EXTENSION OF NUTRITION PROGRAMS FOR THE ELDERLY, 1974

HEARINGS

BEFORE THE

SUBCOMMITTEE ON AGING

OF THE

COMMITTEE ON
BOR AND PUBLIC WELFARE
UNITED STATES SENATE

NINETY-THIRD CONGRESS

SECOND SESSION

ON

S. 2488, S. 3100, S. 3195 and H.R. 11105

LEGISLATION AMENDING AND EXTENDING NUTRITION PROGRAMS FOR THE ELDERLY

BALTIMORE, MD.
APRIL 26, 1974

WASHINGTON, D.C.
MAY 22 AND 23, 1974

Printed for the use of the Committee on Labor and Public Welfare

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EXTENSION OF NUTRITION PROGRAMS FOR THE ELDERLY, 1974

FRIDAY, APRIL 26, 1974

U.S. SENATE,
SUBCOMMITTEE ON AGING OF THE
COMMITTEE ON LABOR AND PUBLIC WELFARE,
Baltimore, Md.

The subcommittee met, pursuant to notice, at 9:05 a.m., at the Waxter Center, 861 Park Avenue, Baltimore, Md., Senator J. Glenn Beall, Jr., presiding pro tempore.

Present: Senator Beall.

Senator BEALL. Good morning ladies and gentlemen. Our hearing will come to order.

I am happy to be able to chair today's hearing on legislation designed to extend title VII—the nutrition program—of the Older Americans Act of 1965, as amended.

I am pleased that the committee has agreed to convene in Baltimore, and I am especially pleased to be holding these hearings in the Waxter Center.

This comprehensive senior citizen center represents a decade of effort on the part of the people of Baltimore, and it stands today, in the words of Dr. Mason F. Lord, "a place of hope rather than despair."

The people and the government of the city of Baltimore are to be congratulated on their vision and foresight in constructing this excellent facility. The January 1974 edition of the Baltimore Magazine carried an article by James W. Campbell entitled "The Waxter Center: Out of Orange Crates, New Concepts in Care for the Elderly." The text of this article will be printed in the record of this hearing at the conclusion of my opening remarks.

[The texts of the bills under consideration follow:]

93D CONGRESS
1ST SESSION

S. 2488

IN THE SENATE OF THE UNITED STATES

SEPTEMBER 26, 1973

Mr. KENNEDY (for himself and Mr. PERCY) introduced the following bill; which was read twice and referred to the Committee on Labor and Public Welfare

A BILL

To amend title VII of the Older Americans Act of 1965 relating to the nutrition program for the elderly to provide authorization of appropriations, and for other purposes.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, That the first sentence of section 708 of the Older Americans Act of 1965 is amended by striking out the word "and" before "$150,000,000" and by inserting before the period a comma and the following: "$150,000,000 for the fiscal year ending June 30, 1975, $175,000,000 for the fiscal year ending June 30, 1976, and $200,000,000 for the fiscal year ending June 30, 1977.".

II

93D CONGRESS
2D SESSION

S. 2488

IN THE SENATE OF THE UNITED STATES

MAY 1, 1974

Referred to the Committee on Labor and Public Welfare and ordered to be printed

AMENDMENT

Intended to be proposed by Mr. MCGOVERN (for himself, Mr. BURDICK, Mr. CASE, Mr. CLARK, Mr. DOLE, Mr. HUGHES, Mr. SCHWEIKER, and Mr. YOUNG) to S. 2488, a bill to amend title VII of the Older Americans Act of 1965 relating to the nutrition program for the elderly to provide authorization of appropriations, and for other purposes, viz: On page 1, delete line 1 through line 9, and insert in lieu thereof the following:

1 That this Act may be cited as the "Older Americans Nutri-
2 tion Act of 1974".
3 SECTION 1. The first sentence of section 708 of the
4 Older Americans Act of 1965 is amended by striking out the
5 word "and" before $150,000,000 and by inserting before
6 the period a comma and the following: "$150,000,000 for
7 the fiscal year ending June 30, 1975, $200,000,000 for the

1 fiscal year ending June 30, 1976, and $250,000,000 for
2 the fiscal year ending June 30, 1977.".
3 SEC. 2. Section 708 of the Older Americans Act of
4 1965 as amended is hereby redesignated as section 708 (a)
5 and a new subsection 708 (b) is added as follows:
6 "(b) Notwithstanding any other section of law, $35,-
7 000,000 is hereby authorized to be appropriated for the fiscal
8 years ending June 30, 1975, 1976, and 1977 for supportive
9 transportation. Priority should be given to those areas where
10 there is no public transportation available to the participants
11 of the program established under this title.".

93D CONGRESS
2D SESSION

S. 3100

IN THE SENATE OF THE UNITED STATES

MARCH 4, 1974

Mr. BEALL (for himself, Mr. DOMENICI, and Mr. TAFT) introduced the following bill; which was read twice and referred to the Committee on Labor and Public Welfare

A BILL

To amend the Older Americans Act of 1965 to extend the nutrition program for the elderly.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, That section 708 of the Older Americans Act of 1965 (86 Stat. 94; 42 U.S.C. 3045g) is amended in the first sentence thereof (A) by striking out "and" before "$150,000,000", and (B) by inserting after "1974" the following: "and such sums as may be necessary for the succeeding fiscal year".

II

93D CONGRESS
2D SESSION

S. 3195

IN THE SENATE OF THE UNITED STATES

MARCH 20, 1974

Mr. BENTSEN introduced the following bill; which was read twice and referred to the Committee on Labor and Public Welfare

A BILL

To amend title VII of the Older Americans Act relating to the nutrition program for the elderly to provide authorization of appropriations, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*
3 That the first sentence of section 708 of the Older Americans
4 Act is amended by striking out the word "and" before
5 "$150,000,000" and by inserting before the period a
6 comma and the following: "$150,000,000 for the fiscal year
7 ending June 30, 1975, $175,000,000 for the fiscal year
8 ending June 30, 1976, and $200,000,000 for the fiscal year
9 ending June 30, 1977.".

II

93D CONGRESS
2D SESSION

H. R. 11105

IN THE SENATE OF THE UNITED STATES

MARCH 20, 1974

Read twice and referred to the Committee on Labor and Public Welfare

AN ACT

To amend title VII of the Older Americans Act relating to the nutrition program for the elderly to provide authorization of appropriations, and for other purposes.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, That the first sentence of section 708 of the Older Americans Act is amended by striking out the word "and" before "$150,000,000" and by inserting before the period a comma and the following: "$150,000,000 for the fiscal year ending June 30, 1975, $200,000,000 for the fiscal year ending June 30, 1976, and $250,000,000 for the fiscal year ending June 30, 1977".

Passed the House of Representatives March 19, 1974.

Attest: W. PAT JENNINGS,
Clerk.

II

Senator BEALL. Malnutrition and hunger among our Nation's senior citizens may result from a lack of nutritional knowledge, inadequate income, impaired physical mobility, and/or a general lack of motivation due to isolation and alienation.

Congress began to address itself to the special nutritional needs of the elderly in 1968 when it made funds available under title IV of the Older Americans Act for research and demonstration projects designed to provide nutritional services to senior citizens. These research and demonstration projects proved that serving nutritious meals to the elderly facilitated the delivery of other social services while meeting the social and emotional needs of the recipients.

The Panel on Aging of the 1969 White House Conference on Food, Nutrition, and Health recommended the establishment of a permanent congregate nutrition program for the elderly.

In 1972 the Congress passed, and the President signed Public Law 92–258, which added a new title VII to the Older Americans Act. This program was designed to provide one hot nutritious meal per day, 5 days a week, to Americans 60 years of age and over with special emphasis on the needy elderly.

In 1973 Public Law 93–29, the Older Americans Comprehensive Amendments modified Title VII so as to make surplus food commodities available to the nutrition program. In addition, Public Law 93–29 encouraged maximum coordination between title VII and the social services programs authorized under title III.

Fiscal year 1973 funds—$99.6 million—did not become available until July 1, 1973. Thanks to the careful planning of the former Commissioner on Aging, John B. Martin, and the skillful administration of his successor Dr. Arthur S. Flemming, the Administration on Aging was able to obligate all the funds available to this program.

By December 31, 1973, there were 665 nutritional programs across the country. By February 1, 1974, the Administration on Aging reported that approximately 81,000 meals were being served each day to Americans aged 60 and over. Dr. Flemming has predicted that 212,000 meals will be served each day by the end of fiscal year 1974.

Unlike the other provisions of the Older Americans Act, title VII expires on June 30, 1974. The remaining titles do not expire until June 30, 1975. On March 4, I introduced S. 3100 which would extend title VII for 1 additional year, thus making it conform with the rest of Public Law 93–29.

S. 3100 has subsequently been cosponsored by Senators Domenici, Taft, Young, Dole, Hugh Scott, McClure, Tower, Mathias, Hansen, Roth, and Cook. In addition, S. 2488, S. 3195, and H.R. 11105 which provide for 3-year extensions of title VII are also pending before this committee.

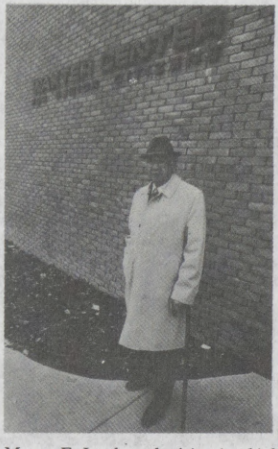
The purpose of today's hearing is to collect data on the functioning of the senior citizens nutrition program so that the Congress will have the information it needs to shape adequate legislation in this area. We have designed today's hearings so as to place maximum attention on the way the nutrition program operates on the State and local levels.

[The Baltimore magazine article referred to follows:]

The WAXTER CENTER

Out of Orange Crates, New Concepts in Care for the Elderly

By James W. Campbell



Greg Pease

"There has to be some other answer to the problems of growing old rather than finding a custodial institution to stick older people until they die. There should be a place where the older person can go for a brief period when he has physical needs, to become stronger so that he can return to independent living . . . a place where the sick older person can be integrated with the healthy person so as to give him the positive therapy that comes from the association with the alert and healthy person . . . a place of hope rather than despair . . ."

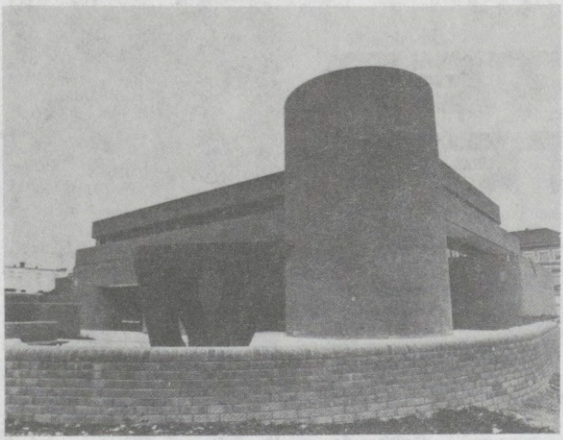
These words written by the late Dr. Mason F. Lord in the early 1960's express the philosophies which will be put into practice at the new Waxter Center for Senior Citizens, the $3.8 million facility which opens this month on the corner of Cathedral and Eager Streets. The Center represents a new approach in providing for the elderly, and it features the latest in design and concepts to serve the senior citizen. That it does is attributable to its long and involved planning process. Indeed, its preparation spanned three decades and involved hundreds of people, including professionals, community leaders and older citizens. They now term the process the longest-running charette in the nation. The new building, by incorporating the suggestions of those it will serve, stands in sharp contrast to existing structures which house elderly patients.

The Waxter Center is not an "institution" in the traditional terms. There are no long corridors, no "institutional" colors, and no bars or grills blocking the doorways and windows. Rather, the building is to be a live-in community, a place where one can go to feel a part of the world and not removed from it. Several design features help create this "real world" environment. For example, there are built-in normal risks throughout — stairs and glass, for instance. Access to the outside is encouraged by the presence of outdoor terraces on the second and third levels. (By being elevated, the terraces are also protected.) Then, too, the size of the facility affords its membership a variety of choices. There will be rooms for those who want to be alone, for those who want to take part in a special activity, and for those who want to mingle in groups. Another feature is the design of the medical section on the third floor, where patients will reside in either two- or three-bed rooms. This brightly-painted area resembles a college dormitory. The rooms are lined up on the outside of a circular corridor. On the inside is the nurses' work area and spaces for the patients to gather. The circular interior is clearly reflected by the Waxter Center's exterior form.

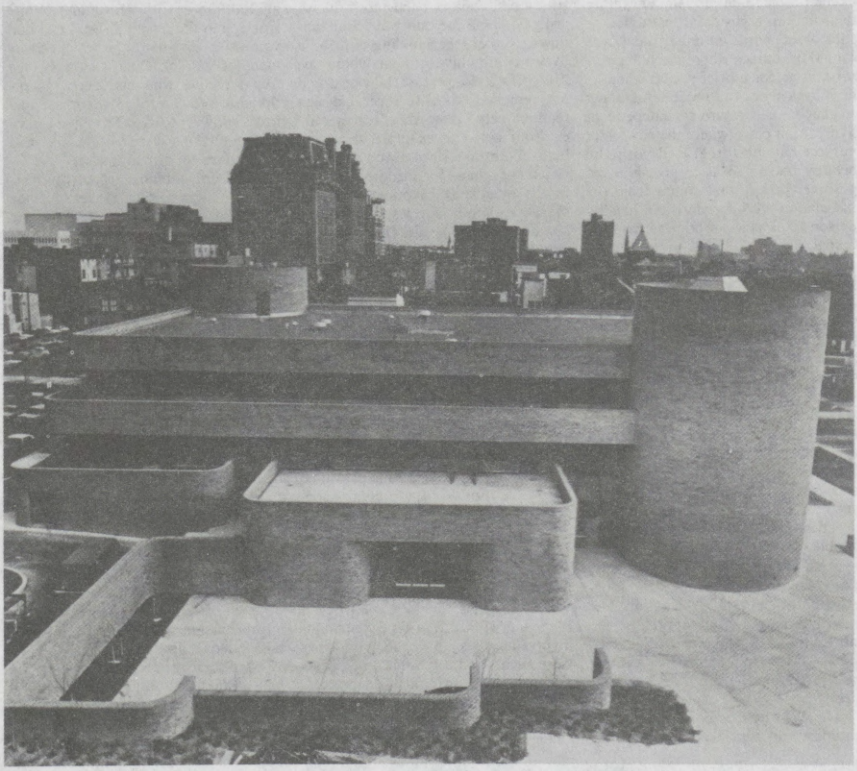
The planning for the Center began in the late 1950's, at a time when non-involvement was in vogue. Minorities were silent, and a generation of beatniks had been turning off for years. Yet non-involvement was not accepted by some. One of those who wanted to change the world was a young doctor, Mason F. Lord, a physician in chief at Baltimore City Hospitals. While working in the hospital, Dr. Lord had witnessed first-hand society's treatment of its sick elderly citizens. He found people who had been institutionalized for up to 15 years and had lost their wills to live. They had grown accustomed to hospital life and had little desire for anything else.

Dr. Lord couldn't accept this pattern of benign neglect. He felt that the chief problem of his patients was the lack of stimulation to want something better. He set out to change things by working both inside and outside the hospital. Inside, he tried to rouse his patients by encouraging them to use their minds. He would argue and force a response by challenging them. Outside, he contacted community leaders to discuss ways to improve services for the elderly. He toured Europe in search of a center which could serve as a model for a facility here, but he was unable to find anything that matched his own concepts.

By the early 1960's, Dr. Lord was on two committees, both of which would be important in helping him achieve his goal of a center where the healthy and ill older citizen could come together. The first group had originally been set up to see that the improvements started at City Hospitals under the late Judge Thomas J. S. Waxter were continued. The Judge had pushed for total medical care for the chronically ill and the acutely ill at City Hospitals, and the follow-up committee was chaired by Esther



(Far left) William Sorrell, 76, is a retired sanitation technician who is also a member of the Waxter Center's planning committee. His involvement with the newly-opened facility began in 1966. (Below) Twin views of the $3.8 million center, at Cathedral and Eager Streets. The two towers provide a modern look to the structure, while the raised terraces afford access outdoors in good weather.



Lazarus, who at the time was the director of the city's Department of Public Welfare. Other representatives were from the Health Department, the Bureau of Recreation, the mayor's office and the city's Commission on Problems of the Aging. This group went on to become the planning unit for the Waxter Center.

Dr. Lord himself was instrumental in forming the second committee, the one which eventually became the board of directors of the Metropolitan Senior Citizens Center. Its responsibility was to develop an effective range of programs for use in a new center.

The two groups which constituted the planning and the program committees for the new Waxter Center worked closely together. They overlapped in many of their responsibilities, and they shared the same problems of those early days. For one thing, they were charting a course through territory which was virtually unexplored. Prior to 1965, federal commitment to the elderly had been minimal, as had been the amount of research in the area. Consequently, the Baltimore committees didn't have much background information to rely on. Also, older people were content to let a youth-oriented society set other priorities. As one committee member said of that period, "Older citizens were satisfied to have their crazy hat parties and not much else."

In 1963, things began to happen. With prodding from the planning group, the city agreed to spend $10,000 on a preliminary design of a center, along with a site selection study and a brochure describing the building. The site examination showed that the Mt. Vernon area would be the most desirable location for the facility. Mt. Vernon was centrally located and close to numerous social and cultural attractions; it also had one of the highest concentrations of doctors' offices in the city. Also, the census revealed this section had a high proportion of elderly — over ten per cent were above the age of 62. Finally, the neighborhood was close to many bus lines.

Once the section was decided upon, the Metropolitan Board began searching for a building where they could begin their pilot programs. One of the board members was The Reverend Warren C. Skip, of the Christ Episcopal Church at St. Paul and Chase. With his help, the Mt. Vernon church agreed to donate the use of its lower level to the project. It included several rooms and a large hall that would be used for dances and lectures.

When the facility was secured, funds were needed to hire a staff to oversee its activities. Again with help from board members, two grants were secured: one for $7,500 and one for $10,000. The money came from the Junior League of Baltimore and the National Council of Episcopal Churches. In addition, the Junior League provided volunteer instructors for the Center's programs.

Shortly thereafter, a search for an executive director was begun. Following several interviews, Leon M. Woolf was named to the top post. His experience included working with older citizens at the Jewish Community Center. The rest of the staff consisted of an administrative assistant, a program coordinator, a secretary, and a part-time instructor.

Finally, in November of 1964, the Metropolitan Senior Citizens Center opened at 1110 St. Paul Street. According to Mr. Woolf, when they began he wasn't sure what programs would work. "We were the first full-time Center for older people in the city and there wasn't much we could call on for proven experience," he said. "For those first few days, all we had were a couple of orange crates and a lot of hope."

The Center was an instant hit. After the first year of operation it boasted a membership of 250. Some of the most popular activities were ballroom and square dancing, foreign language study, and art work. The Center was geared to city residents, and membership dues were $3 a year.

Its flexibility in programming was one reason for its success. If an activity wasn't popular, it was either changed or done away with, and another was found to take its place. In effect, the consumers set the program policy. This same philosophy will be carried over into the new Waxter building.

In 1965, a few months after the opening of the Metropolitan Center, Dr. Lord, only 39, died of a brain tumor. He had seen his dream come partially true — there was a program, but there was no building. If the rest were to come true, it would depend on the commitment of others to his ideas. Before his death, it had been Dr. Lord's desire to name the Center in honor of the late Judge Waxter, in recognition for his work on behalf of the elderly at City Hospitals. (The Judge was the former head of both the City and State Welfare Departments. Until the early 1960's, Baltimore City Hospitals was under the jurisdiction of the City Department of Public Welfare.)

Once the Center had opened and new members started flowing in, it quickly became obvious that this was a concept whose time had come. There would be crises and challenges, but its future was never to be denied. When there was an obstacle, the supporters of the Center would rally and turn defeat into victory. But perhaps its greatest victories were the lives that it touched.

One such person is William Sorrell, a 76-year-old retired sanitation technician. On a warm spring day in 1966, as he was reading, he came across a story about a new activity Center for Senior Citizens in downtown Baltimore. Curious, he told his wife he was going over to "check it out." He found the Center housed in the basement of the church. Inside, the visitor was impressed by "the friendly atmosphere and the fact that everyone was doing something and not sitting around." He saw discussion groups, art classes and a companionship club. He decided to join that very day, and he has returned every week since. He has even become a member of the Center's planning committee.

Mr. Sorrell's decision took on added significance for him after the death of his wife some time later. According to him, the Center provides everything one would get at home, especially companionship. You feel that you are a part of a "family," he says. One of the human acts that Mr. Sorrell remembers most is the funeral services that the Center conducted for three of its members. The deceased had no families of their own.

Another member of the Center and its planning committee is Mrs. Patrick English, 74, who returned to Baltimore in the early 1960's after spending a considerable amount of time traveling around the world. Today, she lives with her husband in Bolton Hill. One of the things that impress her is that the Center brings together people of very diverse backgrounds and incomes in a way that benefits everyone.

After about a year and a half of

operation, the Center had its first money crisis. With a bank account of $400, it needed $7,500 to keep operating until other funds became available. Having nowhere else to turn, its leaders went to the city for help. The Board of Estimates agreed to grant the money, and shutdown was averted. Not only was the money important; support by the city increased the Center's "credibility."

About a year later, in 1967, the Center took an important step. It introduced a bond issue on the ballot for the November elections, which, if approved by the voters, would pay the $3.8 million construction costs of a new building. A campaign committee was organized by Mrs. Pearson L. Sunderland, Jr., a board member, to push for passage of the bond. It was called the Committee for the Waxter Center Loan. "It was the first political effort solely for the benefit of senior citizens in the city's history," Mrs. Sunderland said, adding, "We went to every senior citizen club or organization in the city and encouraged their support." Their efforts paid off on election day when Baltimore voters overwhelmingly approved the Waxter Center.

Although the money was approved by the voters, other city priorities would keep ground from being broken for four years. In the meantime, the group received additional recognition that contributed significantly to its prestige. For example, the first federal funds to be dispersed under the Older American Act were granted to the Metropolitan Senior Citizens in 1968. This $10,000 allocation enabled additional programs to be started.

In 1969, when another financial crisis threatened to close the Center, its members turned near disaster into celebration. As their funds were near depletion, they went to the United Fund of Central Maryland for aid. The Fund made the $7,500 emergency grant to keep it operating. The allocation was renewed the following two years. The Fund's grant was considered the final step in achieving full community recognition and support.

Now, as the Metropolitan Center discontinues its operation at 1110 St. Paul Street, it takes with it to its new building a package of tested programs to serve the additional members who will come to the new municipal structure. (The change of quarters will also symbolize an essential transformation: once in its new structure, the Center will become a city agency. Its director will become the deputy director of the city's Committee on Aging.)

The Planning Committee finished its effort after construction began in early 1972. It had completed ten years of work. Miss Lazarus, who was chairman for part of the time and co-chairman for the rest with Mrs. Sunderland, feels that her group stressed "planning for people" as much as the physical planning. "All of our input was in terms of what would be best for the people who would use the facility," she said.

Mr. Sorrell, a member of the planning unit, feels that the process was diluted when the city failed to provide the money for the Center when the voters approved it in 1967. The delay forced the bond measure to go before the voters again in 1971, after the interest rates rose above the legally-permissible five per cent that had been voted in 1967. It required another election to pass the bonds at the higher rate, causing additional postponement of construction. Although the bond was passed the second time, inflation had cut deeply into much of what had

Continued on page 60

Senior Citizens discuss the future at the Christ Episcopal Church meeting hall.

Brenda Edelson and Bill Bigel with Baltimore's new art museum.

WAXTER CENTER

continued from page 25

been planned originally.

Some of the changes pointed out by Mr. Sorrell include a two-thirds reduction in the number of beds because of a cutback in the amount of space available. (The number of beds was reduced from 75 to 27.) Also, there are no self-defrosting sidewalks as were originally planned. The parking lot is reduced, as is the size of the swimming pool. Of particular concern to Mr. Sorrell is the elimination of the underground parking. "Now," he says, "if someone dies, they will have to be taken through the Center, where people will be congregating. With underground parking, no one would see the casket."

Despite these drawbacks, the Center will be one of the most unique buildings for older people in the state. According to Mrs. English, it will be a profusion of colors, and the furnishings "won't look anything at all like an institution, but rather like your home."

A walk through the Center seems to confirm her remarks. On the first level there are brightly painted offices for referral help and intake. (Mr. Woolf hopes that two social workers can be added to the staff for this purpose.) In front of the offices along the east wall will be space for internal fairs, similar to outdoor street fairs. At the south end of the first floor is the 200-seat auditorium for movies, dancing and card playing. Adjacent to this is the 140-seat dining area which opens onto a tree-lined terrace for outdoor dining.

On the second floor is a creative skills room which will include art supplies, a kiln and other ceramics equipment. Next door there is a library-lounge which will provide books, a ping-pong table and a television set. Both rooms have an outdoor terrace. At the opposite end of the hall is an apartment therapy room. According to Mr. Woolf, this room could help those who have been institutionalized for a long while to re-adjust to apartment life. Or, it could help train someone living alone to get used to a handicap such as an arthritic hand that prevents him from turning on a faucet. Across from this is the physical therapy room with a swimming pool, which will be called the health club.

On the third floor is the medical section and the offices of the city's Commission on Aging. In addition to the 27 beds, there will be dental labs and an eye, ear, nose and throat specialist. A full-time health administrator and a part-time medical director will coordinate health services. Flexibility and demand again will be the key as to who will be able to use the beds for what purpose. One suggestion is that the beds be used by those persons who have been institutionalized for a long time and are nearing their release. The Center could prepare them for a return to their everyday world.

