p> <ul style="list-style-type: none"> • Expand the use of restaurants as meal sources where underserved populations exist. Established restaurants can offer a low-risk, lower-capital opportunity to create access to nutrition for at least two underserved population segments: <ul style="list-style-type: none"> • Individuals who prefer or require culturally appropriate meals. Ethnic restaurants can provide meals for sit-down dining programs or home delivered programs. • Individual who may live in areas of scarcity for access to fresh foods, meals and, in many cases, individually packaged home delivered meals. They can also offer the advantage of easily offering a daily choice of meals and, in some cases, greater flexibility of dining times. <p>Expand access to therapeutic diets. Projections regarding the increased needs for therapeutic meals were outlined in 1b above. Meeting these needs will require increasing both the type of therapeutic diets available and the number of nutrition providers who offer them:</p> <ul style="list-style-type: none"> • Currently, therapeutic diets are available to HDM clients in our service area. This is because HDMS can be individually packaged and labeled, allowing their accurate distribution to individuals on meal routes. Congregate sites have traditionally used bulk-delivered food, which is plated at the site. Since a limited number of participants would require a therapeutic diet, it would not be practical to order them in bulk. However, since the pandemic, congregate sites have relied on individually packaged meals, making the possibility of including therapeutic diets possible. • As the population ages, the need for different types of diets will continue to increase. While the range of therapeutic diets available in our service area has increased steadily over the past few years, it is essential that we find efficient, cost-effective ways to supply the widest possible array of medically tailored meals to our older adult population.

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**HOME
DELIVERED
MEALS
REPORT**



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