The building is bright throughout, and there's a panorama of light colors. In fact, the sections are designated by their hues, and there are several color charts to direct people. The system will be especially helpful to those with weak eyes. Another feature is the large elevators that will comfortably accommodate wheel chairs.

One of the activities that received national recognition for the Metropolitan Center was its Centercare project. This was an experiment most clearly based on the philosophies of Dr. Lord. Centercare sought to discover what would happen when chronically ill patients nearing discharge from a hospital or institution were mingled with healthy people. This project tried to prepare the patient for a normal entry back into society. The experiment involved patients from Baltimore City Hospitals and volunteers from the Center. Each volunteer was assigned to a patient, and together they exchanged visits between the Center and the hospital. Patients were treated as regular members of the Center.

The results showed how the patients profited by being in an active environment with healthy people. Their psychological well-being was enhanced, and they felt more socially useful. Further, the patients said their health had improved.

Even the volunteers showed improvements during the experiment. Their personal fears about being institutionalized were reduced, and they felt more useful because of the assistance they provided to the patients.

The planning sessions and experiments now belong to history. But, unlike other buildings whose design and placement are based on economics or government fiat, the Waxter Center for Senior Citizens is based on the response of those it will serve. The structure is the culmination of more than ten years of listening, testing, and just plain work. As Mrs. Sunderland says of the planning, "We literally wrapped walls around a concept."

The Waxter Center concept is now preparing to serve Baltimore city residents over 60 years of age. When Mr. Sorrell was asked how he feels now that his work is over and the new building is a reality, he replied, "Over? Are you kidding? The Waxter Center is just the beginning for us old folks. We have a long way to go before our work's done!" ■

Senator BEALL. Perhaps I should inform you as to who these gentlemen are that surround me on the stage.

On my right is Mr. James Murphy, who is the chief counsel of the Subcommittee on Aging.

As you know, Senator Eagleton of Missouri is the chairman of the subcommittee and Mr. Murphy is Senator Eagleton's right-hand man and the right-hand man of all of us on the committee.

Mr. Rust on my left is a member of my staff.

They will counsel me from time to time during the hearing.

We are happy to have so many witnesses with us here today.

Our first witness will be Ms. Ramona Higgins, the title VII Program Coordinator for region III, Administration on Aging—Office of Human Development.

Ms. Higgins, we are delighted to have you with us this morning. Thank you for coming. You may proceed.

STATEMENT OF MS. RAMONA HIGGINS, TITLE VII PROGRAM COORDINATOR, REGION III, ADMINISTRATION ON AGING, OFFICE OF HUMAN DEVELOPMENT

Ms. HIGGINS. It is very good to be here.

My name is Ramona Higgins, and I am the coordinator of the title VII nutrition program in HEW's Regional Office of the Administration on Aging of the Office of Human Development. The office for region III is located in Philadelphia, and we are responsible for aging services in Pennsylvania, Delaware, Maryland, West Virginia, Virginia, and the District of Columbia.

I appreciate the invitation of this committee to testify about the status of the title VII programs in region III, and to describe some of the activities and services these programs provide to older Americans.

There are 92 projects now in operation in the region which deliver hot food and a variety of social and supportive services to older Americans in 622 service centers, or title VII sites, at the community level.

There are 5 projects in D.C., 4 in Delaware, 12 in Maryland, 43 in Pennsylvania, 17 in Virginia, and 12 in West Virginia.

Every metropolitan area is reached by this program, and, while larger cities will have several sites, the number of less populated communities now reached by an aging service center is substantial.

Funds were released to the States 9 months ago, and the States completed the planning of projects and allocation of funds 3 to 5 months ago. In some cases, projects actually received funds only 3 months ago.

At the present time, some 16,000 older Americans participate each day in the activities at these sites, and each receives a hot meal. We anticipate that by late June the daily number of older Americans utilizing these community programs will have grown to 22,000 or 23,000.

Of those who are now participating in the activities under title VII, we estimate that about 7 out of 10 live on incomes which are below the poverty level, and about 3 out of 10 are from minority groups. Slightly more than 1 out of 10 persons has a meal delivered to their home because of some physical condition.

We are presently surveying the projects to determine the range of costs per meal, and the preliminary data indicates that while several sites estimate they are serving meals at less than $1 apiece, and one exceeds $3, the average project is serving a meal at $1.16 to $1.42, depending on whether food is prepared onsite, or is catered.

All projects, and most sites, are now providing a variety of social and supportive services, especially transportation and outreach services. Recreation and educational services, such as nutrition education, also are a frequent activity, as are shopping assistance, health and welfare counseling and other information and referral programs.

We recognize, and do not purport to claim otherwise, that the range and quality of support services are not as effectively provided as we wish—or intend to provide in the next 12 months.

We are preparing to focus more intensively on the supportive and social service aspect of the nutrition program by selectively emphasizing specific service activities. To do this, we plan to deliver a maximum volume of technical assistance and training support to State offices on aging, and to individual projects, and to negotiate regionally an increased emphasis on services to older Americans among those agencies where the Congress has directed public resources be made available.

We are particularly concerned about transportation services, especially because of the impact of higher energy costs both on volunteers who provide escort service and on projects which provide transportation directly as a project cost.

We are also focusing on programs to help older Americans improve their incomes, particularly through such activivies as the supplemental security income program where we are cooperating with the Social Security Administration. We also are developing an improved nutrition education curriculum, and we are preparing simplified materials on Federal services for older Americans to assist in the development of improved information and referral activities at the community level.

We will continue to emphasize training activities, both to assist new project staff to move into the program easily and effectively, and to further develop the skills and expand the range of competence of the State and project staff now delivering service to older Americans.

I am proud of the accomplishments which the States and projects have made in a relatively short time, and believe that the improvements generated for older Americans at the community level by title VII merit your continued support.

Again, I appreciate very much the invitation to present this information to you, and I will be happy to answer any questions I can.

Thank you.

Senator BEALL. Thank you very much for a very fine statement, Ms. Higgins.

I am wondering, for my benefit, if you could explain the procedure that region III uses in justifying the nutrition sections of the program when they are submitted for approval to the States?

Ms. HIGGINS. As you are well aware, this is a formula grant program to the State. The State has both the responsibility and the authority to approve projects. There have been some instances in

which States have shared this with our staff, but the responsibility lies with the State's unit on aging.

Senator BEALL. You just approve the overall State plan, and do not get involved with individual projects?

Ms. HIGGINS. Perhaps I misunderstood you. I was speaking of project applications, sir.

Senator BEALL. I see.

Ms. HIGGINS. The State plan, as such, is a preprint with additional State operating plan data. I review each of these State plans for nutrition and title VII program components, and also review and make recommendations as to the implementation of the program.

Senator BEALL. Is there further review in Washington after you have reviewed it?

Ms. HIGGINS. Yes, there is. The State plan is then sent to the Administration on Aging in Washington for final approval, disapproval, or conditional approval.

Senator BEALL. Is this time consuming?

Ms. HIGGINS. Somewhat, depending on what the turnaround time is for getting State plans approved.

Senator BEALL. And individual projects within the State plan are not approved?

Ms. HIGGINS. That is correct. The State has responsibility for that.

Senator BEALL. What kind of ongoing oversight does region III exercise to determine whether or not the State and local units on aging are complying with your various regulations?

Ms. HIGGINS. Our regional office, as some other regional offices in the country, are set up with a State program specialist for each of the six States in our jurisdiction.

In addition, I function as management of the title VII program. The State program specialist has very close contact with the States, and I, through him, with the States.

There is an assessment guide that has been developed for each of the projects. The Administration on Aging is in the process of preparing and testing evaluation study techniques for the projects. We give technical assistance and support to States in this regard.

Senator BEALL. Speaking of technical assistance on page 4 you mentioned, "We plan to deliver a maximum volume of technical assistance and training support to State offices on aging, and to individual projects," could you be more specific?

Ms. HIGGINS. Surely. Under contract with the Community Nutrition Institute we have conducted a series of training programs for directors.

Also we have provided two or three training sessions for State staff. In addition to that we are planning, because of problems that are surfacing, both administrative-type meetings with our program directors in region III and the State unit directors.

In addition to that, the staff nutritionists are meeting with me in the regional office bimonthly.

Senator BEALL. Have you been able to measure the impact of inflation on the program?

In other words, how has it affected the number of meals that you are able to provide?

Ms. HIGGINS. The information that I quoted in my statement, sir, is preliminary data. We are surveying each of the sites in the region. We are continuing to analyze this.

Some of the preliminary indication is rather disturbing. We are anticipating, based on wholesale figures within our region—figures from suppliers—some place between a 19- and 22-percent increase in food costs. Supplies, particularly the fuel oil derivatives supplies, plastics, and things of this type, as well as transportation costs will make it even higher.

Senator BEALL. You can use some more money?

Ms. HIGGINS. We can always use money, Senator.

Senator BEALL. I sponsored an amendment to the Older Americans Act, the Comprehensive Service Act Amendments of 1973, encouraging the employment of senior citizens in title III and title VII projects.

Do you have any information as to how this is being implemented and carried out?

Ms. HIGGINS. We are making an effort to implement this, and we are certainly, if I may say, in agreement. There are mutual opportunities both for the program and for senior citizens.

We are making an effort in this; I do not have precise numbers of senior citizens employed. They are both employed and providing voluntary services.

Senator BEALL. Thank you very much.

Ms. HIGGINS. Surely.

Senator BEALL. Next we will have a panel of witnesses: Mr. Harry F. Walker, executive director, Maryland Commission on Aging; Ms. Janette C. Martin, title VII consultant nutritionist, Maryland Commission on Aging; and Mr. J.S. Nachison, chief of planning, program, and evaluation, Maryland Commission on Aging.

We are happy to have all of you with us here today.

I want to particularly congratulate Mr. Walker for his close cooperation with our office in helping us to formulate some of our ideas on legislation. It has been very, very useful input that he has made, and we are delighted to have that kind of expertise available to us. Mr. Walker, you may proceed.

STATEMENT OF HARRY F. WALKER, EXECUTIVE DIRECTOR, MARYLAND COMMISSION ON AGING; JANETTE C. MARTIN, TITLE VII CONSULTANT NUTRITIONIST, MARYLAND COMMISSION ON AGING; AND J. S. NACHISON, CHIEF OF PLANNING, PROGRAM, AND EVALUATION, MARYLAND COMMISSION ON AGING, A PANEL

Mr. WALKER. Thank you very much.

Mr. Chairman, it is a pleasure to have this opportunity to participate in this important public hearing on the operation of title VII of the Older Americans Act, feeding program for the elderly, in region III and more specifically the State of Maryland. As a State aging unit director who is in frequent contact with other States, I can report that all States view the nutrition program as one of the finest programs for older citizens ever to come out of the Older Americans Act.

Most of us who have worked in the field of aging since, and even before, the inception of the Older Americans Act have been aware

that one of the more popular and rewarding activities that older people enjoy are luncheon clubs, covered dish dinners, or those activities in which food is involved. This is not surprising since most people enjoy eating. But in the case of older persons, it often provides one of the few, perhaps only opportunities they may have for coming together, visiting, enjoying recreation, or in other ways filling what is in too many cases growing periods of emptiness and boredom.

When Congress enacted the nutrition program, it very wisely avoided the mistake of making this a soup kitchen program which would have discouraged many older persons from participating because they had never had to accept handouts, and should not be forced to do so just because they are old, and in many cases living on very meager incomes.

Recognizing that malnutrition among the elderly is a result not only of poverty, but also of lack of motivation, title VII of the Act was so written that it provides a substantial hot meal as the nucleus of a program which includes services which make possible the opportunity not only to deal with some of the problems of socialization that the elderly may face, but also to uncover previously unknown situation of need.

The nutrition program is designed to serve primarily low-income elderly persons. Fortunately, there is no means test involved and it is necessary only to set up nutrition programs in areas in which there is a concentration of low-income elderly. In this way, those people who may not technically qualify as below the poverty level, but who may need the program every bit as much, do have the opportunity to benefit from the activities provided. With the built-in provisions for contributions being allowed, those who do have the means to pay their own way, but who may otherwise be ioslated, lonely, and depressed, can take advantage of the benefits of a congregate feeding program with auxiliary services.

During the time between the enactment of the legislation providing the nutrition program and the release of money, Maryland had to decide how to distribute the nutrition funds.

The two options were: to concentrate in one or two areas of high density of elderly poor; or to make the program available statewide. On the premise that the elderly poor in even the richest counties of the State are as much in need as the elderly poor in counties, the State commission approved an allocation formula which offered a sum of money to every county and Baltimore City.

The formula provided nutrition funds in direct proportion to the percentage of elderly poor persons in that subdivision as a percentage of the elderly poor in the State. Most subdivisions eagerly accepted the nutrition program and it is now well on its way to achieving its full quota of participants.

As the committee knows, the nutrition program has not been without problems. The energy crisis, skyrocketing inflation, the mechanics of setting up programs in rural areas where there is little or no transportation and in urban areas where people are unaccustomed to programs of this sort, have all played a part in getting this fine program off the ground.

However, the problems, as serious as they have been in some cases, cannot begin to counterbalance the positive values that this program

is having now, and the potential that it does have for providing direct and immediate services to a significant percentage of our elderly population.

I would make a strong plea for this committee and the Senate to fully support the House recommendation for the 3-year extension and expansion of the nutrition program. It is an excellent program; the most serious criticism that can be made of it is that it reaches too few of the elderly that need it and that would benefit from it. I want to assure the committee that we will continue to work to feed the maximum number of people with the money allocated for nutrition.

In closing I would like to extend our appreciation to you, Senator Beall, for your strong support in Congress for the nutrition program and also for the valuable role that you played in negotiating a compromise between the legislative and executive branches to promote the signing into law the 1973 amendment to the Older Americans Act.

Senator BEALL. Thank you, Mr. Walker.

Can you measure the effect that the increased costs have had on your ability to provide meals to senior citizens?

Mr. WALKER. We did a study in Maryland of the effect of inflation on the nutrition program, and based on the projections we have given the current rate of inflation and the current level of funding, the nutrition program would lose about 25 percent of the participants.

In other words, it would be reduced by about 25 percent.

Senator BEALL. What kind of increase in money would you need as a percentage?

Mr. WALKER. Let us start with the House version of $150 million for the first year. We certainly fully support that, and we would support any increase above the House recommendation.

Senator BEALL. What kind of increase in money do you think you would need to meet the known need?

Mr. WALKER. Senator, if we assume that $60,000 will feed 100 people, five hot meals a week, 50 weeks a year, we estimate there are no less than 60,000 older Americans in Maryland that could benefit from this program, and the figures become astronomical.

Senator BEALL. You did not mention it in your testimony, but I understand in many instances the nutrition programs have been placed in the senior citizen housing centers.

Mr. WALKER. Yes, sir.

Senator BEALL. I wonder if you could comment on the desirability of this approach.

In other words, you have people here who are already receiving benefits such as subsidized rents, and so forth. Do we tend to limit the number of participants by placing the nutrition centers in housing projects? Do those who do not have the benefits of subsidized housing come as readily as if the program were placed somewhere else in the neighborhood?

Mr. WALKER. If the nutrition program in a housing unit is limited to the residents of that housing unit, I think this is clearly not the intent of the act. If it is used simply as a convenience site, and there is a real effort made to go into the community, into the neighborhood and bring in people into that, then it does provide a useful site, be-

cause it is not easy to find a place that you can have available 5 days a week, 50 weeks a year.

Senator BEALL. Have you encountered any specific administrative problems, as far as the Federal end of the program is concerned that we ought to consider as we look at this legislation?

Mr. WALKER. No. There is the normal bureaucracy that exists between State and Federal. But I think that a potential problem we may be dealing with is trying to equate whether or not the program is designed for a given segment of the population, and we do know there are people that are not below the poverty level that need this program every bit as much as those who technically qualify.

This may be an area that needs to be explored further. How can we serve people across the board that need this?

Senator BEALL. Do you think the program as presently designed tends to divide people into categories that were not intended, in other words, into income categories? Is this a detriment to the overall management of the program?

Mr. WALKER. I think there is an implicit sense that this is a program for the poor, and because of that there are undoubtedly a lot of people that can benefit from it that need it and are not participating, simply because, as you know, most older people have been independent most of their lives, and now they are old, and they do not want to be considered welfare cases.

Senator BEALL. I am reminded of the fact that originally we provided a 10 percent set-aside for the State to administer the title VII programs but revised that so as to combine the title III and title VII administrative costs after the first fiscal year.

Has this caused any difficulties?

Mr. WALKER. The original 10 percent was needed by most States, even though they did not use more than 10 percent of it, and I took a poll of all the States, and find that all the States feel that they would like to have the permissiveness in the allocation to allow them to use 10 or perhaps only 5 percent for administration.

If the money is not used for administration, it could then go for food.

Senator BEALL. Thank you, Mr. Walker. We may come back for more questions.

We will now hear from Ms. Martin.

Ms. MARTIN. Title III money was initially made available to conduct pilot programs in congregate feeding for the elderly in Baltimore City, Allegany County and the MAC project on the lower Eastern Shore. The success of these projects led to further development of the congregate feeding concept into the present nutrition program.

Maryland was allocated $1,442,041 in title VII nutrition funds for fiscal 1973 in August 1973. This money has been awarded to 12 projects which will provide 2,783 meals daily throughout the State. The number of luncheon clubs total 70. (See exhibit A.) Nineteen counties plus Baltimore City developed projects and received grant awards. Today in Maryland we are feeding 1,923 each day in our luncheon clubs. We will be at full capacity of 2,783 meals daily by June 30, 1974.

[The exhibit referred to follows:]

Exhibit A

NUTRITION PROGRAM STATUS REPORT

April 22, 1974

PERIOD COVERED:

COUNTY OR AREA	$ AWARD	START-UP DATE	# OF SITES	EST. TOTAL MEALS/DAY
Allegany	80,440	10/2/73	7	260
Anne Arundel	73,666	1/2/74	2	110
Baltimore City	514,280	9/15/73	20	1,108
Baltimore County	140,608	3/1/74	3	213
Lower Eastern Shore	134,938	10/1/73	10	300
Carroll/Harford	75,002	2/11/74	2	100
Washington	69,903	1/2/74	4	100
(Cecil, Caroline, Kent Queen Anne's, Talbot)	96,971	2/28/74	5	145
Montgomery	71,652	1/28/74	4	150
Prince George's	83,162	3/20/74	4	120
Garrett	34,863	10/1/73	3	78
St. Mary's	66,556	3/1/74	5	100

SUMMARY:

No. of Counties in which projects are operating = 19

Total $ awarded = $1,442,041

Projected target meals = 2,783 daily

Meals/day = week ended 4/21/74 1,923

Ms. MARTIN. Our 12 project directors and their personnel have shown that local governments and services have responded to the plight of our elders with outstanding achievement. To develop projects within 90 days and to be serving almost 2,000 meals daily is a feat deserving of the highest praise.

Truly, the nutrition projects are meeting the objectives of the title VII legislation. Our project directors and participants will discuss this in their testimonies.

Food service for the title VII luncheon clubs is provided in the State in several ways:

A. School food service provides food in Allegany, St. Mary's, and Montgomery Counties.

B. Two projects are preparing their own food. Garrett County and the five counties of the Upper Shore serve their participants this way. The Upper Shore is contracting for their food from a restaurant kitchen sponsored as an economic development through OEO. The restaurant will provide food for the Head Start program and the public.

C. Two State hospitals on the Lower Shore are supplying food to those counties in the MAC project. A vocational school has just begun to provide food service so that the number of meals can be increased as the hospital kitchens were at capacity.

D. In Baltimore and Carroll Counties and Meals on Wheels program is providing food in bulk to luncheon club sites.

E. Commercial caterers are supplying food to luncheon sites in Anne Arundel, Baltimore, Prince George's, Harford, and Washington Counties, and Baltimore City. This food service, in some instances, is delivered in bulk and served buffet stype. In other areas, it is preportioned and sent out in insulated trays and served to the participants.

With two exceptions the luncheon clubs meet at noon. Carroll County and one site in Allegany County serve in the evening, which is quite a departure.

All programs are most successful as a visit to any of the 70 sites will attest. The luncheon club sites are located in Senior Centers, school cafeterias, church social halls, housing projects for the elderly and public spaces.

Where programs existed for senior citizens, the participants have joined in with great enjoyment. New programs are also accepted with enjoyment and appreciation. The socializing provided by the program is most successful.

The nutrition education component of the title VII program is underway. Our needs in Maryland have been identified as follows:

1. How the elderly individual should supplement his hot meal to meet his nutritional requirements.
2. Information on shopping economically.
3. Explanation of the food stamps program. We find many eligible elderly citizens have not taken advantage of this service.
4. Proper storage of foodstuffs.
5. Simple cooking for the elder who is alone. This is particularly popular with the elderly widower.
6. Information on food fads and diets, because this group is very susceptible to food fadism and wastes money in this way.

The problems inherent with such a program can be solved. The 90-day requirement for beginning a project after the grant award was made did not allow sufficient time for complete planning, yet all 12 projects in Maryland were in operation in this time. Many of the projects were operated by volunteers until staff could be hired and trained. We are in operation because of the tremendous help offered by senior citizens groups, school officials, local commissions on aging, local government officials, and volunteers who had vision to sell the effectiveness of this program.

We have found that transportation and outreach facilities have a direct bearing on the success of the program.

1. The energy crisis affected the projects, forcing closure of luncheon clubs in the rural areas particularly Garrett County. The crisis also delayed the start of several luncheon clubs, as volunteers who transport participants to luncheon clubs found gas shortage and the increasing cost a problem. Transportation still remains a problem for the elderly, particularly in rural areas where limited facilities exist. Even with this difficulty, the rural projects are at full capacity and have waiting lists.

2. Several visits by outreach workers are often necessary to encourage some senior citizens to join the luncheon clubs. Many are afraid to talk with a stranger and refuse admittance.

Mrs. S., a tiny, neatly dressed woman, confided to me that she was scared to come to the luncheon club. She learned about the luncheon club through conversation with a woman on a bus.

On this first day she came to the luncheon club, she approached the site hostess with much hesitation asking, "do you have to be a pauper to come to this program?" She told me the site hostess was so friendly, warm, and reassuring that she felt right at home and has been coming every day. It helps the loneliness she has since her husband died. She confessed that she is not interested in cooking for herself, and cannot afford to with the "prices the way they are, and the food is good here."

Funding is needed to provide transportation and outreach support services for the elder participants in the title VII program. Funding is needed to increase the numbers of elders participating in the nutrition program.

We would like more money.

Yet, with all these problems the success of the title VII program in ending isolation and loneliness, improving nutrition, and the quality of life for the senior citizens speaks to the need for extension of the program for three years.

Thank you.

Senator BEALL. Thank you for a very fine statement.

I am interested in the comparison of catered meals as opposed to those that are prepared on the premises. Could your give me you view as to which seems to be working better from a practical point of view, and also the relationship of cost per meal?

Ms. MARTIN. The food that is cooked in smaller quantities, as happens in the local site, is of course of better quality because it does not have to be handled as much.

However, because of the requirements for sanitation, both local and State, we would not be able to start luncheon clubs in some sites

without a great expenditure for equipment. If they were to prepare their own meals, equipment would need to be purchased and installed so that the catered food service has been a boon to getting the meals started.

You will note from my testimony we have both profitmaking and nonprofit caterers supplying us with food. I would say there is not much difference in this service, in most instances the nonprofit food is a little better than the profit food.

Senator BEALL. What is the cost per meal?

Ms. MARTIN. The cost per meal varies in Maryland. Those costs that are in projects that use school food services are the lowest, and the highest are from the commercial caterers. Food costs vary from 75 cents a meal to $2.

Senator BEALL. The lowest cost is at the schools, that comes from bulk buying?

Ms. MARTIN. Bulk buying, and just the efficiency of the system.

Senator BEALL. Is there any way you could tie the whole thing up with purchasing power of the State Board of Education?

Ms. MARTIN. We have not tried this. It might be possible for us, but you see, if we did this, we have the problem with the commercial caterer who would not be allowed to obtain food this way.

Senator BEALL. How about surplus foods?

Ms. MARTIN. Surplus foods are being discontinued by the Department of Agriculture, so we are getting less and less.

In fact, the amount of surplus food that has been used by school food service for feeding the elderly in the first quarter was only about $375, as I remember.

Senator BEALL. We are of the opinion that there was still some surplus food left.

Ms. MARTIN. There is some, but it is dwindling very fast.

Senator BEALL. You place a great deal of emphasis on transportation. I notice you point out that in rural areas, you mentioned Garrett County in your statement, some projects were forced to close because of the energy crisis.

Has this problem been resolved?

Ms. MARTIN. The problem was resolved, you will recall, by the Governor having gasoline delivered to Garrett County by the National Guard. After 2 weeks, the luncheon clubs were able to start again.

Senator BEALL. That problem then was the one that pertained only to that county because of the truckers strike?

Ms. MARTIN. That is right. But we have had problems with gas shortages in Garrett and Somerset counties.

Senator BEALL. Are you studying the possibility of using school kitchens to a greater extent than they are being used?

Ms. MARTIN. Yes. We have looked into this, and will continue to look into it.

One of the problems of the school food service is that it closes during the summer months. In some schools they have not been able to face the administrative problems that this gives them, by having to keep the schools open, and the kitchens open.

In Allegany County we are concerned with this problem and probably will use satellite feeding—keeping one school kitchen open to prepare all the food.

Senator BEALL. Are efforts to improve mass transit for the elderly included in the local and State plan?

Ms. MARTIN. Yes.

Senator BEALL. Have you received any money from DOT?

Ms. MARTIN. Not yet. They are very anxious to give us advice.

Senator BEALL. Thank you very much. Mr. Nachison, you may proceed.

Mr. NACHISON. Thank you, Senator Beall.

In Maryland, the title III program has been an overall and growing success since its inception 9 years ago. We have seen the funding level grow from only a few thousand dollars in 1965, into the basis for an overall comprehensive aging, planning and action system approaching several million dollars in Maryland yearly.

From a few initial senior centers under title III, serving a great many functions, the program has grown into a variety of activities, all attempting, in one way or another, to meet the needs of the State's nonimpaired elderly who are 85 percent of the total elderly population. Several programs also attempt to meet the needs of the nonimpaired elderly who may be in danger of institutionalization, who are about 10 percent of the total.

We are proud of our basic network of senior centers, day care centers and activities, information and referral services, prototype transportation systems and the geriatric assessment centers we are beginning to fund. Our areawide model project in the Lower Eastern Shore counties, with its intercounty coordinated network of centers and ancillary services, is the basis for the new, coordinated planning approach to aging services which is being implemented in the State, under the Older Americans Act as amended.

With the successful implementation of the nutrition program in Maryland, we can now look at the concept of supportive services to the nutrition effort, rather than look at nutrition only as an isolated approach to one area of elderly problems. The title III support services, hopefully, will play a greater role in the support of the nutrition program than was originally envisaged. We feel that the money for the nutrition program should be essentially allocated to the primary purpose of the program—feeding elderly citizens to the fullest extent possible.

The Commission hopes that, in the long run, most of the supportive elements of the program can be picked up from sources of funding other than the nutrition program, to the extent feasible and possible. While it is the meals program which has become an excellent method for reaching elder citizens who have not had the benefit of social and other services in the past, it is title III and other programs which help create the more general social atmosphere of many of these persons.

The title III program is one which will be the main support of the nutrition program in many areas of the State, at least for the next year or two. Other sources of funding, hopefully, will pick up some program areas which cannot be funded presently, due to limitations of title III funds. The social atmosphere of the elder citizen is quite broad, once it is considered in an overall comprehensive program context. Rather than just a meals program with some title III support elements to it, congregate feeding becomes a central focus of an all

encompassing program which includes transportation to health and other services, friendly visiting, meals on wheels, day care and recreation, and many others.

Many of the title III programs have utilized their senior centers as a focal point for meals provision. Several of the minibus networks presently operating have been utilized to bring in elders to the meal sites and other related services. It is anticipated that more money will be going into title III support of transportation, especially in the more rural parts of the State. Screening services and SSI are now becoming more available to many elders, especially as more and more people are contacted through the meals programs.

As a particular example of cooperation between title III, nutrition, and other agencies, a little old completely befuddled lady was referred by SSI to the County Commission on Aging in one suburban county. She became the county's first Meals on Wheels client. The nutrition program staff determined she needed clothes to come to the meal sites. The title III program staff at the senior center were able to get clothes for her. She then became a regular visitor to the congregate feeding site. As part of her newly found socializing at the center, the nutrition staff realized she needed glasses. The title III center staff referred her to medicaid. This woman, for the first time in years, has clothes, good food, her sight, and companionship. The combined forces of several programs have literally given her reason to live again.

Under the gloss of success, all is not as rosy as appears. As the meals program in Maryland reaches closer to its total allocation of meals and the program implementation pressures have eased, certain types of problems have become apparent. The obvious one is for the need of additional transportation services for rural counties, and the need for special gasoline allocations for senior citizens who maintain their own automobiles. This transportation issue has delayed the nutrition program in parts of the State, and will be a thorn in the side of the program for a long time to come.

Concurrently, additional outreach services are needed, again mostly in rural areas; but also in the larger central cities. There is a need to locate more of the elder citizens who can benefit from social and health-related services, Older Americans Act or otherwise. There is also the need to contact the majority of elders who may be eligible for the meals program. Information and referral is said to be a panacea in this area, but it is a known fact that knowledge itself is not a guarantee that information will be used, or even reach its intended recipients. Therefore, some of our efforts will also concentrate in this area.

In Maryland, the Commission on Aging knows the nutrition program has initially been, and will be, a great success. We are ahead of our federally set meal quotas, something which few other States can say.

Title III has been successful in nutrition support. In particular, the burgeoning title III supports to the nutrition program, beyond initial title III orientation, have been excellent, both at the planning and action levels. The Commission urges more money, both from the State and the Federal levels for allocation to title III support for nutrition, and the nutrition program itself, to allow these programs to reach more than the minimal few percent of the elders these programs are presently able to serve.

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The Commission supports both programs, and urges the Senator to increase his efforts to gain additional funding for these programs in Congress. The Older Americans Act should be expanded—for all elder citizens who can benefit from such services.

Thank you.

Senator BEALL. Thank you, Mr. Nachison.

Since the program is so new, and the emphasis has been on starting it up and getting the benefits out to the intended recipients, what kind of ongoing evaluation do you have to determine how well this is all working, and where your problems are?

Mr. NACHISON. In brief, again, this is part of the whole implementation process. The State Commission planning staff is now in the process of developing a data baseline of existing service level provision among elderly citizens through title III and title VII programs, so that we know where we are at this point in time.

Once we have this outlined to the point where we know who is being served, we can go further into the needs analysis of what are other needs of people who are being served, and also determine the people who are not being served by any program.

At the same time, we are also beginning to fully categorize our programs by type of service levels, and trying to come up with some determination of the exact type of evaluation that we can develop in terms of impact above and beyond being able to say *X* numbers are being served per month, whether it is a total number or unduplicated number, et cetera. We hope to have prototype evaluation tools in operation by the beginning of the new fiscal year.

Senator BEALL. The language of the law requires cooperation between the title III and title VII programs. It goes on to say that this cooperation must be by mutual agreement.

Has this been a hinderance or an advantage? What problems have arisen because of this language, if any?

Mr. NACHISON. I would not say there have been problems. In many cases you have had ongoing title III centers for several years, and in all cases title VII centers, the meal sites, the meals program and staff are new.

At the initial stage, as we know, you had two staffs and two programs neither of which was familiar with the other.

As these people have become more familiar to each other, and the support services began to link up, there has been and is a lot more cooperation between the programs at the local level than there was initially. Most problems of "turf" have been overcome.

At the State level, title III and title VII staff are in daily communication, and there has never been any problem.

Senator BEALL. Thank you all very much. Very useful presentations.

Our next panel is rather large, and will require some rearranging of the tables and chairs. While this is being accomplished, I think we will take a brief 10-minute recess.

[Short recess.]

Senator BEALL. Ladies and gentlemen, we are ready to resume our hearing.

We have now a panel of witnesses of both project directors and consumers from around the State, and we would like them to come up and be seated themselves around the table in the following order: Mrs.

Michaela Townsend, Centerville, Md.; Mr. Stirling P. Willan, Havre de Grace, Md.; Mrs. Ida Jo Martin, Title VII Project Director, Washington County Commission on Aging; Ms. Hildegarde Benefield, Title VII Project Director, Prince Georges County, Division on Aging; Mrs. Eleanor Snyder, Chief of Nutrition, Baltimore City Health Department; Ms. Lenore Robins, Snow Hill, Md.; Mrs. Mary McLuckie, Allegany County, Commission on Aging; Mrs. Alice Sykes, Baltimore, Md.; Mr. Joseph Ferrier, Montgomery County, Md.

As I mentioned before, this is a panel of project directors and consumers from around the State of Maryland.

At the outset, let me thank you all for coming, some of you from a considerable distance, to participate in these hearings today.

You have the grass roots experience in this program, as either local administrators, or recipients of the benefits of this program.

We are particularly anxious to have your points of view.

With your permission, we will just move around the table, going from my left to my right. Everybody, I understand, has a short statement to make with regard to the program.

If each of you will present your statements then we may enter into a discussion at the conclusion of your remarks.

Beginning on my left, at the end of the table is Mrs. Townsend from Centerville.

STATEMENT OF MRS. MICHAELA TOWNSEND, CENTERVILLE, MD.; STIRLING P. WILLAN, HAVRE DE GRACE, MD.; MRS. IDA JO MARTIN, TITLE III PROJECT DIRECTOR, WASHINGTON COUNTY COMMISSION ON AGING; MS. HILDEGARDE BENEFIELD, TITLE VII PROJECT DIRECTOR, PRINCE GEORGES COUNTY DIVISION ON AGING; MRS. ELEANOR SNYDER, CHIEF OF NUTRITION, BALTIMORE CITY HEALTH DEPARTMENT; MS. LENORE ROBINS, SNOW HILL, MD.; MRS. MARY McLUCKIE, ALLEGANY COUNTY COMMISSION ON AGING; MRS. ALICE SYKES, BALTIMORE, MD.; AND JOSEPH FERRIER, MONTGOMERY COUNTY, MD., CONSISTING OF A PANEL OF PROJECT DIRECTORS AND CONSUMERS

Mrs. TOWNSEND. The Upper Shore Title VII Nutrition Project for the Aging serves the five counties of the Upper Eastern Shore of Maryland; Cecil, Kent, Queen Anne's, Caroline, and Talbot. The total population of these counties is 131,461, with 20,141 falling into the over-60 category, according to the 1970 Census figures. Of this number, at least 48 percent are below poverty level, according to a cross section of surveys of the area.

The five county area is a rural designation with the only notable concentrations of population located in Elkton, Cecil County, and Easton, Talbot County. Seafood, marine related industry and farming are the economic mainstays.

In allocating title VII funds, based on percentages of elderly population in relation to the State, the Maryland Commission on the Aging indicated funding levels to these five counties totaling $96,000. The small allocations to the individual counties made it necessary for them to join forces, delegating one central agency as their common

administrator. Kent-Queen Anne's-Talbot Area Council, Inc., a tri-county community action agency funded by the Office of Economic Opportunity, offered this service because of its nonprofit corporation standing and its existing staff trained in community services.

Notification of grant award was received in the middle of January and the earnest work of program implementation began. Advertisements for the positions of site hostess and bus driver were run in newspapers in all five counties, and the search for meal sites got underway. In each county, the commissions on the aging were asked to serve as decision-making bodies until the policy council was organized. They hired personnel and approved sites.

In Cecil County the meal site is located in Holly Hall, a multi-agency building which has previously served as a senior center. In Kent County, the county commissioners made a two-room building at the front of the courthouse grounds available.

The County Recreation Center at Centerville serves Queen Anne's County. In Talbot County, the Presbyterian Church provides the site in Easton 3 days a week, and Union Methodist Church in St. Michaels houses the program 2 days a week. The People's Bank of Denton donated a small storefront building for the Caroline County site. No rent is paid at any site, but maintenance contributions have been arranged. In each case the site was selected because of its central location and easy proximity to conveniences and available services.

Food is prepared in a central kitchen located in Queen Anne's County. This is an Economic Development project of the Community Action Agency. It serves title VII and Head Start programs and makes luncheon available to the general public to offset expenses. This restaurant will serve as a marketing center for crafts and artifacts created by the title VII participants. This project has created eight jobs for previously unemployed persons.

The food is delivered by stationwagon to each site in thermal trays. It is carried in bulk form and served family style at the centers. Each site has been Health Department inspected, and food has passed temperature requirements at each testing.

Cecil and Queen Anne's Counties opened on March 18, with 24 and 26 participants respectively. Talbot opened on March 25, serving 29 persons daily, and Kent County opened April 1, with a daily count of 21. Caroline County will open April 29 with 30 persons daily.

Approximately 38 percent of our total participants attend 5 days a week. The rest are 2 and 3 day participants, enabling us to serve a larger number of people in more communities. We are currently reaching approximately 3 percent of the target population.

Cecil County provides two carryout meals daily, Queen Anne's provides one. These needs have been documented by the attending physician. We have not actively solicited for carryout meals as we do not have equipment necessary to maintain heat in individual service.

Participants were solicited from Health Department and Social Services referrals and by door-to-door canvassing in target communities as established by the Community Action experience. Canvassing was done by Community Action employees trained in outreach work. Every participant was visited at home where a confidential information application was filled out and the overall program explained. A needs assessment was part of the survey. Each interviewee signed their application or made their mark to indicate understanding.

In the five counties 89 percent of all persons interviewed named transportation as the greatest need. Of those now participating, 97 percent require transportation to and from the meal site. Many receive transportation to other points for services after coming to the centers.

We are proud of the programs we are providing within such a short period of operation and of the active part our participants are taking in planning. Many volunteers are involved in serving meals and scheduling programs at each site. The most popular pastime is bingo and prizes are being supplied by local merchants.

Extension offices have been asked to help provide nutrition education. Two sites are receiving regular nutrition programs and schedules are being set for other sites. Movies, music, games and crafts are part of the weekly schedules and each center has a donated television set.

Great emphasis is being placed on letting the individual choose his or her own activity. Many enjoy just chatting. We have several blind persons and we are seeking special activities for them. Our Policy Advisory Board is now active, meeting once a month. They are learning their responsibilities and beginning to plan for the future. Individual Site Councils will be formed in the near future

The Health Departments in the five counties are implementing a new geriatrics program. This program will deal with many aspects of aging including help in keeping elderly people from being placed in institutional care prematurely. They have visited our sites and find the socialization and involvement as important an aspect in maintaining home care for some borderline cases as is the nutritional aspect.

In every center we can already cite case histories of participants showing positive changes since entering the program.

Example: Mr. D., a referral from one of the mental health clinics, was reluctant to attend. It took several tries to get him on the bus. He lives alone, and was very introverted with no apparent interests. The first day on the bus he rode half a mile and demanded to get off. He finally got to the center. He is now a daily attendant. He calls bingo, assists physically handicapped to board the bus and is very outgoing.

Mrs. R., a widow who lives with 15 cats, readily agreed to attend the program daily. She is well known to Community Action and Health Department as a lonely woman who has alienated neighbors and friends with constant complaining and faultfinding. She is now a self-appointed volunteer at the center. She makes sure that the "older ones" are fed and that the men are adequately fed. Her appearance has changed remarkably. She dresses up everyday and is showing a budding romantic interest in Mr. D.

Each center has its wonder participant.

If we are doing so well, what do we need?

On January 1, 1974, Supplemental Security Income replaced Old Age Assistance through the Welfare Departments. Many elderly people received higher incomes, and the stigma of welfare was removed. Also removed were many services and the personal contact with caseworkers who listened to complaints and provided transportation. Someone has to replace these services.

The $96,000 to feed 130 meals 5 days a week is hardly adequate to provide the services named as a requirement for title VII, let alone replace those lost when SSI became a fact.

In the area of transportation; we began with the thought of using vehicles requisitioned from General Services Administration. Three buses were procured. One caught fire, and two were ordered off the roads by police as unsafe. Repairing these vehicles was impractical. There was no money to buy new buses.

We have applied for title III moneys to provide transportation for the elderly in five counties, including to and from the centers. It will also provide shopping assistance, transportation to doctors, clinics, for food stamps, et cetera.

In the meantime, we are leasing three buses, borrowing one, and still using one GSA vehicle which is in fair operating condition. The money to lease buses came from stripping our operating budget of every available penny for supportive services, and cutting personnel cost by relying on the Community Action Agency to supply secretarial services.

Gasoline costs for these buses is running far in excess of budget projections because of current high prices. Each bus travels at least 800 miles a week. There is no such thing as a roundtrip in these counties. Each community served is isolated. Each trip is a deadhead run out and back with several such trips required to round up the 25 or so people being brought in.

Outreach services are a desperate need. This service is now being carried out by two outreach workers provided part-time by the Emergency Food and Medical Services of the CAA. In addition to initial contacts and registrations, we must be able to supply constant followup. Many needs were uncovered in our surveys. Some have been answered, and some have been referred to appropriate agencies. Some of these needs are being met by the CAA such as Emergency Food and Medical Services, Emergency Fuel Service and Home Winterizing projects.

When a participant does not come to eat on a day expected, someone needs to visit and see why. Is he ill? Has he clothing? Has someone inadvertently hurt his feelings? Is there a family problem? The needs assessment must be an ongoing effort.

The Office of Economic Opportunity has given no indication the CAA's will be funded beyond June 30, 1974. The personnel and services we are now using for title VII will no longer be available after May 17. We have no funds to replace these services, or to maintain the services of personnel already trained and experienced in this field. These outreach workers are also needed to assist in providing inservice training to site hostesses and volunteers, and serve as a backup staff for illness, vacations, et cetera.

Another area of pressing need is the upgrading of salaries for site hostesses and bus drivers. The present budget allows payment for 6 hours a day, 5 days a week at $2.20 and $2 per hour respectively. With the duties the hostess must assume in operating the centers, planning programs, making personal contacts, and keeping necessary attendance, meal and volunteer records, there is no possibility of these people working less than an 8 hour day. What was originally envisioned as a part-time diversionary activity has bloomed into a full-time responsible position requiring many skills and much sensitivity.

With five counties to cover, the project director can only make personal contact with each center 1 day a week, with little time left for administrative duties and program coordination. Therefore, the hostesses must be able to operate their centers with a great deal of independence and self-confidence.

The bus drivers spend much time on the road each day with several trips required to transport people to the sites and again to their homes in the afternoons. In between bus runs, they assist in the centers with serving and recreation.

Again, a person with special sensitivity is required to deal with the insecurities of old age and problems connected with physical handicaps. The drivers must also be responsible for maintaining the vehicles, and they are now putting in a full 8-hour day, with salary for 6 hours.

The title VII program is the first Federal or State program benefiting our older citizens which has been funded on the Upper Eastern Shore with the exception of a senior citizens housing complex in Elkton and a similar grant to build such a development in Easton, not yet completed.

Senior citizen activities have been church organized and volunteer operated. They consist mainly of weekly or monthly get-togethers. The Community Action Agency has lent support and encouragement to such groups, providing transportation, meeting space and a program coordinator to work in three counties. But even the CAA has had no specific funds for the elderly.

Current fuel shortages and price hikes, rising food costs and loss of personal assistance from welfare offices have created a new crisis in existence for this growing group. They must have someone to depend on. It is not enough to provide a meal. We have to help these valuable people, who have already made their contribution, to cling to pride, independence and security.

If medical science is going to provide for longer life, someone has to provide a reason to live. Title VII has made a beginning in this effort with the congregate feeding concept, but we need a lot of support to reach out to those still waiting for our help.

If we are serving 130 meals a day in 5 counties to approximately 260 registered participants, we have an equal number of applicants awaiting space in our centers. These numbers of people represent only a part of the target population in each county because of transportation problems and because of the small quotas our funds will enable us to feed. A minimum of two centers per county would allow us to divide each county in half to concentrate on shorter bus routes to provide more time for center activities, and to provide more time to devote to other needed services.

Whatever we do, we must be cognizant of the fact that we have opened a new door on hope to people who were sitting behind closed curtains awaiting nothing. We told them to come out to see what we had to offer. How can we possibly let them down?

Thank you.

Senator BEALL. Thank you, Mrs. Townsend.

Our next witness will be Mr. Stirling Willan, of Havre de Grace.

Mr. WILLAN. I might state at this point that I am on the receiving end, in a sense, because in my group, I am not one of the Commission

on Aging. I am one of the senior citizens who started 5 years ago hoping to get in just this sort of thing.

Senator BEALL. We are particularly glad to have the viewpoint of the consumers expressed before our hearing this morning.

Mr. WILLAN. Havre de Grace allotted 52 meals per day, 5 days per week.

The growth rate since April 1—it was 12, and of yesterday it was 44. With this growth rate, we have come up to approaching the 52 which will probably be reached next month, leaving us in an embarassing situation in Harve de Grace where it is located.

When we reach that point, what are the possibilities and what can we do for these people coming in?

Transportation is one of the weakest points in the setup we have at the present time. The transportation now consists of one vehicle, a sedan, bringing in three or four persons. This situation, I think, can be remedied if we had the additional spaces to handle those people because we are supposed to be including the town of Darlington, and also of Aberdeen.

Now, a schoolbus would be a desirable thing, but I have not sought for that because of the fact that we have simply 52 spaces.

The majority of the people, you can see, are coming in on foot. It so happens that the meals are served in two churches diagonally across the street from each other in the center of the town. They are in the recreation hall of each church.

It is catered, and the meals have been excellent.

There has been not one derogatory comment about the meals, which I am more than pleased about.

It is not an institutional-type meal that you see normally served out under those conditions. It is remarkable.

I had several friends who died of malnutrition in this age group and it hurt. The average person is a woman alone who sees four walls and nothing else every day. This type of thing is typical.

They show up the first time, more or less carelessly dressed. But the second day, that woman comes in, in keeping with the rest of the group, and it is a lift up for those people.

I think that that alone and the conversational end of it compensates for a lot of things with these people. They are not seeing the same thing every day. Those are the two things.

Those are fringe benefits coming from this group.

I feel that the meals should be preserved from the standpoint that once they want to come and feel that it is not welfare, that they be told that they can contribute what they wish. And this is being done in the way of a contribution rather than saying that this was a gift because that is where our major problem comes in. They do not want gifts. They want to be able to say they participate and they took care of themselves.

It is worthwhile to say, yes, you can give whatever you like.

This is working, and this is where our group is coming from, the people that are alone.

I wish we could get more men out. The men are not responding. We are getting nine women for one man.

Now, can I answer any questions from the consumer's standpoint?

Senator BEALL. We thought we would go through the panel and then come back for questions.

I would point out you made a number of very interesting observations. You pointed out two problems. One is making sure you are serving the desired number of people, and the other is providing the necessary transportation.

But as a project provides better transportation services, you reduce the resources to provide the meals that are necessary.

Mr. WILLAN. Exactly.

Senator BEALL. Obviously, this presents a problem that is going to have to be dealt with one way or the other.

I was also interested in your comments about the collateral benefits which we had hoped would come from this, because it is not just a nutritional program. It is a program designed to improve the whole lifestyle, the whole well-being of the person who is a beneficiary.

Mr. WILLAN. It is amazing how the groups of people not knowing one another are getting together and having conversation. And some of them are coming at 10 o'clock in the morning to be able to talk to one another.

They tell me that, very frankly, that they are getting together and some did not care whether they had a meal or not. That was amazing to me.

The fact that we can get them to come out of their four walls and can come in to something of this type and see one another, they are not dependent on anybody, and come in on their own two feet, I do not know what is going to happen when they start getting transportation, except we will be flooded.

Senator BELL. If we can improve socialization and lift the spirits, it would certainly be a great benefit to the beneficiaries.

Mr. WILLAN. It is certainly gratifying to me to see as many participants.

I have a list of the individual participants.

Senator BEALL. We will put the list in the record, Mr. Willan.

[The list of participants at Havre de Grace follows:]

PARTICIPANTS AT THE HAVRE DE GRACE NUTRITION PROGRAM

Participant and her husband: Participant is recovering from a broken hip and walks with a cane. In addition she is so deaf she wears a hearing aid, is badly crippled up with arthritis and has speech problems. Her husband is recovering from a heart attack and a nervous breakdown. Ruby comes in for her meal and we send his meal back with her. She is physically unable to cope with meals but remains neat and clean as a pin. He is seventy-five and she is forty-nine.

Participant and her sister: Participant is blind from Glaucoma and has to be assisted to walk in. Her sister brings her in every day, helps her in, leads her to a chair, cuts her food up and guides her in her activities. They both are very outgoing and love to talk.

Participant lives alone, walks with a cane and is very poor-sighted because of Glaucoma. Recently she had a fire in her home.

Participant is (I believe) seventy-seven years of age—very poor sighted—walks with a cane and is going to be operated on next week for cataracts on her eyes. Her daughter comes in and works as a volunteer four days-four hours per day and brings her mother and three other lady participants in with her.

Participant is a man who lives alone and is a recovering alcoholic.

Participant is Ninety-two years of age. Very spry, very alert, very most interestedly talkative.

Married couple, both in their early eighties. She is very feeble as she is recovering from a stroke, he is recovering from a broken back received when he was up on a ladder on the second story painting.

Participant—home bound—lives alone and is just home from the hospital with a heart attack. A volunteer takes a meal to her.

Participant—bad heart and has difficulty walking—walks with a cane. She lives about a block and a half away from the site so on nice days she walks over for the exercise—she says she walks a little—stops and rests a little—walks a little—rests a little and so she makes her way over to us. Bad weather we go to get her.

A FEW COMMENTS MADE CONCERNING PROGRAM BY PARTICIPANTS

"I know I can afford to eat properly but I just hate to cook and as a result I don't."

"Good morning, I am so depressed and disgusted this morning. Could I please come over, today?"

"The Towers is a nice place to live but I am so sick of sitting and looking at four walls."

"I have nine children but they are spread all over the world. I only have one child in Maryland and it doesn't seem fair for the burden of concern for me should fall on her—after all she has her own family too, but I am so lonely and so grateful for this (program) and I just love you all."

"My Albert says 'Ruby you go eat your meal with the folks, I'll be waiting for you to get back' and when I get back there he is waiting at the window holding back the curtain".

UNANIMOUSLY

The food is so delicious—and so nice to socialize with each other.

Senator BEALL. Our next witness is Mrs. Ida Jo Martin, title VII project director, Washington County Commission.

Mrs. MARTIN. In our program in Washington County, we serve 100 good meals every day. These go to elderly persons who have various kinds of needs. One-third of them are black people.

We have been serving these people for only 3 months, but have already been able to note genuine benefits for many of them.

One of the outstanding physical needs among the elderly people is good nutrition. Left so often alone, their eating habits tend to become more chance than plan. Many of our participants admit that, when eating alone, they almost never eat vegetables, and protein is sadly lacking.

To help them be more aware of vitamins and minerals, we have a nutrition session at each site to learn the basic needs of the participants. This was conducted by the nutritionist of Washington County.

Now, she and her staff are carefully planning a session of nutrition education to be held at each site. This will include shopping for food, planning meals, and cooking for one or two persons.

We provide them one meal a day, at noon, 5 days a week, and we are concerned in seeing that they will provide for themselves nutritionally balanced meals the remainder of the time.

I would like to mention a few of our participants.

Mary, aged 83, came to us looking thin and pale, and obviously sober and unhappy. In a surprisingly short time, she not only looks and feels better, but is laughing and joking with friends.

Mary quoted another deeper need of the elderly, their need for association with others.

She said, "We elderly people do not get out among other people enough." She now enjoys visiting the new friends she has made.

Mary is one of those of a former generation who worked hard, paid her taxes but, in her old age, has almost nothing, largely because of not her own doing but because of inflation that has left her behind.

Paul, who is 70, told me the fellowship at each meal means so very much to him. Along with others, he has said he almost dreads weekends when he must go back to eating alone, to unplanned and, too often, uncooked meals.

Bertha has had to eat her program meals alone at her home because of a broken hip. She tells us she is very anxious to be able to come to the center again and eat with people.

Helen is similarly handicapped but permanently, with one leg amputated, she is brought to the food center in her wheelchair. Formerly, she always ate alone. Now, she easily shows her happiness in being able to share both meals and association with others.

These people have learned by such associations to share some of their concerns and problems. They often find some relief just in talking with a sympathetic listener. They truly do care about one another.

There are other eligible elderly people in our areas who, because of a handicap or illness, are not able to come to our meal sites. They live alone and are in need of nutritious meals but, because of the low percentage of home-delivered meals which are allowed, we cannot help them.

I fear that without Federal help, this nutrition program could not continue.

There are so many demands for funds made on the local public. If raising funds for this program were made the responsibility of our local community, the nutrition program would definitely suffer and probably even come to a halt.

We in America have spent millions each year for aid abroad, which has been good for it is needed. But we have similar needs right here at home, too.

Our elderly people are most worthy. Almost all of them were once taxpayers, but are now trapped in a lost level of living because everything has gone up except their finances.

These are proud people who once made their own way. They deserve help.

I believe there is no limit to the good this program can do for our elderly people.

Thank you.

Senator BEALL. You raised a question about the number of home-delivered meals, especially the ceiling on the percentage of home-delivered meals.

We are of the opinion that that limitation may be modified by AOA, but we are checking to determine if that is the case.

Thank you very much, Mrs. Martin, for your testimony.

Our next witness is Ms. Hildegarde Benefield, title VII project director, Prince Georges County's Division on Aging.

Ms. BENEFIELD. Gentlemen, it is both a privilege and an honor to appear before you today.

My name is Hildegarde Benefield, and I am the project director of the title VII nutrition for the elderly program in Prince Georges County, Md. It is my intention to inform you of what we are currently doing there, of our projected plans, and of the goals we want to reach.

On March 18, 1974, we began serving at two sites, 14 home-delivered meals from one site, and 40 meals at a congregate site.

In April, we began operation at three more sites, bringing to 94 the number of persons served daily.

In May, we will expand to three more sites, and still another one in June.

By June 17, 1974, we expect to be providing a total of 164 meals every day, at nine different locations. Sixteen meals will be delivered to homebound participants. The balance will be served at congregate sites.

Of the nine sites that will be in operation by mid-June, four are low-income housing for senior citizens, three are churches, and two are town halls. All of them will be staffed by participant volunteers, with one exception. The manager of the largest site receives a stipend for her efforts. I am the only paid full-time employee.

The full program will cover the entire county, from Laurel, at the extreme north, to Aquasco at the southeastern tip.

In selecting the sites, we were guided by two criteria—concentrations of elderly population and receptiveness of the community.

In every case, we seek community support, for without it this program cannot succeed. In fact, in two instances, persons in the community approached us with requests for the nutrition program.

We have two basic goals.

The first is, of course, to provide nutritious meals to as many as possible of our elderly residents. Prince Georges County has a population of 720,000. Of this number, approximately 50,000 are aged 60 and over. Obviously, 164 meals per day barely scratches the surface of the need.

We have already exceeded our original proposal which was 120 meals a day.

Our other goal is to begin to break down the barriers of isolation, loneliness, rejection, and poverty that are facing so many seniors here and everywhere. We plan to start by providing a broad range of supportive services—transportation, recreation, health and welfare counseling, information and referral, and so forth.

I wish each of you could be with me as I visit our sites. The smiling faces and the hum of happy voices would be far better testimony to the value of title VII than anything I can say.

Please accept my personal invitation to visit us at any time.

Senator BEALL. Thank you very much, Ms. Benefield. I am sure it would be a refreshing experience to see people benefiting from this program. I am looking forward to visiting the Waxter Center and McCulloh Homes nutrition projects immediately after today's hearing.

Our next witness is Mrs. Eleanor McKnight Snyder, chief of the division of nutrition, Baltimore City Health Department.

Mrs. SNYDER. Senator Beall and members of the Subcommittee on Aging that this information may get back to, I first want to apologize in not supporting all the amendments and legislation that is in the Congress.

I identified in my written statement just Senate bill 2488, but anything that is going to help it out, keep going with it.

I am pleased to speak to the point of extending title VII of the Older Americans Act because of my experience in planning in Baltimore City and in the State of Maryland, to attempt to fully utilize the benefits of title III and title VII when they became available in Maryland.

"Eating Together in Baltimore" has evolved as a Baltimore program, by the direction of the mayor, is administered by the Baltimore City Health Department, but coordinated by the Commission on Aging and Retirement Education throughout the community.

We feel that we have established the program on a sound basis, within the framework of established agency activities.

Chronologically, it took several years to reach such a point.

Because of the experience in this community with home-delivered meals—Baltimore Meals on Wheels, Inc., opened their first kitchen in October 1960—there has been continued interest and concern for promoting the nutritional needs of the senior citizen and finding a means for nutrition programs to be reaching the maximum of individuals in this area.

In December 1969, at the White House Conference on Food, Nutrition, and Health, specific problems were delineated to be used as a basis of subsequent legislation.

In September 1970, three of us from Baltimore—they are all three in this room—testified before a House Committee in support of Congressman Pepper's bill that proposed a nutrition program for the elderly.

During the spring of 1971, the Nutrition Task Force prepared material for inclusion in Maryland's report, "A Mood of Rebellion," for the White House Conference on Aging in December.

Following the passage of the bill, and the signing of it by the President in March 1972, Baltimore's Mayor William Donald Schaefer requested the Commissioner of Health, Robert E. Farber, M.D., M.P.H., to assign the Division of Nutrition

> to set up a committee of the affected public and private agencies to develop a plan for implementation of Title VII once the funds become available. Please keep my office informed of your progress. If there are any major issues which the committee is unable to resolve, they should be brought to the attention of my cabinet.

The first meeting of the group was held on August 30, 1972.

Since the Federal Register published the regulations on August 19, the committee had its work cut out for it. Meetings were held monthly, but progress seemed very slow, caused by a veto of the funding legislation and changes in the administration of the State agency.

However, before the end of the year, the Maryland Commission on the Aging informed us that title III funds were available for a demonstration and planning grant, to be used to plan a congregate feeding program that would reflect the objectives of the title VII nutrition program.

A small ad hoc committee, representing the key city agencies, was selected by the mayor's office to prepare the proposal. This was a 75–25 grant match. The match was made up of in-kind services within the cooperating agencies.

The grant was awarded to Baltimore City on April 1.

"Eating Together in Baltimore"—we like this name, rather than saying old folks.

"Eating Together in Baltimore" was launched on August 1, 1973.

This grant of $65,000 was designed to serve between 150 to 200 older adults, at three or four different locations throughout the city. This demonstration program attempted to evaluate the necessary

techniques to incorporate nutrition services into existing programs for older citizens.

The sites selected for the initial program were in target areas where there were living a large number of individuals over 60 years old. I have put a map of Baltimore City program up on the stage.

The red areas show the primary concentrations of older people on limited income, with high proportions of minority folks.

The green areas show the secondary concentrations of older people on limited income, with large percentages of minority individuals.

We did this through city planning. As we identified the target areas, if we then established a site in the red or green area, we would eliminate questions as to whether we were giving priority to low-income and minority individuals.

They also were chosen to give us some comparisons.

For instance, they were chosen in a housing area for the elderly, near a new high rise for the elderly in a senior center, and in a community center previously operated by model cities as a day care center.

We considered that maximum participation might be approximately 50 persons.

Within the month, it was learned that the title VII funds were being distributed to the States. Because of this, we were directed to expand site locations quickly, with a goal of 500 participants by October.

Within that month, we had established 10 sites and were serving 500 meals each day, 5 days each week.

The experience with a title III grant was invaluable to us in being able to move quickly. However, we continue to be concerned that the expected intent of the program to have necessary supportive services along with the noonday meal could not be in operation quite as quickly.

In fact, the necessary staff to create a program of this size was not available until March 1974.

I would like to give public acknowledgment to the two staff members of the title III project, Mrs. Catherine Lake, our accountant, and Miss Carol Lomicky, R.D., M.A., our nutrition coordinator, and many staff members of other agencies who added the duties of being site managers and providing supportive services to their regular duties so that this program has already become a vital resource in this community that adds to the dignity of life for our older citizens.

We think that we have included a staff of quality—a project director with management expertise, coordinators of the necessary components of the programs, nutrition education and services, supportive services, and training and continuing education.

An accountant and a secretary make up the core project staff. These are augmented by part-time site leaders who live in the area of the site and preferably over 60 years old, mainstream workers in the public housing sites for maintenance of the eating area, and senior aides that have been involved through the department of recreation.

It is my belief that this program, title VII of the Older Americans Act, should continue as a permanent program, and be programed into available services in all agencies who profess to provide services to the elderly.

With a real commitment to the elderly, an atmosphere can be created that includes nutrition services as an important facet of all

services, particularly since the food consumed is one of the most important environmental factors related to optimal health.

With adequate nutrition, human performance improves so that our older friends may have additional opportunities to demonstrate to all of us what a great national resource we have living in our own neighborhoods.

We have just scratched the surface of need. We base our estimates on the 1970 statistics, which are now 5 years old.

There are many changes in available income to the senior citizen. The value of the dollar has sunk and fixed incomes suffer.

The legislation must be enacted to extend, in a permanent fashion, the services involved in the title VII nutrition program. We can do no less.

Senator BEALL. Thank you very much, Mrs. Snyder.

You have done an excellent job in Baltimore.

Mrs. SNYDER. Thank you. We think so. We are proud of it.

Senator BEALL. Our next witness is Ms. Lenora D. Robins, Snow Hill, Md.

Ms. Robins, you may proceed.

Ms. ROBINS. Thank you, Mr. Chairman. I am happy to be here.

I am a consumer, so as one of those participants in the program, I can assure you it is certainly one we hope will continue.

The MAC senior citizens center located at Snow Hill, Md., Worcester County, has made a tremendous impact in the lives of its senior citizens.

The varied programs, consisting of ceramics, sewing, crocheting, painting, song fests, and so forth, allows a member the opportunity to make a choice of activities, thereby giving many a new lease on life.

Can you visualize one group working with ceramics, another quilting, another crocheting, one sewing, another preparing laprobes for the needy at the hospital. These senior citizens just enjoy doing those things.

And there are some playing bingo or checkers.

We also have a monthly schedule. I would like for you to see this. I will give you this at the end.

Senator BEALL. We would like to have that for the record.

Ms. ROBINS. The nutrition program is working; 225 meals in the 3-county area, which consists of Somerset, Wicomico, and Worcester. We have 75 meals in each county.

The meals are served hot. It is a well-balanced meal with dessert and milk.

We have so many persons that we do not have enough meals, so many receive a sandwich with soup and dessert and milk right at the center which is given them, in order that—not to have them feeling—well, I would not say they are left out, but just different from those who have meals.

In one of the rooms, there are tables placed, and those who are given the free one with the soup and the sandwich are together, and those who are giving a donation for the one they receive are in the other two rooms.

It works very nicely.

We have music going at the same time. They are talking and chatting, and it is just a very friendly and very warm feeling.

People give a donation of 25 cents or more, if they like. They place it in a little envelope with no name—no mention is made of it—and this money is used to go into the nutrition program again. It is placed back into the program.

We have three main centers and eight satellite centers in the three-county area.

For many of the elderly in our area, especially the men, this is their main meal because many of them live alone, and probably you do not have some of the little houses in and around Baltimore, you might call them just shacks, where many of them live, But for them it is their home and they are transported to the center and given this one main meal.

Often, I have seen the case with us in Snow Hill, if there is one extra or two extra—one or two of these men would take the extra meal and say, "I will have it for my dinner."

You need not worry, he will be back tomorrow.

Nutrition aides conduct programs in nutritional education. We have a nutritional committee within our task force who improve the operation of the program in each county.

For instance, one lady in a wheelchair in Worcester County, who I think had been just sort of isolated, now gets a meal each day. And often she will call by phone, because I think she has been in a wheelchair for about 10 years.

It is interesting to see the encouragement and the enlightenment and how she feels about this program.

We hope this program can be expanded.

We need more space in Worcester County. Our senior citizens center is not large enough. We are simply bursting at the seams down there.

We need more outreach workers to work full-time with title VII, to find participants and assist in the meal delivery, provide education service for the elderly in shopping and to the social service for food stamps and so forth.

They are also being taken to the doctor and the dentist, and we have had field trips. They have had picnics.

Occasionally, you might find us having a covered dish and three centers coming together, and they will sing and talk. And one other thing we have that other counties may not have, and that is the ministerial association in Worcester County, in Snow Hill, once each month will take the senior citizens from throughout the county to their church for a luncheon and song fest.

We have had as high as 130 to 175 people. It is just amazing to see them get dressed, going to the ministerial luncheon. It is one of the fine things that the ministers do for us in our county.

Let me assure you that with the nine buses for the tricounty area, including the two that deliver food to the center, we just need more of this sort of thing in Worcester County.

Senator BEALL. Thank you very much for your excellent testimony.

[The monthly schedule and report referred to and subsequently supplied follows:]

REPORT

(By Lenora D. Robins, regular participant)

MAC—Senior Citizens Center located at Snow Hill, Md. (Worcester Co) has made a tremendous impact in the lives of its senior citizens. The varied programs consisting of—ceramics, sewing, crocheting, painting, song fests, etc., a member has the opportunity to make a choice of activities thereby giving many a new lease on life.

Can you visualize one group working with ceramics, another quilting, another crocheting, one sewing, another preparing lap robes for the needy at the hospital, and some playing bingo or checkers?

Have you seen any of our monthly schedules? Members are also being taken to Dr.—Dentist—shopping tours, etc.

Our nutritional program is truly beneficial. The hot lunch is a "God send"—to many of the women and especially the men (for many live alone) and this one good meal is for many their main meal for the day. It is a well balanced one that often includes dessert. For those not listed on the regular program for meals, a delicious soup, sandwich, milk and dessert is provided. Could we ask for anything more?

This program simply needs to be expanded as much as possible and be assured the senior citizens will always be grateful and at the Center to receive the benefits offered.

34-262 O - 74 - 4

Mrs. Jean R. Monroe, Director
109 N. Washington Street
Telephone #632-1277
Snow Hill, Maryland 21863

MONTHLY PROGRAM -- Senior Center APRIL, 1974

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
1 10:00 A.M. Ceramics 1:30 P.M. Linda Krabill Metal Arts (Save your tuna fish cans)	2 10:00 A.M. Quilting 1:30 P.M. Pat Dennis Musical Program	3 1:30 P.M. Pottery demonstration Prof. Satchell U.M.E.S., Princess Anne, Md.	4 10:00 A.M. Bridge and Games	5 10:00 A.M. Ceramics County-wide Bowling Ocean Lanes
8 10:00 A.M. Ceramics County-wide Christening Party - "The Yellow Bird" Covered Dish at Noon	9 10:00 A.M. Quilting 1:30 P.M. Karen Chatham Home Care Coordinator (Movies - Blood Pressure)	10 10:30 A.M. - Poetry Mrs. Groman Perdue 1:30 P.M. Painting Mrs. Downing	11 10:00 A.M. Bridge and Games	12 H O L I D A Y (Good Friday)
15 10:00 A.M. Ceramics 1:30 P.M. Easter Parade = Crazy Hats Music by Vera Birthday Celebration	16 10:30 A.M. Florence Lang "Flower Power" 1:30 P.M. Rev. & Mrs. Jerry Price	17 10:30 A.M. Mrs. Agnes Dewey, Extension Home Economist 1:30 P.M. Painting Mrs. Downing LAST DAY FOR LUNCHEON RESERVATIONS	18 10:00 A.M. Bridge and Games	19 10:00 A.M. Ceramics 12 Noon SHARP Ministerial Luncheon at Trinity Methodist Church in Newark
22 10:00 A.M. Ceramics 1:30 P.M. Blossom Tour Shad Landing	23 10:30 A.M. Popsicle Flower Pot Holders 1:30 P.M. Library Film "The Real West"	24 10:00 A.M. Quilting 1:30 P.M. Miriam Vincent Musical Program	25 10:00 A.M. Bridge and Games	26 10:00 A.M. Ceramics 1:30 P.M. Sing Along with Father Yutzy
29 10:00 A.M. Ceramics 1:00 County-wide Chorus - Berlin	30 10:30 A.M. Film Flossie Douglas 1:30 P.M. Richard and Vera Bolen			April 27th All Hallows Church, Snow Hill Bazaar Plant Sale

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ITEM NUMBER	TIT
1006-A	95/1: House Bill Nu (an act); 5294 (S. 6502 (S. rp. 375) 7401 (H. rp. 574); 808, 819, 820); 80 8516, 8517; 8519; 8578 to 8580; 8588 8606 to 8609; 8612 8634; 8637; 8639, 8675; 8679 to 8687 8711, 8712; 8728;
	95/1: House Resolut (H. rp. 541); 725, 729 (H. rp. 562); (H. rp. 571); 741;

Senator BEALL. Now, Mrs. Mary McLuckie.

Mrs. MCLUCKIE. Senator Beall and staff, I am glad to be here.

I am Mrs. Mary McLuckie of Allegany County. I am a citizen of Frostburg, Md., where Senator Beall lives. That is the reason I know him so well.

I am 80 years old.

They asked me to come, and I said, no, I do not want to go. They said you are the oldest, you go. So, here I am.

I have been attending the nutrition program for the elderly since it started in our area on February 4 of this year.

We have served 1,850 meals or luncheons to the senior citizens in 58 days; we started with 32 and we now have 81 on roll.

There are a few who started last week.

I helped interview the senior citizens. I had been in the hospital ill, and I came home. I had not been able to attend any senior citizen meetings, but it seemed nobody would assume leadership, so they came to me at my home. I started calling around, and we had 32 to attend the luncheon programs within 10 days. I thought that was pretty good.

The meals are delicious. We enjoy them very much.

The program is good for all those people who live alone.

They were saying that there were not many men who came, but we had 15 yesterday, 15 men out of 32, so, you see, there are many widows there, so the men are coming out to see the widows, I think.

This program is good for those people who live alone, especially men who cannot go and shop and do their own cooking.

We enjoy the social part of the program which is very good; companionship and conversation, and we would not have it if we had to eat alone.

Of course, we have some songs.

I was singing yesterday morning, and told them we will sing "If Your Are Happy and You Know It, Say Amen."

We had a preacher there eating with us, and he said, "Well, I am happy, but I do not know it."

He meant that he did not know the song.

We have tournments 1 day every week, as well as classes on nutrition. We have a birthday party once a month and honor the ones who have birthdays in that particular month.

We play games. We have a tournament going now; bingo. It is supposed to run 8 weeks. We are having a lot of fun with that.

We play different games. We have scrabble, bingo, and we play ball. We put a big table there, and we just love our activities.

We take sides, and we really do like that.

The most important thing we need is transportation. We really need transportation.

Now, anybody who has been up in the western part of the State, knows that we need transportation worse than anybody. We have more snow and more cold weather than anybody.

We are just expecting Senator Beall and his committee to do something about that.

There is a need for homebound meals for those people who just cannot get to the meal site. We understand if we have meals on

wheels, we are not allowed to take them out to people who might want them or need them. We do not know whether this is true or not. We were told we would not be able to do that.

There is a great need for homebound meals. This is a good program, and I would like to see it expanded in every area of our county.

We are supposed to have 300 persons in Allegany County by June, or our fund will be cut. We have about 250 eating now.

Why should the funds be cut when we cannot get the rest of the people to come in?

We come and we enjoy it. Why should we suffer though?

We have different groups coming. Maybe we will have a completely different group today than from tomorrow.

The reason we need transportation so bad is because up at the top of town, people cannot walk—older people cannot walk 1 or 2 miles and they do not have cars, and they cannot afford taxi fares.

We have Frost Village, and I told the officials I could get 10 or 12 people to come if they had transportation, which we do not have. So we are just depending on you fellows.

Senator BEALL. We will do the best we can.

Mrs. MCLUCKIE. We are old people and, of course, some days we cannot come. We cannot make it because we have to go to doctors, and we are sick.

If you can stand the noise, you come and eat with us.

Senator BEALL. Thank you.

I would be delighted to.

Mrs. Alice Sykes.

Mrs. SYKES. My name is Alice Sykes. I live in the innercity.

The only handicap I see in participating in the lunch program and it should not be, the only handicap to my working is that my husband is living and still practicing his profession at 82.

I used to think, when I was a child, when I stood around and listened to the old folks talk, and they said if you made threescore and ten, you had had it—I thought that was the end of my usefulness.

I made threescore and ten a year ago, and I just decided I would start a new life.

I have been working with the Waxter Center since I retired about 6 years ago, and I seem to be one of those people who is known as a willing worker, somebody is always giving them something to do, as Mrs. Snyder gave me something to do.

Eating Together in Baltimore is proving to be a beneficial and far-reaching program, although there are many people we have not touched.

There is a phrase I love, and it is, "to reach out."

Mrs. GRAHAM. I think the social services taught me that phrase. I had a talk with her and kept on reaching out.

I think it made me think of a hymn we sing in church, "Reach Out and Touch Somebody's Hand."

This is what we need to do more of, to think of the people alone who are unhappy, hungry, waiting for someone to come and reach out and touch their hands and their hearts.

Many people have never heard of this program, and not all of these people are hungry for food, but for companionship, for friendship, friendly people is what we need here.

We are so happy that the staff here in Waxter has very many friendly people who are in charge.

When you see a stranger come in the door, because she has heard on television about this place, then you want to meet her with a smile and explain signing up for the meals.

I walk up to the people here and I say, "Are you new here?" Let me show you around. Many people are quite shy when entering a new place. They are very happy to have someone say something to them and make them feel comfortable and welcome.

Now, we are talking about eating together. I think each one of us needs to think of reaching out our hand to someone who would not come in of her own will.

I have cut my volunteer work down to church and the Waxter Center. I do not know which one is going to win out.

I am trying to combine them. I know at church I work with the elderly people, after they let me graduate from teaching Sunday school, so we are doing a lot of visiting now to other centers, expecting to set up our own center.

My priest offered to bring us down here on the bus, nine of us, the other day. He had an ulterior motive. He wants me to take charge of elderly people in his church and start a program.

The other day, there was a lovely program up at Orleans and Broadway, given by the Senior citizens and it was from Broadway Apartments and held in the basement of the library. We have many people from our church who have moved up there. We went to that program, and it was just a wonderful experience for our people, so this is the thing we are doing most visiting and hoping to get started with our own program.

The people we go to see are often alone and discouraged.

I love the attitude of my priest, and I loved the story about the ministerial alliance giving a luncheon that is a lovely idea.

I am marking down some nice things you mentioned here. Our group came down here, and I met other clergymen who had brought in groups of people in station wagons and I kept right after them, and said, "you go there and sign up, sign up, that's what I brought you down for—to enjoy the luncheon program and activities."

I think we have, at the top of our program where you sign up for the meals—what does it say, Mrs. Snyder?

Mrs. SNYDER. It says "Eating Together."

Mrs. SYKES. "Eating Together" in Baltimore.

Below that, I would like to say, "Reach Out and Touch Somebody's Hand."

If you come down and eat with us come next time and bring somebody you know. Reaching out is the answer to contacting more people.

I know everyone of you, Senator Beall too know someone who is out there alone and depressed and you can say to each other, "Why don't you bring somebody else in?"

I have two ladies I am going to bring in in wheel chairs. They protested. I said, "Oh, no, this place is made for wheelchairs." The people who come here seem to be happy.

Of course, meals for the elderly is a wonderful thing.

I have to cook for my husband. I could spare you more time if I did not. He is very unhappy now because I usually start cooking his dinner after breakfast. I often leave suddenly heading for the Center. He has told many people that I must be working an 8-hour job because I leave before 10 o'clock every day, and when I came back it is 3, and I am exhausted.

But reaching out to someone is the thing we need to think about.

Bring people in who cannot come alone.

Well, I hear these people talking about buses and transportation, I am going to start working on that, Mrs. Snyder. It's a great idea.

Don't stop now! Let's keep on keeping on

Mrs. SNYDER. Good, because we need it. It is just as much our need in the urban area as it is in the rural area.

Mrs. MCLUCKIE. We took a lady out yesterday.

I have become very friendly with people who own cars. I do not have a car. I use the public transportation.

Some of these people cannot get on public transportation.

The scene and the activities and the program open up a new world for many people, just someone to talk to them in a friendly way.

Of course, this place looks like paradise to them. Of course, it is to me, too.

Senator BEALL. Thank you, Mrs. McLuckie.

Our final panelist is Mr. Joseph Ferrier, of Montgomery County, also a consumer.

Mr. FERRIER. My name is Joe Ferrier. I am going to cover a lot of subjects very briefly because I realize the value of time, and especially to all the people sitting back here.

Senators become patient but not everybody else has that virtue.

I voted for your father before you. I am a Democrat, but I went to him one time when I needed help, and he heard my plea. I have never forgotten it. I hope you take after him, and I think you do. I am glad to see you on this Committee in the Senate on Aging.

I am retired on disability from the U.S. Government Printing Office. I am a member of the Employees Chapter 357, and active in civic affairs, and a politician 365 days a year. I was an officer and negotiator in the union for the past 40 years.

The program in Montgomery County, as I see it, in Tacoma Park, Senator Beall, is a good one. There are good people there. There are improvements needed. I am going to talk about the conditions, not the people.

My wife talked to her doctor, Dr. Louis Shuman about this program yesterday. I do not have any medical background. I will paraphrase what he said.

He said it is a good program. It keeps people from dying. They go and meet people 5 days a week. They get out of lonely apartments and look forward to it as a pleasant part of their lives. And it "psyches" them up. That is a medical opinion.

I might say, also, that one reason that old people get out to vote, come rain or shine, is because they are lonely. It gives them a chance to get out, and so does this nutrition program.

We need more outreach in my county, in Montgomery County. It has got to be much stronger. If you want to kill this program, all you have to say is, it is for poor people.

If this was something that required a stamped pass from your office, Senator, they would be stacked up outside a block long. That is the way I would like to see it.

I would like to see the demanding for more money, more transportation, more people working in cafeterias and on maintenance in places. We need that. The people are there. They want it and need it. But you have to go out and get it. You have to recruit them just the same way as you would any other organization process.

I think also you might want to limit the age just a little bit for disability retirees. The reason you consider old people is they are not earning so much. They are not as strong. They are not as sure-footed. And for disabled people, the same is true.

The food is good. There is variety. It is well-rounded, good quantity.

Where I go, over to the school on Maple Avenue, nothing is wasted. If they get something and do not like it, they trade with the guy next to them for something they do like. I have seen some of the people take home a roll or carton of milk. They have eaten what they want at the time, and they are going to have that at supper time, along with whatever else they have. These are good things.

The seating is not too hot. They have round stools with no backs on them. And you remember that as you get older, you are not quite as surefooted.

We have a blind man that comes there on crutches. We seat him in a chair at the end of the table. We have a lady who comes in on a walker, and she sits in the chair at the end of the table. Probably most of the people eventually should have chairs.

This is a pilot program, and it is doing good, and it should be better. We have a Hondurian lady who speaks nothing but Spanish. Every day she says grace. The people love this program.

Now, as to the matter of volunteers and busdrivers, there should be a provision that these people get their lunch for free. We have people coming in there and they work with the people as volunteers. They are not on the payroll.

We have people that drive buses. They come in there and they are not making a lot of money. They maybe go out somewhere and take a nap. These people should get their lunch along with the people they take in there. The Bible says you shall not muzzle the ox that treads out the corn.

They have suggested a possible closing of East Silver Spring School, because they are not getting enough of a crowd. That is wrong. The crowd is there.

The fact that they are not getting the crowd does not mean you close it up any more than you close it up because you are not getting enough kids in school. You go out and educate them. You bring these people in.

Everybody up and down the line here said this is for lonesome people. Lonesome people do not go out. They have to go after them. That is why they are lonesome. They cannot reach out.

I might say, Senator, this should be fun. The lunch is big stuff. I would have liked to have seen coffee and doughnuts here today. If I go to your office, I would like a bowl of bean soup.

But the lunch is not the main thing. The main thing is happiness, companionship, being part of the mainstream of life. That is what counts.

The lunches are a very good added attraction that keeps them alive. It gives them something that will round out their nutritional background.

But, the lunch is secondary.

Now, at our school, they have music classes, there, and I want this off the record.

[Discussion off the record.]

Mr. FERRIER. I would like to say this, Senator, the jurisdiction on this thing is too far away in certain cases from where it should be applied. Now, we have a good outfit up in Rockville, I like them, and Joe Price was kind enough to invite me to come down here today.

I know Don Rowson and the rest of them. I have got no squawks on them as individuals. But this thing should be a grassroots thing, just like political machines.

You have got block captains, precinct captains, ward leaders. They know what is going on. If you want to find out something, you do not listen to me. You talk to somebody down there in my precinct, You find out what they think. The same with this, this should be a localized thing.

Our site manager has a lot of redtape to go through. They wait 3 weeks to get their mileage. And remember these are old people. Their incomes are quite small, and that is why they took these jobs at 2 or 3 hours a day at minimum wage.

You should not have to wait 3 weeks to get your mileage.

I want this off the record.

[Discussion off the record.]

Mr. FERRIER. Now, Senator, the programs that the people like the best are things where somebody comes in with "How Consumers Get Gypped," and how to get the best for your money buying groceries.

Now, a little bit about general health matters. Sometimes eyesight or other things or loss of hearing, which are liable to pester old people, or the danger of falls, these are the things that are particularly interesting to them. They do not care too much about movies.

Besides, the lady with the guitar is going to come in and wave her hand.

But they do like to talk to each other. They like to ask each other, say, how do you get on this thing to get food stamps, and so on. That might be quite interesting to them. They are not going to go some where else. They want to ask someone next to them confidentially.

This is a town meeting. It is a good thing. It makes people alive.

Thank you.

Senator BEALL. We appreciate your testimony. You have all been very generous with your time and some of you traveled considerable distances to be with us this morning.

You have all presented points of view that are necessary for us to have. As project administrators at the local level and consumers you have added an important perspective to our hearings.

I got essentially three messages.

First of all, there is obviously a great necessity to continue and expand this particular program, to make sure that it continues to grow in the way it has grown since its inception.

Second, we have an obligation to reach out and get as many people involved as we can. It seems to me that, if there is a present weakness,

it is the inability to reach out and bring in the people who need the program.

Finally, we have that transportation problem which apparently exists everywhere in the program.

We are going to have to find a way to make sure that transportation is available so people who need this particular program are not denied the benefit because of an inability to get to the project sites where the program is administered.

Mr. FERRIER. Can you write transportation into it as an essential basic part?

Senator BEALL. We have mentioned transportation all throughout the Older Americans Act and we can and will, at the committee level, consider the transportation needs of title VII. We will also contact the Department of Transportation to seek the kind of coordination that is needed to begin finding solutions to these problems.

Mrs. SNYDER. May I add one thing?

He emphasized a point about handicapped and disabled people.

In our public housing for the elderly, for instance, the other tenants who live there are people who might be 55 or handicapped or disabled.

We have a lunch program going, but the disabled person cannot participate.

I know we have got all sorts of age limitations or age eligibility, but maybe the age on the handicapped might be a thing to get into the legislation.

It breaks our heart when this has to happen.

Senator BEALL. I think that is a very useful suggestion. I would hope there is some way to modify provisions of the legislation to accomplish that.

We appreciate your coming and hope you will be able to stay for the remainder of the hearing. We have one more witness this morning, Mrs. Peggy Sheeler, executive director of the Baltimore Metro Meals on Wheels.

STATEMENT OF PEGGY F. SHEELER, R.N., EXECUTIVE DIRECTOR, MEALS ON WHEELS OF GENERAL MARYLAND, INC.

Mrs. SHEELER. I thank you for the opportunity to present my observations concerning title VII from the perspective of a private nonprofit home-delivered meal program.

The meals on wheels program was started in Baltimore by the Baltimore section of the National Council of Jewish Women, the health and welfare section, Home Economics Association of Maryland, 14 years ago, with 10 clients and 30 volunteers. People served two meals, 5 days a week, including all holidays.

At present, we are serving 550 people from 11 sites utilizing 1,600 volunteers. Sponsorship has grown through the religious community with the central office, which handles screening and intake of clients, develops meals on wheels programs, and trains volunteers, is funded through the United Fund of Central Maryland, voluntary contributions, and title III, Older Americans Act grant, through the Maryland State commission on Aging.

During 1973 we served 262,000 meals to 1,909 different people.

The Baltimore program has long recognized the need for congregate luncheon clubs for the elderly and, in fact, testified before to encourage the enactment of title VII.

The Senate Committee on Nutrition and Human Need, in 1969, and the Committee on Education and Labor of the House of Representatives, in 1970. Our philosophy being home-delivered meals lessen institutionalization and luncheon clubs lessen isolation, both preventive measures. Home-delivered meals, in conjunction with other home care services, allows the elderly the dignity of remaining in their own surroundings for longer periods of time.

At this time, I would like to strongly urge not only the continued funding of the title VII but, also, planning to have the congregate luncheon clubs a permanent program similar to the school lunch program.

My concerns based upon our experience in our program and with our senior homebound people are there must be a free flow of clients between our home-delivered and the title VII with referrals being made from the one program to the other based on the need of the client.

For example, at one point there was an elderly blind woman brought in to a site and it took three people to assist her. This was a rather traumatic experience for this person.

When the situation was reviewed in light of her needs it was determined that this woman would be better served by meals at home at this particular time.

The percent of home-delivered meals allowed through title VII needs to be more flexible, particularly in rural areas—some areas in the State of Maryland require a greater percent of home-delivered meals because of their rural nature—lack of transportation and the impairment of the elderly.

There is no provision for the development of new home-delivered meal program if need were documented. The existing home-delivered meals, while they traditionally serve two meals, reimbursement is allowed for one meal.

At the present time, they are negotiating contractual arrangements with those operating in title VII, that the reimbursement for home delivery can only be for one meal.

We know if a person is homebound, one meal is surely not enough to defeat malnutrition or to allow for the repair of tissues so the person can recuperate and go back into the luncheon club.

A mechanism needs to be arranged for quality home-delivered meal programs cooperating with title VII and serving the two meals to be adequately reimbursed for both meals.

Also, for these private nonprofit programs to be provided discounted food commodities similar to milk discount allowed in the school lunch program.

It is increasingly difficult to maintain the home-delivered program because of rising food cost and increase in the cost of gasoline.

While the volunteers save hundreds of thousands of dollars, these other costs must be met. It is my belief that no one program can possibly reach all of the need and permanent home-delivered programs of proven value should be provided some assistance of an ongoing nature.

Meals on Wheels of Central Maryland, Inc., is anxious to provide a development and procedural guide for home-delivered meals which would include coordination with title VII.

Negotiations for the funding of the printed matter under our existing title III through Maryland State Commission on Aging are being conducted now.

Communications in the distribution of information from the State to private agencies involved with and affected by title VII needs to be maintained.

I have quoted the sections in my statement, and you are familiar with them.

I urge strongly that this coordination and linkage continue and be improved.

Some examples where coordination have been implemented:

1. Representatives from home-delivered meals have served on the advisory committee.

2. Financial agreements are being made between congregates and Meals on Wheels of Central Maryland, Inc., for reimbursement for the hot meal.

3. A local home-delivered meal site in Dundalk is preparing the hot meal for the congregate setting. I believe this will be a valid experience for future coordination and provide helpful input for the development guide.

4. Clients applying for Meals on Wheels who are convalescing are flagged. The luncheon club is explained to them, and when they are terminated, they are told the location of luncheon club.

I would like to strongly urge you to consider the needs of nonprofit home-delivery meal program.

Two to 5 years from now, the luncheon club recipient may well be in the need of home-delivered food.

Senator BEALL. Thank you.

We are particularly pleased that you were able to testify because the home-delivered volunteer program has played a very important part in the total effort.

I do not think the Federal Government can solve this problem all by itself. You brought us the perspective of one who has been involved with the volunteer program. We were interested in seeing the impact title VII has had on the ongoing programs.

I appreciated your comments regarding the percentage of home-delivered meals. I think that is a good point.

Mrs. SHEELER. My other concern would be if the area is in need of developing home-delivered component that is more than 10 percent, that some funds be allowed to be used in that way, or if there is an existing home-delivered part, and it is felt that it is not up to the standard or not able to expand, then some funds be provided to allow that group to expand.

Senator BEALL. Thank you very much.

Before closing the hearing, I want to express a particular word of gratitude to Mr. Leon Wolf, director of Waxter Center, and the members of his staff for their cooperation and support in helping us with these hearings today. First of all, we appreciate their coop-

eration in making their fine facilities available to the subcommittee. Second, we appreciate their cooperation, in setting up the auditorium and making sure the arrangements went as smoothly as they did.

As I said initially, the people of Baltimore are certainly to be congratulated for their foresight and sacrifice in providing this fine comprehensive senior citizen center.

The Waxter Center is something unique, and I think we can be very proud of the fact that the citizens here have been able to provide it for the benefit of all the people of the city. We are grateful for that.

I thank you all again for your participation here today. This has been very useful to us as we seek to extend and improve this legislation. We must make sure that we get as many people as possible participating in this very worthwhile and needed program.

I received a letter from Dr. Neil Solomon, secretary of health and mental hygiene for the State of Maryland regarding this legislation. The text of this letter will be printed at this point in the hearing record.

[The letter referred to follows:]

PREVENTIVE MEDICINE ADMINISTRATION
DEPARTMENT OF HEALTH AND MENTAL HYGIENE
301 WEST PRESTON STREET · BALTIMORE, MARYLAND 21201
Neil Solomon, M.D., Ph.D., Secretary

April 24, 1974

The Honorable J. Glenn Beall, Jr.
United States Senator
Senate Office Building
Washington, D.C. 20510

Dear Senator Beall,

I regret that I have not been able to rearrange my schedule to attend your hearing on Friday, April 26, 1974 at the Waxter Center.

I heartily endorse and support the Title VII program of the Older Americans Act, that is the Nutrition Program for the Elderly. Since the escalation and continuation of this program over a long range period has immense potential as a preventive health measure by keeping the elderly in the community and out of institutions, this program also has great fiscal significance to this state.

I understand that the present funding is not adequate for the number of eligible population nor for the variety of services (for example, health screening, referral and escort to medical care facilities) within the purview of the Title VII program. If the population to be served is as large as the projections indicate, it would appear that increased funding for a number of years is essential to meet the mandate of the legislation.

Another need which concerns me is the apparent number of non ambulatory persons who could be cared for in their own homes if portable meals were available. If portable meal programs could be expanded to meet the needs of persons who require medically prescribed diets for the treatment of disease conditions, many of these patients might be able to remain in their own homes rather than having to be placed in care facilities. As a preventive measure this has immense fiscal as well as health ramifications not to mention the improved physical and mental health of the patient.

The Honorable J. Glenn Beall, Jr.
April 24, 1974
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Finally, extension of the program beyond one year will, I am sure, facilitate the recruitment and encourage the retention of scarce qualified personnel in the programs which have been initiated.

Again, please be assured of my support of the Title VII program. I wish you every success in perpetuating it at the level needed to assure its success. I would appreciate your including this letter in the report of your hearings.

With kindest regards.

Sincerely,

Neil Solomon

Neil Solomon, M.D., Ph.D.
Secretary of Health and
Mental Hygiene

Senator BEALL. Thank you. The hearing will now adjourn subject to the call of the Chair.

[Whereupon, at 11:40 p.m., the subcommittee adjourned subject to the call of the Chair.]

EXTENSION OF NUTRITION PROGRAMS FOR THE ELDERLY, 1974

WEDNESDAY, MAY 22, 1974

U.S. SENATE,
SUBCOMMITTEE ON AGING
OF THE COMMITTEE ON LABOR AND PUBLIC WELFARE,
Washington, D.C.

The subcommittee met, pursuant to notice, at 9:38 a.m. in room 6226, Dirksen Senate Office Building, Hon. Thomas F. Eagleton, subcommittee chairman, presiding.

Present: Senators Eagleton and Kennedy.

Senator EAGLETON. Good morning, ladies and gentlemen.

The Senate Subcommittee on Aging of the Senate Committee on Labor and Public Welfare is now in session to commence 2 days of hearings on S. 2488, S. 3100, S. 3195, and H.R. 11105.

These hearings are for the purpose of considering legislation to extend and, if it should appear necessary, to revise the authorities contained in title VII of the Older Americans Act relating to nutrition programs for older persons.

The title VII legislation was first passed by the 92d Congress early in 1972. Following passage of this bill, the administration reversed its long-standing record of opposition to the nutrition program and recommended that it be fully funded in its 1st year of operation, much to the surprise and gratification of those of us who had worked to enact the bill despite the resistance of the administration.

Unfortunately, the program remained in limbo for more than a year thereafter because of Presidential vetoes of HEW appropriations bills containing funds for title VII.

As a result of these delays, the establishment and operation of nutrition projects on a large scale did not really begin until in this year of 1974.

The program is now well underway and, in my judgment, it promises to be one of the very best programs we have devised for older Americans.

There are, of course, some problems. The experience to date shows us that we are just beginning to meet the needs of older Americans for such a program; we must prepare for expansion.

Moreover, we must insure that this is not just another soup kitchen but rather that it brings participants into contact with a number of needed services in addition to improving their nutrition.

I hope the testimony at these 2 days of hearings will touch on these questions as well as on other matters that are of concern to our outstanding array of witnesses.

Later on this morning Senator Percy will appear to testify on these measures. At such time as he does appear, because he has other commitments, we will hear from him immediately and suspend the testimony of such witnesses that may then be testifying.

We will now receive for the record a statement from Senator Beall.

STATEMENT BY HON. J. GLENN BEALL, JR., A U.S. SENATOR FROM THE STATE OF MARYLAND

Senator BEALL. Mr. Chairman, it is my pleasure to participate in today's hearings on legislation designed to extend title VII of the Older Americans Comprehensive Services Amendments of 1973.

Malnutrition and hunger among our Nation's senior citizens may result from a lack of nutritional knowledge, inadequate income, impaired physical mobility, and/or a general lack of motivation due to isolation and alienation. Congress began to address itself to the special nutritional needs of the elderly in 1968 when it made funds available under title IV of the Older Americans Act for research and demonstration projects designed to provide nutritional services to senior citizens. These research and demonstration projects proved that serving nutritious meals to the elderly facilitated the delivery of other social services while meeting the social and emotional needs of the recipients.

The Panel on Aging of the 1969 White House Conference on Food, Nutrition, and Health recommended the establishment of a permanent congregate nutrition program for the elderly.

In 1972 the Congress passed and the President signed Public Law 92–258, which added a new title VII to the Older Americans Act. This program was designed to provide one hot nutritious meal per day, 5 days a week, to Americans 60 years of age and over with special emphasis on the needy elderly.

In 1973 Public Law 93–29, the older Americans comprehensive services amendments modified title VII so as to make surplus food commodities available to the nutrition program. In addition, Public Law 93–29 encouraged maximum coordination between title VII and the social service programs authorized under title III.

Fiscal year 1973 funds—$99.6 million—did not become available until July 1, 1973. Thanks to the careful planning of the former Commissioner on Aging, John B. Martin, and the skillful administration of his successor, Dr. Arthur S. Flemming, the Administration on Aging was able to obligate all the funds available to this program. Unlike the other provisions of the Older Americans Act, title VII expires on June 30, 1974. The remaining titles do not expire until June 30, 1975.

The subcommittee's first hearing on this legislation was held in the new Waxter Center in Baltimore, Md., on April 26, 1974. It was my special pleasure to chair those hearings and I believe that the subcommittee received a unique perspective by holding these hearings in a comprehensive senior citizens center. First of all, we took the hearings to the senior citizens in a way that is not often possible. Second, the subcommittee had an opportunity to observe two nutrition projects in operation at the conclusion of the hearing. I found it extremely informative to hear testimony from senior citizens who participate in

this program. A number of the witnesses at the April 26 hearing were consumers and they gave very forceful and moving testimony regarding the value of these title VII projects.

It was interesting to note that every witness placed great emphasis on the social and emotional benefits of this program as well as its contribution to their physical well being. This point was reinforced when I talked to the scores of senior citizens who were participating in the Waxter Center nutrition program and the nutrition site located in the McCulloch Homes apartments for senior citizens.

Mr. Chairman, I would hope that the hearings we will conduct today and tomorrow, coupled with those held in Baltimore last month, will enable the Committee to compile the data it needs to complete its work on legislation designed to extend title VII of the Older Americans Act.

Senator EAGLETON. We will start, if we may, with a panel consisting of three directors from various State agencies that deal with aging: Mr. Harry F. Walker, executive director, Maryland Commission on Aging; Mr. James J. O'Malley, director, New York State Office for the Aging; and Dr. Louise B. Gerrard, director, West Virginia Commission on Aging.

STATEMENT OF HARRY F. WALKER, EXECUTIVE DIRECTOR, MARYLAND COMMISSION ON AGING, ACCOMPANIED BY JAMES J. O'MALLEY, DIRECTOR, NEW YORK STATE OFFICE FOR THE AGING, AND DR. LOUISE B. GERRARD, DIRECTOR, WEST VIRGINIA COMMISSION ON AGING, A PANEL

Mr. WALKER. Mr. Chairman, it is a pleasure to appear before the committee this morning to testify on behalf of continuation of title VII of the Older Americans Act.

Mr. Chairman, I have testified previously about this program and have participated with both professionals and consumers of the nutrition services in previous hearings. Without exception and acknowledging that many problems have attended the establishment of the nutrition program, title VII is viewed by all who work with it and participate in it as one of the finest programs created under the Older Americans Act.

I would especially like to comment on the inclusion by Congress of the provision that auxiliary services to the feeding program must be provided for. Those who work with older people know they have been reasonably independent most of their lives and tend to look with some suspicion on Government-sponsored programs which in any way resemble charity or welfare.

The fact that this nutrition program is a social event with recreation, educational, social activities as part of it, tends to make it acceptable. The fact that older persons may contribute money for the meal helps to further identify it as a community activity rather than a welfare program.

Another good feature of the program is that it not only provides benefits to those who are participating in it, but generates the means by which older people who are isolated and may need services can be

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located and helped. The outreach part of the program is most important.

As good as the nutrition program is, certain problems keep the program from being as effective as it can be.

The first subject of concern is one that will come as no surprise—the need for more money. In the original appropriation of $100 million each year for 2 years, it was generally estimated that this would feed 250,000 older persons. The seeming suddenness of the energy crisis, coupled with the rapid rise in inflation, has had a serious effect on the nutrition program.

The number of persons able to be served is about 20 percent lower than was originally anticipated. At the current rate of inflation, funds for the nutrition program should increase by approximately 10 percent yearly, just to keep the program level. In order to increase it, there will have to be substantial additional money appropriated.

The levels currently proposed by the House—$150–$200–$250 million over the next 3 years, represents a substantial increase. But considering that there may be 5 million eligible persons by the standards of the program, $250 million should be viewed as an improvement and not a ceiling.

At this point it might be well to raise the question of the future plans for the program. How large can it or should it get? Perhaps the Administration on Aging is the best agency to plot the course on this.

I would also raise the question about the way in which funds are being released. States are practicing a concept of forward funding, that is fiscal 1974 funds will be used in fiscal 1975 and fiscal 1975 funds will be used in fiscal 1976. This does present a problem.

States have been under considerable pressure to achieve their quotas of persons being fed. As these programs are established and become known, there is a momentum for expansion. This is a natural consequence for a program of this kind which does have widespread appeal and which does serve a basic need.

The problem is that under forward funding as now practiced, States cannot expand beyond the funding limits set by the $100 million authorization for fiscal 1973. Apparently States will be held to the funding levels in effect in August 1973 until July 1975.

Some States are expanding faster than others and will need an increased authorization before 1975 funds are released. Congress can spell out a procedure which can provide that title VII funds authorized for fiscal 1975 shall be made available to the States not later than January 1, 1975; the important word is "shall" since any other wording leaves the discretion to the Office of Management and Budget.

Senator EAGLETON. If I may, I would like to interrupt you at this point.

Senator Kennedy is with us and he has another hearing to attend at 10, which he is chairing.

He has a statement he would like to make in connection with this legislation.

Senator KENNEDY. I want to thank the witnesses for their indulgence.

I would like to ask, Mr. Chairman, that my complete statement be put in the record at an appropriate place.

I want to first of all thank you for holding these hearings and for giving this cause of the elderly enthusiastic leadership here in the Senate.

This legislation has been tried. It has been extremely successful. It is responding to one of the great human needs of this Nation, to provide decent nutrition to isolated low-income elderly.

It also has provided them with additional social contact, improving the quality of their lives.

I think the increase in authorization approved in the House bill is completely justified given the general inflation that we have seen across this country, but most particularly in the area of food where prices rose 20 percent last year.

I also find in my part of the country in the northeast dramatic increases in fuel costs, that take a very significant part of the budget for many of our senior citizens.

So they have been perhaps the ones that have been caught most acutely in the double inflation of food and fuel.

Hopefully, we will support the authorization levels which have been established in the House bill and expeditiously pass this legislation. We even may be able to avoid a conference by accepting the House bill.

In my statement I review what I think have been the hallmarks of the success of this program.

Perhaps in closing I will read just one letter, which states the case for the support of this program, as well as any words that I could possibly use.

[Letter referred to follows:]

DEAR SENATOR KENNEDY: I am a widower age 70. I live alone. Yes I belong to the Senior Citizen Nutrition Program. I enjoy the delicious meal and the social part very much. It is very lonely eating by ones self every day. So this meal is a highlight of my day.

In 1959 I was in a bad accident while at work, leaving me with one arm and leg that is not much good. So cooking is very hard for me. Walking is not easy either.

I wish to live by myself as long as possible, this way my children have one less worry. I do get one nutritious meal a day.

I thank you for voting for this program, and hope you will do so in the future.

GEORGE W. BIERAMAN.

Senator KENNEDY. The letter is signed George Bieraman. There are millions of George Bieramans around this country. They deserve the kind of program which we are considering here today. I think we are not only responding to his particular needs, but to the country's needs as well.

I thank you for chairing these hearings and providing the leadership that you have, and we hope to be able to obtain quick action on this legislation.

I want to thank the witnesses for interrupting their testimony and being patient with me. I look forward to reading your testimony.

Thank you.

Senator EAGLETON. Thank you very much, Senator Kennedy. You have played a leading and exemplary role in the formulation of this legislation from the outset, and I know you will give us your strong support as we continue with this legislation in the future.

We appreciate it, Senator.

PREPARED STATEMENT OF HON. EDWARD M. KENNEDY, A U.S. SENATOR FROM THE STATE OF MASSACHUSETTS

Senator KENNEDY. Mr. Chairman, I want to express my appreciation to you for your continued leadership in seeking improvements in the quality of life for older Americans.

Also, let me express my belief that the legislation now before us, S. 2488, which I introduced with Senator Percy and which now has 27 cosponsors, is essential to achieve that goal.

Although we are considering the extension of the nutrition for the elderly program, which I originally introduced along with Congressman Pepper in 1971, and which was enacted in March 1972, realistically this is the first full year of that program's existence. Presidential vetoes of appropriations bills and the delay in the implementation of the regulations have meant that the full effect of the nutrition program is just beginning to be felt.

However, there is no question about the utility of the program, its benefits and its need to be expanded. We are acting on the basis of over 5 years of successful pilot projects. And we are acting following an enormously enthusiastic response from the elderly, from State governments and from local officials during the past year.

The progress that is being made is evident from the following facts. By December 31, 1973, each of the States had allocated its funds to 665 nutrition projects.

By the beginning of February, 80,970 meals were being served Monday through Friday to Americans aged 60 and over.

By May 21, 182,648 meals were being served and by June 30, the Administration on Aging expects that local nutrition projects will be serving 212,000 meals every day.

The preliminary reports of the Administration on Aging indicate that 70 percent of the meals served are going to those we originally targeted—low-income isolated elderly—and 37 percent of the recipients are minority group members.

This record was the chief basis for the House of Representatives prompt action in approving the companion bill to the legislation we are considering today.

Under the combined leadership of Congressman Pepper and Congressman Brademas, the House approved increases in the level of authorizations over the amounts contained within the bills I introduced with Senator Percy in the Senate and the companion legislation introduced in the House.

Those increases raised the level of authorization over the 3-year period of $600 million. For fiscal year 1975, the bill would authorize $150 million, which it is estimated will provide 319,277 meals per day. For fiscal year 1976, the authorization level is $200 million and the anticipated number of meals is 425,702 per day. For fiscal year 1977, the bill authorizes $250 million which would fund 532,128 meals per day.

I believe those authorization levels can be fully justified and I intend to move in mark-up session to raise our authorization levels at least to the figures approved by the House of Representatives.

There are two basic reasons that justify this increase: first, the level of inflation and its impact on the elderly; second, the vital need to

spread this program to include many more eligible low-income elderly.

With regard to inflation, it is necessary to note that we have been experiencing the worst rate of inflation since the Korean War and that the price of food alone rose 20 percent last year and is continuing to rise substantially each month this year. If food that cost $8 a year ago now costs $10, it is evident that elderly citizens on fixed incomes are finding it difficult to survive.

I would add that while those on social security will be receiving cost of living increases, those increases are delayed and for many recipients they do not come close to matching their added costs. For example, although the cost of living increase is based on a national average, elderly citizens of Boston have to buy their food in Boston markets where prices are 10 percent higher than the national average, and they have to pay nearly 24 percent more for rent and heat.

They also are facing an enormous increase in the cost of electricity and in the cost of transportation. When it is time to cut back, the tragic fact is that the elderly resident is almost always forced to cut back on food.

The impact of inflation can be understood merely by noting that when we passed the original nutrition for the elderly bill, I recall the Commissioner of Aging assured us that the $100 million appropriations would fund 250,000 meals a day. Now inflation has cut that level back to 212,000 meals a day.

Inflation alone would be a sufficient justification for the authorizations in S. 2488 to be raised at least to the House level.

However, there is a second reason and that is the magnitude of the need for this program across our country. My own State may provide a prime example. Massachusetts expects to be serving 4,600 meals under its current allotment. They project that if funds were available, they could increase that total to 10,000 meals per day, nearly two and a half times greater.

Similar estimates have come from other States in a report on the title VII program which was conducted in cooperation with the Special Committee on Aging by the Food Research and Action Center of New York, which I had placed in the record in March. I would ask that the report form part of our committee's record as well.

I want to emphasize that while the nutritional value of the program is enormously important, when I introduced the bill I was equally concerned with the need to offer elderly persons an escape from poverty-imposed isolation.

Our goal was to bring the elderly out of their rooming houses and into the life of the community. We felt that by providing meals in a community setting, social services could be offered, counseling could be provided and elderly citizens could be drawn out of their loneliness and into a circle of friends.

I have recently received a number of letters from Minnesota which strongly endorse this program. They emphasize both nutritional and social service benefits from the program. For instance, let me read from several.

[The letters follow:]

DEAR SIR: My husband and I both in our 70's have been enjoying the Senior Citizens Congregate Meals, several times a week. We think this project is a

wonderful thing, as it has helped stretch our budget. We live mostly on our Social Security and this doesn't allow us to go out and eat which we enjoy.

This project has given us the opportunity to eat out several times a week and enjoy good food and the company of the other participants. We would not be able to do this if it weren't for this project.

We thank you for this program and hope that it will continue for a long time. Also hope more funds will be appropriated for expansion.

Yours truly,

Mr. and Mrs. Felix Mathiowetz.

Dear Sir: I belong to the Senior Citizen Nutrition program and enjoy the meals very much as I certainly would not be able to carry groceries nor even walk to the nearest place where these meals are served. Eating with the same group each day there is a companionship and as I have arthritis in my knees, I do not get out much.

A widow and 82 years of age the companionship is almost as important as the meals but I could never afford to buy the meats . . . fruit and meals come HOT. I surely hope you see your way of voting for this program and wish to thank you for your votes in the past.

Very sincerely,

Mrs. Amanda Miller.

Mr. Chairman, the Nutrition for the Elderly program, a nationwide effort to provide at least one hot meal a day in a social setting to isolated low income elderly, is doing its job. Now it is our turn to do ours and to extend this program for 3 more years.

Senator Eagleton. Mr. Walker, I am sorry you were interrupted, would you please continue with your statement.

Mr. Walker. Senator, I am going to try to abbreviate my comments in the interest of time and hope that the total statement will be in the record.

Currently transportation, outreach, and information and referral services are critical to the successful operation of the program and the 20-percent limit on service funding is creating hardships in some places. Transportation is the greatest need with outreach running a close second. Both involve more personnel than was initially contemplated and transportation often requires purchase or rental of buses or other equipment to insure that individuals can participate in the program.

This problem is particularly acute in rural areas, but is also present in cities. Even if a transportation system is operated by volunteers, the increase in the cost of gasoline has made this a major problem in some areas.

The outreach problem is one which most people recognize, but may not have taken too seriously until it was discovered by experience that isolated elderly do not quickly respond to efforts to get them to participate in the new program.

The matter of locating and identifying isolated older persons requires special effort. Projects which are not connected with established and active community organizations have discovered that more time, money, and personnel have to be invested in outreach than their budgets originally provided for. Outreach is important and a worthwhile investment since it provides the means for the aging service programs to reach those who need help.

While this is not true for every project, I would guess that it is true in every State.

Congress can help the States to improve the support service delivery by authorizing the maximum allowance for services to be raised in

steps with each increase in funding that is authorized. In that way the amount of funds for nutrition will grow and the support services will simply grow faster up to a limit. If the maximum is raised first to 25 percent and then to 30 percent the allocations will be more in keeping with project needs and problems.

In this connection, there are many who feel that the allowance for home-delivered meals as part of this program should be increased. Recognizing that the value of this program is in congregate feeding, nevertheless, most persons that I have talked with about the home-delivered meals feel that an increase from 10 to 15 percent would be a worthwhile move.

The States were allowed to use up to 10 percent of fiscal 1973 title VII fundings for administrative purposes and subsequently were to support administrative costs of this program from title III sources. The fact that only 1 percent of the allowable 10 percent was actually used would seem to reinforce the current position that title III funds can handle the title VII program.

There is a fallacy in this.

In the first place, States had very little time between the period title VII funds were released and had to be committed to set up an administrative structure. Also, because administrative funds could be used for only 1 year, States were reluctant to make commitments which they could not support under title III. The idea that title III administrative funds should support both programs is administratively neat, but could lead to title VII lacking adequate and proper administration, even though in terms of money it may be the largest single program operated by the State unit on aging.

I believe that most States would agree that 10 percent for administration is higher than is needed, but if Congress would authorize 5 percent of title VII funds for administration, with the original provision that funds not used for administration could go for food, this would enable States to gain more experience than they are presently able to provide on what it costs to administer a nutrition program. I emphasize that the 5 percent be permissive so that States which can administer both titles III and VII out of title III administrative funds can use their total title VII allotment for food.

It also means that if a State actually needs only 2 percent for administration, they do not lose the difference between 2 percent and 5 percent.

There is one final comment I would like to make concerning the administration of the nutrition program.

Congress had originally intended that the aging program be administered with a direct line of responsibility from the Administration on Aging to the Regional Office on Aging to the States. The placement of the Administration on Aging within the Office of Human Development has had the effect of inserting a layer of administrators whose influence and authority is not entirely clear.

In Washington and at the Regional levels, OHD administrators are in superior positions organizationally to those who speak for and about aging services. The implication is that program decisions relating to aging services can be overruled or delayed because of differences in priorities of aging service unit and those responsible for the Office of Human Development.

When the Administration on Aging was placed within Social and Rehabilitation Services, instances of transfer of resources and priority intervention occurred and were at least partially cause for the Congress to establish AOA as an independent administrative unit.

However, perhaps the problem can be addressed in the extension of title VII with language that makes clear that the Administration on Aging is part of the Office of Human Development for administrative convenience, rather than supervising the aging staff and programs.

These are some of the issues concerning the nutrition program. Overall, the program is successful and is making a significant impact on the lives of older persons in this country. People are working together who have never worked together before. Older people are being brought out of isolation and back into the community. The program deserves the continued support of the Senate at funding levels no less than those authorized by the House.

I thank you for the opportunity to appear before this committee.

Senator EAGLETON. I would like to mention at this time that Senator Beall, who is the ranking minority member on this committee, is attending another hearing at this time and will try to be with us a little later on in the morning, whenever that hearing adjourns.

Also, Senator Randolph asked that his best wishes be extended to Dr. Gerrard. He, too, will try to be here at some time during the morning.

As with many Senators, they have an abundant number of hearings going on simultaneously, and they cannot attend them all. They will try to be here later on.

[The prepared statement of Mr. Walker follows:]

Prepared Statement of Harry F. Walker, Executive Director,

Maryland Commission on Aging

It is a pleasure to appear before the Committee to testify in behalf of continuation of Title VII of the Older Americans Act.

Mr. Chairman, I have testified previously about this program and have participated with both professionals and consumers of the nutrition services in previous hearings. Without exception and acknowledging that many problems have attended the establishment of the Nutrition Program, Title VII is viewed by all who work with it and participate in it as one of the finest programs created under the Older Americnas Act.

I would especially like to comment on the inclusion by Congress of the provision that auxiliary services to the feeding program must be provided for. Those who work with older people know they have been reasonably independent most of their lives and tend to look with some suspicion on government sponsored programs which in any way resemble charity or welfare. The fact that this nutrition program is a social event with recreation, educational, social activities as part of it, tends to make it acceptable. The fact that older persons may contribute money for the meal helps to further identify it as a community activity rather than a welfare program.

Another good feature of the program is that it not only provides benefits to those who are participating in it, but generates the means by which older people who are isolated and may need services can be located and helped. The outreach part of the programs is most important.

As good as the Nutrition Program is, certain problems keep the program from being as effective as it can be.

The first subject of concern is one that will come as no surprise - the need for more money. In the original appropriation of $100 million each year for two years, it was generally estimated that this would feed 250,000 older persons.

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The seeming suddeness of the energy crisis, coupled with the rapid rise in inflation, has had a serious effect on the Nutrition Program. The number of persons able to be served is about 20% lower than was originally anticipated. At the current rate of inflation, funds for the Nutrition Program should increase by approximately 10% yearly, just to keep the program level. In order to increase it, there will have to be substantial additional money appropriated.

The levels currently proposed by the House - $150-$200-$250 million over the next three years represents a substantial increase. But considering that there may be 5 million eligible persons by the standards of the program, $250 million should be viewed as an improvement and not a ceiling.

At this point it might be well to raise the question of the future plans for the program. How large can it or should it get? Perhaps the Administration on Aging is the best agency to plot the course on this.

I would also raise the question about the way in which funds are being released. States are practicing a concept of forward funding, that is fiscal 1974 funds will be used in fiscal 1975 and fiscal 1975 funds will be used in fiscal 1976. This does present a problem.

States have been under considerable pressure to achieve their quotas of persons being fed. As these programs are established and become known, there is a momentum for expansion. This is a natural consequence for a program of this kind which does have widespread appeal and which does serve a basic need. The problem is that under forward funding as now practiced, States cannot expand beyond the funding limits set by the $100 million authorization for fiscal 1973. Apparently States will be held to the funding levels in effect in August 1973 until July 1975. Some States are expanding faster than others and will need an increased authorization before 75 funds are released. Congress can spell out a procedure

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which can provide that Title VII funds authorized for fiscal 1975 shall be made available to the States no later than January 1, 1975; the important word is "shall" since any other wording leaves the discretion to the Office of Management and Budget.

There is another aspect of the funding problem which is of concern to some States. The smaller States which qualify under the population formula for the minimum allocation are uncertain whether increased funding in fiscal 75 and beyond will mean more Title VII funds for them. The legislation should specify that States receiving the minimum allotment will receive a percentage increase which bears a relationship to the increase in program funding appropriated by Congress. I doubt that Congress intends those States to stay at the $500,000 level and the language in the new legislation should clear up any doubts.

There are always probelms in starting up a program and Title VII is no exception. One issue that Congress can resolve relates to the extent to which Title VII funds can be used for support services. Currently transportation, outreach, and information and referral services are critical to the successful operation of the program and the 20% limit on service funding is creating hardships in some places. Transportation is the greatest need with outreach running a close second. Both involve more personnel than was initially contemplated and transportation often requires purchase or rental of buses or other equipment to insure that individuals can participate in the program. This problem is particularly acute in rural areas, but is also present in cities. Even if a transportation system is operated by volunteers, the increase in the cost of gasoline has made this a major problem in some areas.

The outreach problem is one which most people recognize, but may not have taken too seriously until it was discovered by experience that isolated elderly do not quickly respond to efforts to get them to participate in the new program. The matter of locating and identifying isolated older persons requires special

effort. Projects which are not connected with established and active community organizations have discovered that more time, money, and personnel have to be invested in outreach than their budgets originally provided for. Outreach is important and a worthwhile investment since it provides the means for the aging service programs to reach those who need help. While this is not true for every project, I would guess that it is true in every State.

Congress can help the States to improve the support service delivery by authorizing the maximum allow for services to be raised in steps with each increase in funding that is authorized. In that way the amount of funds for nutrition will grow and the support services will simply grow faster up to a limit. If the maximum is raised first to 25% and then to 30% the allocations will be more in keeping with project needs and problems.

In this connection, there are many who feel that the allowance for home-delivered meals as part of this program should be increased. Recognizing that the value of this program is in congregate feeding, nevertheless, most persons that I have talked with about the home-delivered meals feel that an increase from 10 to 15% would be a worthwhile move.

ADMINISTRATIVE FUNDS FOR TITLE VII

The States were allowed to use up to 10% of fiscal 73 Title VII funding for administrative purposes and subsequently were to support administrative costs of this program from Title III sources. The fact that only 1% of the allowable 10% was actually used would seem to reinforce the current position that Title III funds can handle the Title VII Program. There is a fallacy in this. In the first place, States had very little time between the period Title VII funds were released and had to be committed to set up an administrative structure. Also, because administrative funds could be used for only one year, States were reluctant to make commitments which they could not support under Title III. The idea that

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Title III administrative funds should support both programs is administratively neat, but could lead to Title VII lacking adequate and proper administration - even though in terms of money it may be the largest single program operated by the State unit on aging. I believe that most States would agree that 10% for administration is higher than is needed, but if Congress would authorize 5% of Title VII funds for administration, with the original provision that funds not used for administration could go for food, this would enable States to gain more experience than they are presently able to provide on what it costs to administer a nutrition program. I emphasize that the 5% be permissive so that States which can administer both Titles III and VII out of Title III administrative funds can use their total Title VII allotment for food. It also means that if a State actually needs only 2% for administration, they do not lose the difference between 2% and 5%.

There is one final comment I would like to make concerning the administration of the Nutrition Program. Congress had originally intended that the aging program be administered with a direct line of responsibility from the Administration on Aging to the Regional Office on Aging to the States. The placement of the Administration on Aging within the Office of Human Development has had the effect of inserting a layer of administrators whose influence and authority is not entirely clear. In Washington adn at the Regional levels, OHD administrators are in superior positions organizationally to those who speak for and about aging services. The implication is that program decisions relating to aging services can be over-ruled or delayed because of differences in priorities of the aging service unit and those responsible for the Social and Rehabilitation Servi-es, instances of transfer of resources and priority intervention occurred and were at least partially cause for the Congress to establish

AoA as an independent administrative unit. However, perhaps the problem can be addressed in the extension of Title VII with language that makes clear that the Administration on Aging is part of the Office of Human Development for administrative convenience, rather than supervising the aging staff and programs.

These are some of the issues concerning the Nutrition Program. Overall, the program is successful and is making a significant impact on the lives of older persons in this country. People are working together who have never worked together before. Older people are being brought out of isolation and back into the community. The program deserves the continued support of the Senate at funding levels no less than those authorized by the House.

I thank you for the opportunity to appear before this Committee.

Senator EAGLETON. Mr. O'Malley.

Mr. O'MALLEY. I am James J. O'Malley, deputy director of the New York State Office for the Aging, and as the representative from the State with the largest nutrition program in the country, I would hope that my comments will be helpful to your committee in its important work.

At the outset, I would like to say how pleased I am to be here today to talk about the continuation and, I hope, the expansion of the nutrition program for the elderly—title VII of the amended Older Americans Act of 1965.

Those of us who are administrators in public and private agencies which are involved with this important program certainly have views and opinions of our own on how effectively the program has operated thus far, and on the ways it might be improved in the future.

But far more important than our views are the expressed needs of older persons themselves, and I would certainly trust that you and your committee will talk with as many older people as possible to see how they view this particular program.

Consumer participation was built into the program at the outset and I would hope that this same consumer involvement will be utilized in discussions on the continuation and expansion of the program.

Although I am here, more or less, to discuss programs in urban areas, I would like to stress that New York State is far more than the five boroughs of New York City; albeit, approximately half of our nearly 3 million older citizens live there.

However, over 21 percent of our older population live outside of our seven urbanized areas. And it may interest you to know that these more than 415,000 older persons, alone, in our State, constitute a population larger than the total older population in almost half—24—of the States in the Nation.

And I can assure you that when we began to implement our program in New York State, we were keenly aware of the different approaches which we would have to take in initiating programs in both urban and rural settings.

The Federal law distributed funds on a formula grant basis determined by population 60 years and over in each State so that New York received just over $8.9 million for its program.

Our job, of course, was to develop a rationale for how we, in turn, would allocate these resources among our older population—and although we followed the initial per capita formula, I believe we expanded on it in a most equitable manner.

Permit me to elaborate. Because county government is very strong in New York State, we chose to make the program available to every one of our 62 counties—and I am happy to say that programs are now operational in 55 of these counties; covering well over 95 percent of our older population.

Senator EAGLETON. All of those operations began sometime this calendar year?

Mr. O'MALLEY. In fact, the official contracts began in October of last year in most instances. The actual food delivery began during this particular calendar year.

Senator KENNEDY. Actual delivery, though, this year?

Mr. O'MALLEY. Right.

Three factors went into our resource allocation: (1) the population 60 and over, as was done in Federal statute; but also, we considered (2) the number of older persons living below the poverty level, and (3) the number of isolated older persons. The data for the latter two factoring elements was developed by David Sutton, the administrator of our research and statistics program, from Federal census data and from a statewide needs study which we had only recently completed.

Using a base of about $48,000 for a small rural county program, we were then able to allocate our resources in a manner that has been met with total acceptance by all concerned—for, indeed, all concerned were given their due.

New York City, with its large older population, received about $4.3 million under this formula and I am constantly gratified when Alice Brophy, the director of the city office for the aging—and also president of the Urban Coalition for the Elderly—speaks of the equitable distribution of resources which our office has made in this and other programs. It is gratifying because it means that we are, indeed, doing a conscientious planning and coordinating program and we are helping our counterpart agencies to carry out this program.

And I would add one final and very important element to this resource allocation and planning process; namely, the State office for the aging in New York has chosen not to use 1 cent of the title VII appropriation for statewide administration.

Or, put in other words, the nearly $900,000 which we could have deducted from our allotment was put back into local programs so that more funds would be available for meal programs.

Senator EAGLETON. How did you adjust, then, whatever cost of the administration is involved in this? Absorb it in other programs such as title III?

Mr. O'MALLEY. Correct.

Senator EAGLETON. You heard the testimony of Mr. Walker, who feels that perhaps up to 5 percent of the funds for title VII should be allocated for administrative costs. What would be your observation on his suggestion to that extent?

Mr. O'MALLEY. I would agree with him. We have discussed this in meetings of the National Association of State Units on Aging, and I think the 5-percent level would probably be encompassing enough for most States.

The problem, as Mr. Walker indicated, is we had no continuity in the original appropriation. There were administrative funds available for 1 year at 10 percent that were not going to be continued in the second year. And so, our option was not to take these administrative funds, but rather, to find other sources to pay for our staffing.

As I will indicate later, it has had some negative effects on the sense that we have not been able to staff up as adequately for the program as we would have liked.

This, in itself, has not made our task any easier at the State level, but in the long run, I firmly believe it will demonstrate where our commitment really is.

And Ed Kramer, the administrator of our State's nutrition program, has stood by this decision even though it has meant an inordinate workload on him and his small staff. But his experience as the director of one of the first title IV meal programs at the Henry Street

Settlement in New York City, has made him well aware of the need to put every cent possible into the program where it is most important; namely, in feeding older people.

Permit me to cite a few statistics on our present statewide program:

We presently have contracts with 49 overall project sponsors and these include 277 separate sites in the 55 counties I mentioned earlier.

We are now serving 15,727 meals per day throughout the State, and, when fully operational, this total will reach 19,000. Of these totals: 1,445 meals are home delivered, and 2,371 are being served to minority group individuals, predominantly black and Spanish-speaking.

New York City, alone, is serving almost 8,000 meals in 80 separate sites in the 5 boroughs.

But as fine as these figures sound, there are other figures which are less attractive. If we conservatively estimated that 20 percent of our State's older population was at or below the poverty threshold, then in fact, our $8.9 million should be helping almost 600,000 older persons and that is the mathematics we cannot do—despite whatever formula we used. If we divide 600,000 into $8.9 million, we are left with the grand total of $15 per poor older person per year to provide 1 hot meal per day, 5 days a week.

The old expression about half a loaf being better than none at all is no consolation either, for even when we ultimately feed 19,000 persons a day, we will only have reached a little over 3 percent of those at the poverty level—to say nothing about those just over that meager plateau of income, and still others who do not eat well because they lack the skills, motivation, or physical ability to cook for themselves.

Those of us who must administer this well written, but inadequately financed, national nutrition program for the elderly at both the State and local levels are being asked to recreate the miracle of the loaves and fishes, but lacking supernatural powers—and enough natural dollars—I am afraid that we will have to struggle along with being happy to stick our fingers in the holes in the dikes unless and until more funds are made available.

And yet, despite our inability to even begin to meet present-day needs, what we see in the administration's budget request for this vital service is a standstill budget for next year.

One of the stereotypes attributed to the aging is that they live in the past, despite the fact that in some ways they might be better off if this were true. But what I would suggest to your committee is that it may not be the elderly who live in the past, but rather, those who allocate funds for programs to help them.

The New York City Department of Consumers Affairs, in a release issued on May 15, noted that food costs, alone, have risen 16.3 percent in the past year. This being the case, then how can we dare to say that our nutrition program should stay at last year's funding level. Certainly, there were startup costs in some of these programs, but I dare say these will not even reach the spiraling inflationary increases in the cost of food, transportation, and other program items which must be maintained just to feed our 19,000 potential recipients after the first year.

That being the case, are we then expected to cut back on the program, and if we are, who would like to be the person who has to tell the older person that he or she is no longer eligible?

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I would like to go on and talk about some of the other problems we are experiencing in this program:

How do we provide the wide range of allied social services which are mandated in the act when we do not even have adequate funding for the essential meals?

Why must we impose elaborate recordkeeping and information reporting systems on people whose primary task should be to serve meals—and particularly when none of us wants to create a bureaucratic hierarchy of paid staff which will only reduce our resources to feed older people?

Why do we inflexibly mandate that all major urban sites must serve a hot meal 5 days a week when, especially during the summer months, it might be as valuable to have a combined picnic/outing or some other "vacation-type" substitute which allows older people and the staff which work with them to feel that they, too, are part of the great American Society which takes a breather in the summer?

And where is our national leadership from the Administration on Aging in developing policy and budgetary recommendations?

Training conferences which are contracted out to colleges and universities are fine teaching tools, but when was the last time the Administration on Aging, itself, called together all the State nutrition directors to engage in a dialog that would help both of us?

But, essentially, no one of these concerns is as important as the money question.

And so, if I were to "tell it like it is," I would respectfully ask your committee to give your undivided attention to two interwoven questions: continuation and money.

If we are committed to feeding older people who desperately need the nutrition program, then there is no reason why Congress cannot, here and now, extend this program for 3 or even 5 years. And equally important, extend it with the kind of financing that will clearly demonstrate that we do have a real commitment.

Our Nation has gone through many changes in its brief history, but it was not so long ago that politicians used to use human terms when they were appealing to voters. Whether it was "A chicken in every pot" or "Bring back the nickel cigar," we talked to people about things that were real and meaningful to them.

Perhaps we should bring back some of this human concern not only to our campaign rhetoric, but also to our decisionmaking and resource allocation when we are in a position to set policy.

That power is within your grasp and I would hope you would discharge it equitably when it comes to helping our Nation's older citizens. Thank you.

Senator EAGLETON. Thank you very much, Mr. O'Malley, for a very excellent statement. I will have questions for the entire panel later.

We will now hear from Dr. Gerrard. We welcome you.

Dr. GERRARD. Thank you, Senator. I am Dr. Louise B. Gerrard, executive director of the West Virginia Commission on Aging, the official State agency for the administration of the Older Americans Act in West Virginia.

Ours is an independent agency with 7 department heads who serve ex officio, and 10 public members appointed by the Governor with the advice and consent of the senate.

I appreciate your invitation to appear and to present testimony regarding the extension of title VII nutrition programs. My remarks will deal primarily with programs being developed in rural areas. I have consulted directors in a number of States, but my observations are based primarily on experiences in West Virginia.

First off, let me say that the nutrition program is the single most popular program for the aging we have sponsored in the 10 years the West Virginia Commission on Aging has been in operation. Reports from other States make it clear this is true across the country.

It is often difficult for a community to understand that the planner in an area agency on aging is really helping the elderly. There have been so many plans and—unfortunately—so little help.

It is particularly difficult to justify a planner in a rural area where jobs are few and salaries are low. What the community sees is a white collar worker, overpaid by its standards, asking questions, going to meetings, writing reports. In other words, another bureaucrat spending precious dollars which otherwise could go to help the aging in the community. This conception of the planner is wrong, but it is very real.

In welcome contrast, the nutrition program is of direct benefit to local men and women. The elders of the community are seen in happy situations, having meals together, enjoying good fellowship, entertaining and being entertained. The economy gets a needed boost when food is purchased in local stores, and men and women from the area are hired as drivers, cooks, outreach workers and site managers. Although most of our title VII employees receive only the minimum wage, the jobs are welcome and much sought after.

Those of you who have lived in rural America can appreciate the problems we faced in getting acceptable places for group meals. In many of our smaller towns, the only public building belongs to the volunteer fire department, and so some of our meals are served there. In one place, the only public building is the town hall, and we are serving there. In another county, we have taken over an old company store. We are in schools, in churches, in community halls and senior centers, and head-start centers.

Our startup costs were higher than we would have liked, because it was expensive to put in a three-bowl sink, a hot water tank, a commercial refrigerator and stove, to put in vents where none existed, in order to meet rigid health department standards. In more than one place we literally had to dig wells to assure a supply of water. We have been responsible for a dramatic increase in the number of indoor bathrooms in some of our rural areas.

We knew we were doing something right when the three commissioners of one of our counties—a county known through the years as being particularly uninterested in social programs of any kind—summoned our project director and told him they had just voted $6,000 in revenue-sharing funds for the title VII program. "Keep it up," they said, "and you will be getting more money from us. This is the best thing to hit this county in a long time."

So we want to thank the Congress for its strong support of the program. We want to see it expand and reach even more older Americans.

Having said this, let me share some of our concerns.

First, in order to feed and service approximately 1,750 men and women daily, predominantly in rural areas, we have had to piggyback on existing Office of Economic Opportunity programs. Some community action agencies have matched out title VII grants considerably better than dollar-for-dollar when we count the cost of labor and repairs for our feeding sites.

OEO groups have assigned their outreach workers to identify the elderly who need the meals, and have shared with us their staffs, their transportation facilities, and their community centers. We are frankly alarmed at the prospect that community action agencies face a cutoff of Federal funds. If they were to go out of operation, we would immediately have to cut back drastically on the number of people we could serve with our title VII money.

A second concern relates to the problem being faced by everyone: the sharp, continuing increase in the cost of food.

In my testimony I give some figures on that.

One I have used is that one of our projects decided it would be able to serve whole milk only twice a week. A half pint container was 16 cents, and when I was in West Virginia yesterday, I checked with the project director who said it was now 17½ cents. Just in the course of a week, it has gone up a penny and a half.

I was also concerned that we have been unable to arrange for commodities for many of our projects, evidently because of the lack of clarification from the Department of Agriculture. A few of our counties were able to get commodities. In most of our counties, we are not. We are not able to serve the kind of food we like to serve.

Senator EAGLETON. You say you get commodities in some of your counties, but not in all?

Dr. GERRARD. Yes.

Senator EAGLETON. The ones that decline to make commodities available, what reason do they give you?

Dr. GERRARD. They say we are not eligible. We showed them where we are eligible in other counties. In some counties we are able to get peanut butter and a few other things, but not meat. They say that meat is only for Head Start centers and public schools. We have been trying hard for 6 months to get a clarification of this from AOA.

Senator EAGLETON. My recollection of the law is that when we passed it, we specifically intended to make commodities available through the title VII program.

Dr. GERRARD. Yes, sir. We showed them that material. They say locally that the Department of Agriculture has not cleared it.

Senator EAGLETON. What about in Maryland or New York, in terms of the utilization of commodities, what has been your experience?

Mr. O'MALLEY. The same experience, unfortunately. We hardly use them at all in terms of their being available.

Senator EAGLETON. You sought to obtain them, but have been denied?

Mr. O'MALLEY. We have a peculiar situation in terms of commodity programs, and how they are available. There are not that many of them available.

Senator EAGLETON. Most of your counties are on food stamps?

Mr. O'MALLEY. Have been. I think part of the problem, too, is the Department of Agriculture has not clarified their policy. It is continuing to be confusing, and we are continuing to badger for interpretation.

Senator EAGLETON. We will inquire of the Department of Agriculture and see what their national policy is, if any.

Dr. GERRARD. It would be tremendously helpful.

A third concern relates to the needs of our homebound elderly. We know that title VII was intended primarily for those elderly who needed to be brought out into the community, and we agree with this purpose. However, we are also concerned about our more frail elderly, our old men and women—those in their eighties and even in their nineties—who need the food and need the companionship, but who cannot be brought to a meals site more than perhaps once a week, if then.

In my prepared testimony I use the example which happened only very recently in West Virginia of an SSI worker who went to visit someone to see whether he was qualified for supplemental security income, and found that the man had been dead anywhere from 1 to 2 weeks. No one had been there.

If we had had a "meals on wheels" program, if we had the capability of reaching into that isolated area, perhaps that man would still be alive.

Senator EAGLETON. Do you have some "meals on wheels" programs in West Virginia?

Dr. GERRARD. Very few. Most "Meals on Wheels" programs are run by small, voluntary organizations, or churches, or some small programs being funded through the Salvation Army, and so forth.

For some of our frail rural elderly, the beginning of real communication and contact will come when we go into their homes on a regular basis, without turning our backs on them, because they cannot come out to us.

Senator EAGLETON. I understand.

Dr. GERRARD. Our fourth concern, though in reality it ranks above all others, is the appalling toll the country's inflation is taking among our elderly. At open hearings in West Virginia last week, older men and women from all over the State spoke in dollars-and-cents about their worsening plight. One woman who had been receiving a small veteran's pension, reported that out of the $15.50 a month increase she received from social security, she ended up with only a 50-cent increase because of a cutback in her VA pension and an increase in her rent.

A number of others told us they were going to be much worse off on July 1 because their eligibility for SSI means they will no longer receive food stamps. I carry with me a resolution from them urging the Congress to prevent this cutback.

This seems to many of our people really outrageous, that because they get SSI they should be discriminated against on food stamps.

The nutrition program is important, but it is no substitute for a good pension system, an adequate retirement income, and appropriate health care. It is no substitute for a decent housing program, or a transportation system.

We have come to see, however, that title VII can be a most important part of the lives of many old men and women and, not incidentally, a daily reminder to all of us that much remains to be done before we congratulate ourselves about the way our older Americans live.

Thank you for your attention and your concern.

Senator EAGLETON. I have a few questions that I will direct to the panel and any one or all members are free to comment thereon.

In the House passed bill, H.R. 11105, which is the 3-year extention of the act, the figures in the House bill are $150 million, $200 million, and then $250 million. What comment do you have to make about those figures as contained in the House bill?

Mr. O'MALLEY. First of all, they are already a year late.

Senator EAGLETON. The present authorization is $150 million, so under this bill it would continue, the next fiscal year would continue the same; correct?

Mr. O'MALLEY. Yes; I think from the side of Congress obviously you have a question as to how successful the first year of the program has been, so how substantially do you increase it? We, on the other side, are in a position of having a 2-year piece of legislation and are attempting, many of us, to work with public agencies who are suspect of Federal funding programs, and they can read the law as well as we can and see that you only have a 2-year commitment.

I think what I'm suggesting in the testimony is that we have a very strong 3 or even 5-year commitment to the program. If it does, at this point, have to be only $150 million, all right, that is some improvement; but it leaves a firmer commitment from Congress to local organizations that are going to be sponsoring, that if they do, indeed, put on new programs, then there is some potential for enlargement in funding.

Senator EAGLETON. Mr. Walker, in your testimony you seem to be critical of forward funding. Am I correct in that interpretation?

Most witnesses that testify with respect to Federal programs prefer forward funding and think it gives them some degree of security as to the future.

Mr. WALKER. The problem I was addressing is that the nutrial program which is now underway, could expand, if we were permitted to use the money, which will be authorized for fiscal 1975 in the latter half of fiscal 1975, instead of waiting until the beginning of fiscal 1976.

We are operating a program in a fiscal year with money from previous fiscal years. That was my point.

May I comment on the issue of $150 million and $250 million?

Senator EAGLETON. Yes.

Mr. WALKER. I think there are two issues. One is that we would support the House version, that is, hoping the Senate would approve no less than the amount recommended by the House. But in looking at the amount of money that should be appropriated for the nutrition program, I think it is important to look at the number of people that can use and would be eligible, and with that always in sight, we are nowhere near appropriating the amount of money that could be used.

Senator EAGLETON. I think it was from Mr. O'Malley's testimony, it was his estimate based on figures and statistics that they have assembled, that present funding levels would reach perhaps 3 percent of those who would be potentially eligible and in need of a program covered by title VII.

Mr. O'MALLEY. Yes, those are only the poverty level eligible people, which I think keeps us in more confusion in this particular law. The statute is excellent, well written, well rounded, addresses a multitude of needs and a variety of people. But with the funding that we have, I

do not think we are even going to reach the essential bottom layer, those to whom we are giving first attention: lower income and minority older people.

Three percent of 600,000 in New York State is not denting the surface at all. We have given the illusion to the rest of the older society that this is a program that can help you if you cannot prepare a meal for yourself, despite your income level.

Now, I do not think we are even addressing that kind of thing, not to say anything about the layer of people in the gray area, those who have $100 more than whatever the income eligibility is. What happens to so many of our programs is that we prostitute people to that poverty level before we can help them. Yet, on the other side of our mouths, we say we are trying to keep you out of the poverty cycle.

I think we cannot even touch that group of people.

Senator EAGLETON. In any of your States, have you had to actually turn people away? When they show up for a meal have you had to say: "Sorry, our limit has been filled for the day?"

Mr. O'MALLEY. Yes, that has already begun.

Dr. GERRARD. Yes.

Mr. WALKER. We have a waiting list.

Mr. O'MALLEY. In New York City, the meal is announced for approximately noon, and because they know there are not going to be enough meals served, they are beginning to show up at 8:30 and stand in line. This is a pretty sad situation. They know that probably only 150 of them will be served, and if they do not get there early enough, they just will not get a meal.

At present, we do not even have enough sites so that older people could ideally shop around. If one program was not able to take them on a certain day, there might be another one very close by that could. Apparently from what I hear, in Sweden, their national nutrition program publicizes menus in the paper every day, and so, the older person there has the opportunity to shop around in terms of what he would like to eat.

Hopefully, one day we might reach that same kind of level. If you did not want to have a particular type of meal, you could go around to another place.

Whatever it is we are feeding them now, we cannot feed enough.

Senator EAGLETON. How many centers did you say you have in New York City that were serving the meals?

Mr. O'MALLEY. We have about 80 locations, serving about 8,000.

Senator EAGLETON. Out of all of New York City, with a population of about 9 million?

Mr. O'MALLEY. In terms of older people, about 1 million.

Senator EAGLETON. I was thinking in terms of the total size.

Mr. O'MALLEY. Eight million in the city.

Senator EAGLETON. Most of the information I have received from Missouri has been rather sporadic and not a total overview, but they have not as yet had to turn any people away. They are still in the business of Outreach, trying to create better community or neighborhood awareness that the program exists, in terms of getting people to participate.

That is not the case in New York or Maryland or West Virginia?

Dr. GERRARD. In some of the rural areas, people are slower to come in.

Mr. WALKER. We have the opposite experience. We have a waiting list in the rural areas, and one or two of the urban areas, it is not moving quite as fast, mainly because the people are reluctant and somewhat suspicious, and this is where the outreach is very important.

Senator EAGLETON. Do you have any estimate in terms of New York City of how many of those—you say 150 is the maximum at one particular location—are regular repeaters, in the sense that they come most every day? Would that be just a wild guess?

Mr. O'MALLEY. You are asking a very sensitive question in terms of any illusion to paperwork and bureaucratic layers. We have gone through many versions of what we call a nutrition management information system. This is an attempt to find out just that kind of statistic, whether we are feeding the same people consistently or not.

I think I would just have to guess at an answer to that and assume that it is a repeat audience at this point, based on no data, and the forms that we have finally given to our programs. I think you will hear some comments from Ann Babic, who is operating one of the larger programs in the Syracuse area, as to the disposition of administrators and participants towards such an information system.

I think it is important that you asked it, because we are stuck as a State administering agency to answer to Congress on exactly what the program is doing, for whom, et cetera.

When we ask for that kind of data from local programs, they are reluctant to give it to us for a variety of reasons.

I think you should hear from them and perhaps the next time around you may continue to ask the question or you may alter it.

I am trying to be evasive on a thing that is very sensitive at this point.

Senator EAGLETON. You are being directly evasive.

Mr. O'Malley, in your prepared statement, you ask certain rhetorical questions.

How do we provide the wide range of allied social services which are mandated in the act when we do not even have adequate funding for the essential meals?

What are some of the allied social services that you think ought to be interrelated with the meal distribution program itself?

Mr. O'MALLEY. If I took the philosophy of the statute, I would say the escort service was one of the principal ones.

In other words, helping people get to the meal site, who normally could not get there by themselves. I am not talking strictly about homebound people. Those people, I think, should be served by home-delivered meals.

But there are people who have not taken this type of program before, and Dr. Gerrard has alluded to some of the rural areas where there is a reluctance to participate in the Federal program.

That reluctance goes all the way down to the fiber of the individual older people.

You say you are going to serve them a meal. There is an immediate suspicion about that kind of thing. There is a very delicate introduction, I think, that has to occur of bringing an older person to a meal site, to have them eat a nutritional meal, No. 1, but then also to expose them to other societal-type activities, to an interchange with other

older people who may be having a health checkup they never would have had.

If we can really address the isolated older person who does not usually get involved, then I think we are doing a good thing. That also implies transportation costs and those are prohibitive in terms of the kinds of funds we have under title VII.

So what we end up doing, obviously, is borrowing out of the title III till, combining our programs, despite the fact that the statutes are quite distinct and should not be amalgamated into a single type of program.

If one piggybacks on the other, then we ought to have one law and not two.

I think Congress had specific reasons in setting up two different acts.

Senator EAGLETON. Is there not some interrelationship between title III and title VII in the sense of providing transportation, which is the broad purpose of title III? What could be more worthy than making that transportation available for the distribution of a nutritional meal?

Mr. O'MALLEY. I completely agree. That is true.

But, again, if we concentrated the limited resources in title III just to piggyback on title VII, then let us have one law, so we know what we are talking about.

There is a heavy concentration in the nutrition program on low income and minority older people, as it should be. And yet, in title III, we talk about encompassing all the needs of older people, and these are the people I was referring to about those who were in the gray area, someone who may need assistance to go to the hospital or the doctor.

If we spend all of title III money getting them to a meal site, then obviously we are losing support for a lot of other older people as well that we could have given, if the title III program is able to do it.

Dr. GERRARD. We are juggling our transportation with great difficulty.

In the title III program, we may have an arrangement, for example, of bringing people into shop on Thursday.

With title VII, it is an everyday proposition.

One car that serves five areas for title III, on a 5-day week basis, must go to the same area every day for title VII and our land is so stretched out here that we just cannot do it with the same number of cars. So transportation is really what is breaking our backs, too.

Senator EAGLETON. Your State—which is more rurally oriented than New York—has even greater transportation problems.

Dr. GERRARD. Tremendous.

Senator EAGLETON. It is not insignificant in New York for that matter, but in your rural centers practically all the elderly would have to be——

Dr. GERRARD. We have very few places where anyone could walk to the site.

Senator EAGLETON. Let me throw out this question.

Is the proportion of homebound meals pushing the 10-percent mark in each of your projects, or does it vary from project to project?

Dr. GERRARD. Well, two of our projects actually now are serving more homebound people, but we are hoping that it will even out on a statewide basis. It is not evening out. We are running close to 20 percent.

We are trying to get it down. We are trying to get other money for it. But, at the same time, when we cut back, we are cutting back on people who also need the food.

We are well over the guidelines we have been given by AOA and we are alarmed about it.

Senator EAGLETON. Is the AOA guideline 10 percent per project?

Mr. O'MALLEY. Statewide.

Senator EAGLETON. It would be 5 percent in one and 10 percent in another, and then average out.

On a statewide basis, you are precariously close to 10 percent?

Dr. GERRARD. We are over it and have to cut back.

Senator EAGLETON. Would the same be the case in the other two States?

Mr. O'MALLEY. In our statistics, we are slightly under 10 percent because we have asked each of our local sites to try to hold to the 10-percent level, and there is a variation among some of them, obviously in the rural programs.

In New York City, the 150 congregate meals are allowed to serve 25 home-delivered meals per site.

Senator EAGLETON. In a center I recently visited in Missouri—I do not recall the exact statistics—but a significant number of meals were taken out by people who came to the center. They ate their meal, and then took a meal home with them, either to a friend, a spouse, or some other person living in or near where they were.

Is that common practice in your States?

Dr. GERRARD. Yes.

Senator EAGLETON. When the individual takes the meal with him, does that count in the 10-percent figure?

Dr. GERRARD. Surely.

Senator EAGLETON. Even though it was a participant who delivered it?

Mr. O'MALLEY. Allied to that issue, I would hope that the sites will be sensitive enough, if an older person on a particular day does not want to eat the meal right there, that there will be some accommodation.

We were talking about developing doggy bags that older people could have.

Whether they say "Title VII Nutrition Program" on them or not is incidental. There are days when many of us go in to eat and we do not want to finish the meal.

If our programs work well, that older person should be comfortable enough to take that meal and bring it home with them and finish it at home later, if they want to, and not be forced to eat the meal simply because it is going to be thrown out.

That, I am afraid, is happening in some programs. If you do not eat it here or there, it is tossed out. They say, "I am sorry. You cannot bring it with you."

Senator EAGLETON. How effective have any of your States been in attracting other public money or perhaps even some private funds, volunteer services as well, to assist in this title VII program?

Dr. GERRARD. We could not continue without voluntary services, transportation, for example.

Where we can, we pick up 11 cents a mile on transportation costs. In most cases, we do not even do that, so that many of our rural programs could not even begin to operate unless they had volunteers.

We have gotten revenue sharing in five or six of the counties.

The State legislature is examining the question of more money, and in all of our projects, the older people themselves are making contributions, but it is still too new to know what other kinds of funds we can attract.

Senator EAGLETON. Who are your volunteers typically in West Virginia?

Dr. GERRARD. Sometimes a well older person or middle-income older person who is available and able to do it.

Sometimes people working with community action agencies volunteer for our programs.

Senator EAGLETON. You reimburse that person for his or her gasoline mileage?

Dr. GERRARD. If he asks, but the 11 cents we are bound by because of State regulation does not begin to cover the cost in many areas.

Mr. WALKER. In Maryland, there has not been a great influx of new money from the local community, but the State attempted to earmark a certain portion of lottery funds for the elderly and was unsuccessful.

However, they did provide $50,000 of general revenue which earns another $150,000 of title VI of Social Security Act funds.

The State has put in an additional $200,000, other than the Older American Act funds for the Nutrition program. This $200,000 has gone to auxiliary services, so that releases $200,000 Federal nutrition funds for food, which otherwise would have gone for services.

Senator EAGLETON. An analysis of utilization of revenue sharing funds shows about one-half of 1 percent of revenue sharing funds were used for the elderly, which seems to be a rather miniscule amount.

Your figure in Maryland is that out of revenue sharing——

Mr. WALKER. This was $50,000 of general revenue funds and $150,000 came from title VI, Social Security Act.

Senator EAGLETON. Let me thank all three of the Directors of the respective Commissions on Aging.

We appreciate your testimony and participation here this morning.

[The prepared statement of Dr. Gerrard follows:]

West Virginia Commission on Aging
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Charleston, West Virginia 25305

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REMARKS OF DR. LOUISE B. GERRARD, EXECUTIVE DIRECTOR, WEST VIRGINIA COMMISSION ON AGING, BEFORE THE UNITED STATES SENATE COMMITTEE ON LABOR AND PUBLIC WELFARE, SUBCOMMITTEE ON AGING.

WASHINGTON, D. C., WEDNESDAY, MAY 22, 1974.

I am Dr. Louise B. Gerrard, Executive Director of the West Virginia Commission on Aging, the official state agency for the administration of the Older Americans Act in West Virginia. Ours is an independent agency with seven department heads who serve ex officio, and ten public members appointed by the Governor with the advice and consent of the Senate.

I appreciate your invitation to appear and to present testimony regarding the extension of Title 7 nutrition programs. My remarks will deal primarily with programs being developed in rural areas. I have consulted directors in a number of states, but my observations are based primarily on experiences in West Virginia.

First off, let me say that the nutrition program is the single most popular program for the aging we have sponsored in the ten years the West Virginia Commission on Aging has been in operation. Reports from other states make it clear this is true across the country.

It is often difficult for a community to understand that the planner in an area agency on aging is really helping the elderly. There have been so many plans and - unfortunately - so little help.

It is particularly difficult to justify a planner in a rural area where jobs are few and salaries are low. What the community sees is a white collar worker, overpaid by its standards, asking questions, going to meetings, writing reports. In other words, another bureaucrat spending precious dollars which otherwise could go to help the aging in the community. This conception of the planner is wrong, but it is very real.

In welcome contrast, the nutrition program is of direct benefit to local men and women. The elders of the community are seen in happy situations, having meals together, enjoying good fellowship, entertaining and being entertained. The economy gets a needed boost when food is purchased in local stores, and men and women from the area are hired as drivers, cooks, outreach workers and site managers. Although most of our Title 7 employees receive only the minimum wage, the jobs are welcome and much sought after .

Because most of our elderly in West Virginia live in small towns or rural areas, we developed our Title 7 program to serve these men and women who have been largely untouched by programs as it has been so difficult to reach them. We were determined that they would not be passed by once again. We have 12 projects in 32 of our 55 counties, feeding approximately 1750 men and women at 65 sites.

Those of you who have lived in rural America can appreciate the problems we faced in getting acceptable places for group meals. In many of our smaller towns, the only public building belongs to the volunteer fire department, and so some of our meals are served there. In one place, the only public building is the town hall, and we're serving there. In another county, we've taken over an old company store. We are in schools, in churches, in community halls and senior centers and head start centers.

Out start-up costs were higher than we would have liked, because it was expensive to put in a three-bowl sink, a hot water tank, a commercial refrigerator and stove, to put in vents where none existed, in order to meet rigid Health Department standards. In more than one place we literally had to dig wells to assure a supply of water. We have been responsible for a dramatic increase in the number of indoor bathrooms in some of our rural areas.

We knew we were doing something right when the 3 commissioners of one of our counties - a county known through the years as being particularly uninterested in social programs of any kind - summoned our project director and told him they had just voted $6,000 in revenue sharing funds for the Title 7 program. "Keep it up," they said, "and you'll be getting more money from us. This is the best thing to hit this county in a long time."

So we want to thank the Congress for its strong support of the program. We want to see it expand and reach even more older Americans.

Having said this, let me share some of our concerns.

First, in order to feed and service approximately 1750 men and women, predominantly in rural areas, we have had to piggy-back on existing Office of Economic Opportunity programs. Some Community Action agencies have matched our Title 7 grants considerably better than dollar for dollar when we count the cost of labor and repairs for our feeding sites.

OEO groups have assigned their outreach workers to identify the elderly who need the meals, and have shared with us their staffs, their transportation facilities and their community centers. We are frankly alarmed at the prospect that community action agencies face a cut-off of federal funds. If they were to go out of operation, we would immediately have to cut back drastically on the number of people we could serve with our Title 7 money.

A second concern relates to the problem being faced by everyone: the sharp, continuing increase in the cost of food. One of our projects balanced its food budget as carefully as possible, and then came to the decision very reluctantly that it could afford to serve fresh milk only two days a week. The half pint container of milk - so much a fixture at school lunch tables - has risen in some of our counties to sixteen cents, thus becoming a disproportionate part of the total food budget. Dry milk is used in cooking, but the project can afford to serve the welcome fresh milk only two days out of five. We wonder why we can't get the milk at the same price being paid by the public schools of the county: 10¢ instead of 16¢.

Along the same line, we have not been able to arrange for commodities in many counties to supplement the food we must purchase. In a few places we have been able to get some staples, but not the meat and other items being received in the schools. A steady supply of commodities would enable us to spend our funds for other food items needed by our older men and women. We are cutting every corner we know how, but still the costs go up and our prospects for feeding more people get slimmer and slimmer.

A third concern relates to the needs of our home-bound elderly. We know that Title 7 was intended primarily for those elderly who needed to be brought out into the community, and we agree with this purpose. However, we are also concerned about our more frail elderly, our old men and women - those in their eighties and even their nineties - who need the food and need the companionship, but who cannot be brought to a meals site more than perhaps once a week, if then. The Administration on Aging would like to keep home delivered meals at about 10% of the total. We would like to go much higher in a number of counties. Indeed, in addition to our group meals, we could us a statewide meals on wheels program.

True, these men and women would not be brought into the community, but the community would be brought to them, something they need very badly.

This month we were greatly saddened by the experience of one of our Supplemental Security Income (SSI) outreach workers who went to call on an elderly man who lived on the top of a ridge with his paraplegic nephew and a dog. When no one answered his knock on the first visit, the SSI worker returned

a few days later, became worried and, finding all doors and windows locked, went back to town to summon the state police. When they broke into the house, they discovered the man was dead in his bed - he had been dead anywhere from one to two weeks, according to the coroner. His dead dog lay beside him. The feeble nephew, too handicapped even to get out of bed, was rushed to a hospital where he is being nursed back to health. If we had had a meals on wheels program in this area, perhaps this tragedy would not have occurred. For some of our frail, rural elderly, the beginning of real communication and contact will come when we can go into their homes on a regular basis, without turning our backs on them because they cannot come out to us.

Our fourth concern - though in reality it ranks above all others - is the appalling toll the country's inflation is taking among our elderly. At open hearings in West Virginia last week, older men and women from all over the state spoke in dollars and cents about their worsening plight. One woman who had been receiving a small veteran's pension, reported that out of the $15.50 a month increase she received from Social Security, she ended up with only a fifty-cent increase because of a cut-back in her V.A. pension and an increase in her rent. A number of others told us they were going to be much worse off on July 1 because their eligibility for SSI means they will no longer receive food stamps. I carry with me a resolution from them urging the Congress to prevent this cutback.

The nutrition program is important, but it is no substitute for a good pension system, an adequate retirement income, and appropriate health care. It is no substitute for a decent housing program, or a transportation system.

We have come to see, however, that Title 7 can be a most important part of the lives of many older men and women and, not incidentally, a daily reminder to all of us that much remains to be done before we congratulate ourselves about the way our older Americans live.

Thank you for your attention and your concern.

Senator EAGLETON. Our next witnesses are from the National Council of Senior Citizens, Mr. Alvin Rucker, special assistant to the executive director, and Mr. Gary Capistrant, research assistant.

STATEMENT OF ALVIN RUCKER, SPECIAL ASSISTANT TO THE EXECUTIVE DIRECTOR, NATIONAL COUNCIL OF SENIOR CITIZENS, WASHINGON, D.C., ACCOMPANIED BY GARY F. CAPISTRANT, RESEARCH ASSISTANT

Mr. RUCKER. I am Alvin Rucker, special assistant to the executive director.

With me is Mr. Gary Capistrant, research assistant of the National Council of Senior Citizens.

Mr. Capistrant will answer questions.

Mr. Chairman, I wish to express on behalf of the National Council of Senior Citizens appreciation for this opportunity to outline the need to advance the nutrition program for the elderly.

Extension of this program is central to the objective of older citizens fully sharing in the living standard created by their hard work and enjoyed by the vast majority of Americans.

Despite the facts that its startup was only recent, the nutrition program for the elderly, title VII of the Older Americans Act, is proving to be an effective and popular method to improve the well-being of low income elderly.

We are heartened that Congress is aware of the success of this program. Overwhelming support was displayed recently in the House passage of the program's extension, H.R. 11105.

Passed by 380 to 6, with the unanimous backing of the Committee on Education and Labor, H.R. 11105 provides for a 3-year extension with funding authorized at $150 million in fiscal year 1975, $200 million in 1976, and $250 million in 1977.

So that the title VII program can develop properly, we believe that a 3-year extension is essential. Since the program has just begun, this period of time is necessary to established the program on a solid basis so that efforts can be directed at internal improvements in the quality and availability of meals, as well as developing the desired coordination with other social, health, and information services.

In addition, State and areawide agencies on aging will be reluctant to make the important commitment to this new program if the Federal Government is committed only on a year-to-year basis.

A 3-year extension would bolster the confidence of participating agencies that, despite its unpersuasive legislative history, the Federal Government is serious about continuing this program.

In addition, we urge that the authorizations be established at levels which take into consideration the early successes of the program and the increasing inflationary pressures.

The Nutrition Program for the Elderly Act, which was signed into law in March 1972, authorizes $100 million for fiscal year 1973, and $150 million in 1974.

H.R. 11105 authorizations for 1975 are not 1 penny more than those of 1974, yet there has been an increase of 30 percent in the consumer price index for food since March 1972.

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Therefore, we recommend that minimal authorizations of $200 million in fiscal 1975, $250 million in 1976, and $300 million in 1977 be approved.

At current purchasing power, we could provide about 425,000, 530,000, and 640,000 meals a day, respectively.

The National Council of Senior Citizens has always felt that basic nutrition services must be an integral part of our Nation's social policy.

Recently, the national council produced an award winning film, "We've Come of Age," a very strong presentation on the need for older Americans to organize for social and political change.

There is one segment of the film which made a special impression on me and is appropriate to a discussion about nutrition needs among the elderly.

The camera zeroes in on an elderly leader pleading before a group of older people:

> Do you remember 40 years ago, when a man said one-third of our nation was ill-housed, ill-clothed and ill-fed? Well, one-third of our generation is still ill-housed, ill-clothed and ill-fed. Now. One-third of our generation is forgotten, isolated, alone with their fear and suffering. Now. And yet they endure.

A great many letters received by the national council from members across the Nation indicate that many elderly do endure, both miraculously and tragically.

The most formidable barrier to adequate nutrition among the elderly is low income, especially in these times of soaring costs of food.

What do you say to an older widow who has not been able to afford a piece of meat for weeks?

You would have difficulty in finding a more wholehearted and vocal spokesman for adequate income in old age than the National Council of Senior Citizens.

But the national council is acutely aware of the fact that improved income is not the sole answer to the needs of our older population. No amount of income can purchase services that do not exist.

The national council has therefore been deeply concerned about the Administration's so-called "income strategy" which we fear has been advanced to the exclusion of a "service strategy."

The Administration's argument is essentially this, the way to help people to the services they need is not for Government to provide the services, but to help people have sufficient income to purchase the service of their choice.

I will not repeat here the detailed evidence of the lack of vigor with which the Administration has pursued what it calls its "income strategy." In brief, the strategy is to resist strongly any increase in social benefits beyond that attributable to rising prices.

This strategy would leave just as many people living in poverty as there were before. It does nothing to provide the elderly "with increased purchasing power so that they can obtain needed goods and services with the greatest exercise of freedom."

Furthermore, reliance on an "income strategy" is disastrous in such times of soaring inflation because tomorrow's check cannot pay today's prices.

The best example of the shortcomings of the "income strategy" is the enacted 11 percent "cost-of-living" increase to social security benefits.

In adding the automatic cost-of-living escalator to the Social Secu-

rity Program in 1972, Congress made it clear its intent to protect beneficiaries from increases in the cost of living beginning in January 1973.

Mr. Chairman, I have in my written statement a table which I will not read, but I request it be placed in the record along with the statement.

Senator EAGLETON. It will be part of the record.

Mr. RUCKER. As you can see, with the CPI up by 12.8 percent from January 1973 through April 1974, the 11 percent social security increase was inadequate before even being paid.

More glaring is the observation that by July the cost of all CPI items will have increased by at least 14.4 percent, yet social security beneficiaries will have only received an 11 percent "cost of living" increase, thus creating more than a 3 percent shortfall.

In other words, to carry out Congressional intent to protect the social security income, the July social security increase of 4 percent should be doubled.

And the prospects are even more ominous because the current rate of inflation greatly exceeds that of 1973.

The prices for living in our "double digit" economy is especially high for the elderly who pay a disproportionate amount of their budget for food, shelter, medical care, and transportation.

The table below compares the percentage of the total Bureau of Labor statistics family budget spent in autumn 1972 by an intermediate level urban family of four with an intermediate and lower level urban retired couple. The lower level retired couple's budget is even more generous than the income of the nutrition program's target population of those below the Census Bureau poverty threshold. The last column of this chart shows the annual rate of cost-of-living increases for the last 6 months.

Mr. Chairman, I have in my written statement a table which I will not read, but I request it be placed in the record along with the statement.

Seantor EAGLETON. It will be part of the record.

[The table referred to follows:]

[In percent]

	Intermediate budget family of 4	Intermediate budget retired couple	Lower budget retired couple	Annual rate of CPI increase November 1973–April 1974
Housing	24.6	35.1	35.2	11.9
Food	23.4	26.7	28.8	12.4
Medical care	5.6	8.7	12.6	6.3
Subtotal	53.6	70.5	76.6	
Transportation	8.6	9.0	6.7	15.8
Total	62.2	79.5	83.3	

Mr. RUCKER. How can low income elderly spend about 30 percent of their budget for food and handle significant increases in food costs?

With incomes fixed, the effect of new rent and utility increases, or a medical bill can make oatmeal a staple, fish and chicken a luxury.

But even an enlightened income strategy would not meet the needs to which the nutrition program for the elderly is addressed. This is not

simply an "either/or" matter. Adequate income is only one part of the solution to the problem.

There are several other common causes of malnutrition among the low income elderly. The lonely older person who can afford an adequate diet but does not eat properly; the older person who finds going to the store too great a burden; the older person who is nutritionally ignorant; the chronically ill older person unable to prepare a hot meal—all are part of the problem.

Whatever the cause, malnutrition among older Americans constitutes a social disgrace, one that demands the continued attention provided by this legislation.

The malnutrition of large numbers of elderly persons presents a paradox. Often they restrict their diets, thereby risking their health, to have money for medicine they need to maintain health.

In addition to promoting improved health among the elderly through better nutrition, the nutrition program is aimed at reducing the isolation of old age and providing a focal point for the delivery of basic social services, preventive health services, and social activities.

Although this program has brightened the retirement years of thousands of older Americans and enabled them to remain self-reliant and independent, we must remind ourselves that there are millions eligible but unserved.

Although early figures indicate that 70 percent of the meals served are to older people below the Census Bureau poverty threshold, less than 3 percent of those 60 years of age or older below this "rock bottom" level are receiving any meals from this program.

This successful, but modest, approach to meeting the nutrition needs of older people must be given sufficient time and funding to develop.

Are we asking too much of this Nation to guarantee an older person living in abject poverty one hot nutritious meal a day at least 5 days a week?

That concludes my statement, Mr. Chairman.

Senator EAGLETON. Mr. Capistrant, do you have something you wish to add to the prepared statement by Mr. Rucker?

Mr. CAPISTRANT. No, Senator.

Senator EAGLETON. On page 6, Mr. Rucker and Mr. Capistrant, I notice these figures:

"Although early figures indicate that 70 percent of the meals served are to older people below the Census Bureau poverty threshold, less than 3 percent of those 60 years of age or older below this rockbottom level are receiving any meals from this program."

I think that 3-percent figure agrees identically with the testimony of Mr. O'Malley from the State of New York, and that the figures in the House-passed bill, when we include inflationary factors and increased cost of transportation and the like, probably the best we would still be able to do, if we adopt those figures, is about that same 3 percent.

Would that be your very rough calculation?

Mr. CAPISTRANT. Yes, it would appear to be that case, Senator.

Senator EAGLETON. Does the National Council of Senior Citizens have any information as to the sizable numbers of people, or whatever the size might be, who are seeking to participate in the title VII nutritional meal programs, but have been denied just because of the limit of funds or availability of the program in a given area?

Mr. CAPISTRANT. Yes, Senator.

We have received a large number of letters from our members who do not have a program in their area. They find they are not eligible or that there is a waiting list, as the other speakers this morning have testified.

There is a large reserve of people that are just not being served by this program, although the program is a very good one.

Senator EAGLETON. Is the awareness of the existence of the program becoming increasingly widespread; that is, is it fairly well known as a general proposition that there is such a program, at least in many counties and cities of the country?

Mr. CAPISTRANT. Yes, the word is indeed getting out.

Senator EAGLETON. The outreach factor in the years ahead will become less of a problem and accommodating people's needs will be more of a problem?

Mr. CAPISTRANT. The outreach does not seem to be that much of a problem when you have a large waiting list.

Senator EAGLETON. Do we have any figures on what percentage of the programs being operated now in the country have some transportation facet attached to them?

Mr. CAPISTRANT. I do not know those figures, Senator. I could try to provide them to you.

Senator EAGLETON. We will try to get it from the Administration tomorrow.

The ones that I am aware of in Missouri—I do not know what the percentage would be, but it would certainly be well less than half—have some transportation facet, and the rest you have to get there on your own as best you can.

Mr. Rucker and Mr. Capistrant, we very much want to thank you for very excellent prepared statement, especially your statistics with respect to the impact of inflation on the elderly, which I think are most striking and most compelling.

This committee will take due note of your recommendation.

Mr. RUCKER. Thank you.

[The prepared statement of Mr. Alvin Rucker follows:]

Hearing before the Subcommittee on Aging
of the Committee on Labor and Public Welfare,
U.S. Senate, on the extension of the
Nutrition Program for the Elderly

Wednesday, May 22, 1974

Testimony of Alvin Rucker, Executive Assistant
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Mr. Chairman and distinguished members of the Subcommittee on Aging of the Labor and Public Welfare Committee, I wish to express on behalf of the National Council of Senior Citizens appreciation for this opportunity to outline the need to advance the Nutrition Program for the Elderly. Extension of this program is central to the objective of older citizens fully sharing in the living standard created by their hard work and enjoyed by the vast majority of Americans.

Despite the fact that its start-up was only recent the Nutrition Program for the Elderly, Title VII of the Older Americans Act, is proving to be an effective and popular method to improve the well-being of low income elderly.

We are heartened that Congress is aware of the success of this program. Overwhelming support was displayed recently in the House passage of the program's extension, H.R. 11105.

Passed by 380-6 with the unanimous backing of the Committee on Education and Labor, H.R. 11105 provides for a three year extension with funding authorized at $150 million in fiscal year 1975, $200 million in 1976, and $250 million in 1977.

So that the Title VII program can develop properly, we believe that a three year extension is essential. Since the program has just begun, this period of time is necessary to establish the program on a solid basis so that efforts can be directed at internal improvements in the quality and availability of

meals as well as developing the desired coordination with other social, health, and information services.

In addition, state and areawide agencies on aging will be reluctant to make the important commitment to this new program if the Federal government is committed only on a year to year basis. A three year extension would bolster the confidence of participating agencies that despite its unpersuasive legislative history, the Federal government is serious about continuing this program.

In addition, we urge that the authorizations be established at levels which take into consideration the early successes of the program and the increasing inflationary pressures.

The Nutrition Program for the Elderly Act, which was signed into law in March, 1972, authorized $100 million for fiscal year 1973 and $150 million in 1974. H.R. 11105 authorizations for 1975 are not one penny more than those of 1974 yet there has been an increase of 30 percent in the consumer price index for food since March, 1972.

Therefore, we recommend that minimal authorizations of $200 million in fiscal 1975, $250 million in 1976 and $300 million in 1977 be approved. At current purchasing power we could provide about 425,000, 530,000 and 640,000 meals a day respectively.

The National Council of Senior Citizens has always felt that basic nutrition services must be an integral part of our nation's social policy.

Recently, the National Council produced an award winning film,"We've Come of Age", a very strong presentation on the need for older Americans to organize for social and political change. There is one segment of the film which made a special impression on me and is appropriate to a discussion about nutrition needs among the elderly.

The camera zeroes in on an elderly leader pleading before

a group of older people:

> "Do you remember 40 years ago, when a man said one-third of our nation was ill-housed, ill-clothed and ill-fed? Well, one-third of our generation is still ill-housed, ill-clothed and ill-fed. Now. One-third of our generation is forgotten, isolated, alone with their fear and suffering. Now. And yet they endure."

A great many letters received by the National Council from members across the nation indicate that many elderly do endure, both miraculously and tragically.

The most formidable barrier to adequate nutrition among the elderly is low income, especially in these times of soaring costs of food.

What do you say to an older widow who has not been able to afford a piece of meat for weeks?

You would have difficulty in finding a more wholehearted and vocal spokesman for adequate income in old age than the National Council of Senior Citizens. But the National Council is acutely aware of the fact that improved income is not the sole answer to the needs of our older population. No amount of income can purchase services that do not exist.

The National Council has therefore been deeply concerned about the Administration's so-called "income strategy" which we fear has been advanced to the exclusion of a "service strategy". The Administration's argument is essentially this: The way to help people to the services they need is not for government to provide the services, but to help people have sufficient income to purchase the services of their choice.

I will not repeat here the detailed evidence of the lack of vigor with which the Administration has pursued what it calls its "income strategy". In brief, the strategy is to resist strongly any increase in social security benefits beyond that attributable to rising prices. This strategy would leave just as many people living in poverty as there were before. It does nothing to provide the elderly "with increased purchasing power

so that they can obtain needed goods and services with the greatest exercise of freedom."

Furthermore, reliance on an "income strategy" is disastrous in such times of soaring inflation because tomorrow's check can not pay today's prices.

The best example of the shortcomings of the "income strategy" is the enacted 11 percent "cost-of-living" increase to Social Security benefits.

In adding the automatic cost-of-living escalator to the Social Security program in 1972, Congress made clear its intent to protect beneficiaries from increases in the cost-of-living beginning in January, 1973.

The table below shows the percentage increases in the Consumer Price Index for selected items during the period of January, 1973 - April, 1974 and extrapolated through June, 1974:

Consumer Price Index	1/73-4/74	1/73-6/74
All items	12.8%	14.4%
Food	23.3	26.2
Food at home	25.1	28.2
Cereal and bakery products	38.8	43.7
Meats, poultry and fish	19.9	22.4
Dairy products	29.2	32.9
Fruits and vegetables	23.8	26.8

As you can see, with the CPI up by 12.8 percent from January, 1973 through April, 1974, the 11 percent Social Security increase was inadequate before even being paid. More glaring is the observation that by July the cost of all CPI items will have increased by at least 14.4 percent, yet Social Security beneficiaries will have only received an 11 percent "cost-of-living" increase thus creating more than a 3 percent shortfall. In other words, to carry out Congressional intent to protect the Social Security income, the July Social Security increase of 4 percent should be doubled.

And the prospects are even more ominous because the current rate of inflation greatly exceeds that of 1973.

The price for living in our "double-digit" economy is especially high for the elderly who pay a disproportionate amount of their budget for food, shelter, medical care, and transportation.

The table below compares the percentage of the total Bureau of Labor Statistics family budget spent in Autumn 1972 by an intermediate level urban family of four with an intermediate and lower level urban retired couple. (The lower level retired couple's budget is even more generous than the income of the nutrition program's target population of those below the Census Bureau poverty threshold.) The last column of this chart shows the annual rate of cost-of-living increases for the last six months:

	Intermediate budget family of four	Intermediate budget retired couple	Lower budget retired couple	Annual rate of CPI increase 11/73-4/74
Housing	24.6%	35.1%	35.2%	11.9%
Food	23.4	26.7	28.8	12.4
Medical care	5.6	8.7	12 6	6.3
Subtotal	53.6	70.5	76.6	
Transportation	8.6	9.0	6.7	15.8
Total	62.2	79.5	83.3	

How can low income elderly spend about 30 percent of their budget for food and handle significant increases in food costs? With incomes fixed the effect of new rent and utility increases or a medical bill can make oatmeal a staple, fish and chicken a luxury.

But even an enlightened income strategy would not meet the needs to which the Nutrition Program for the Elderly is addressed. This is not simply an "either/or" matter. Adequate income is only one part of the solution to the problem.

There are several other common causes of malnutrition among the low income elderly. The lonely older person who can afford

an adequate diet but does not eat properly; the older person who finds going to the store too great a burden; the older person who is nutritionally ignorant; the chronically ill older person unable to prepare a hot meal--all are part of the problem.

Whatever the cause, malnutrition among older Americans constitutes a social disgrace, one that demands the continued attention provided by this legislation.

The malnutrition of large numbers of elderly persons presents a paradox. Often, they restrict their diets, thereby risking their health, to have money for medicine they need to maintain health.

In addition to promoting improved health among the elderly through better nutrition, the nutrition program is aimed at reducing the isolation of old age and providing a focal point for the delivery of basic social services, preventive health services, and social activities.

Although this program has brightened the retirement years of thousands of older Americans and enabled them to remain self-reliant and independent, we must remind ourselves that there are millions eligible but unserved.

Although early figures indicate that 70 percent of the meals served are to older people below the Census Bureau poverty threshold, less than three percent of those 60 years of age or older below this "rock-bottom" level are receiving any meals from this program.

This successful, but modest, approach to meeting the nutrition needs of older people must be given sufficient time and funding to develop.

Are we asking too much of this nation to guarantee an older person living in abject poverty one, hot, nutritious meal a day, at least 5 days a week?

Senator EAGLETON. Our next witnesses are Ms. Marilyn Lytle, Food Research and Action Center, New York, and Mr. Rodney Leonard, Community Nutrition Institute.

STATEMENT OF MARILYN LYTLE, FOOD RESEARCH AND ACTION CENTER, NEW YORK, ACCOMPANIED BY RODNEY LEONARD, COMMUNITY NUTRITION INSTITUTE

Ms. LYTLE. Mr. Chairman, I am pleased to have this opportunity to discuss with you the continuation and expansion of the elderly nutrition program, and to share with you some of our observations during the program's beginning stages.

First, I would like to commend all of those who have worked to make the program a reality. The development of a $100 million program in just a few months is a monumental task. I think we can be proud that so many individuals, groups, private and public agencies, have responded so enthusiastically to the needs of our senior citizens.

This response is also a reflection of a vast need for nutrition programs all across the country—a need which has not been met by the meager funds presently available for this program.

Only about 1 percent of those eligible can be served daily. That is to say 99 percent of our Nation's elderly, many of whom are desperately in need of hot nutritious meals, the companionship, and all the supportive services offered by this program, cannot participate.

If funds for this program are not increased, even fewer elderly will be served due to soaring food costs.

Obviously, the need for expansion is the most urgent problem we face.

I have compiled information regarding the need for expansion based on a survey done by the Senate Special Committee on Aging—see attachments. The State title VII administrators almost unanimously expressed a need for vast expansion.

Senator EAGLETON. Could I ask you to suspend for a minute?

As I announced earlier today, Senator Percy is with us and we are pleased to welcome Senator Percy of Illinois at this time.

STATEMENT OF HON. CHARLES H. PERCY, A U.S. SENATOR FROM THE STATE OF ILLINOIS

Senator PERCY. Mr. Chairman, I am very grateful indeed. I certainly regret being late this morning, but we had the Soviet delegation of parliamentarians at my home for breakfast, and we got deeply involved in complicated subjects. I just could not break away.

I am very grateful for the chance to testify in support of the nutrition program for the elderly.

Senator Kennedy and I introduced the bill which is before you today, S. 2488, on September 26, 1973. It now has 26 additional cosponsors from both parties.

Alternative bills have been introduced and cosponsored by distinguished members of this subcommittee and other Senators.

The companion bill to S. 2488 in the House of Representatives won overwhelming approval earlier this year. Unquestionably, the nutrition program for the elderly enjoys widespread support.

I am confident the program will be extended and that it will be extended for 3 years.

Although I have not had the privilege of serving on this subcommittee, I nonetheless have been deeply involved with the nutrition program for the elderly from the very outset. And I am proud of what has been accomplished under some unusual and trying circumstances.

The people in the Administration on Aging, especially John B. Martin, the former Commissioner; Arthur Flemming, the current Commissioner; and Donald Watkin, the chief of the nutrition program, should be congratulated on the job they have done. I may not have always agreed with their approach to the program, but I have never doubted their ability or desire to implement it successfully.

I remember the struggle we had in 1971 to save the 21 demonstration projects which were the forerunners of the title VII program. It seems ironic that so much effort had to be expended then in order to assure $1.7 million to provide about 3,000 meals a month when we are now so willing to appropriate more than $100 million to provide over 200,000 meals a day.

I cannot help but recall pointing out during the arguments on the floor at that time that we had no trouble getting appropriations approved for $4.5 billion of farm subsidy money to subsidize farmers not to produce a product, but we had trouble getting $1,700,000 to feed malnourished older Americans.

Our experience since 1971 fully bears out my confidence in the demonstration projects. It bears out the testimony I offered on behalf of S. 1163 in June 1971. And it justifies the time and attention that Senator Kennedy and I devoted as members of the Select Committee on Nutrition and Human Needs to monitoring the development and implementation of regulations and guidelines for the program.

Many thousands of senior citizens are now eating at least one and as many as five hot nourishing meals a week where before they may have been subsisting on tea and toast.

Many thousands are now making new friends and renewing old acquaintances at the community dining sites where before they may have been living alone and isolated in tiny apartments.

And many thousands are now aware of and have perhaps utilized other social services to which the program has exposed them where before they knew nothing of them.

We know that the dinner table or lunch table is a place of conversation, and we build our social lives on that. The fact that these older people, instead of sitting in a tiny room some place and eating something heated over a sterno can, as sometimes they have told me they have done, now have a place they can go, a place they can dress up for and where they can meet other people has really made a difference between living and not wanting to live.

It has meant this much. It is not just nourishment for the stomach; it, in a sense, is nourishment for the soul, as one participant said to me.

Even though some 180,000 people are receiving meals daily, I would count this program a success if the lives of only several hundred of the elderly persons being served were, in fact, made fuller and richer.

All of the letters we have received and the news stories we have read have been warmly supportive and enthusiastic about the basic

thrust of the program. I believe, nonetheless, that we should not move now to expand the program.

As Dr. Watkin told the Nutrition Committee last year, the title VII program is, in effect, a demonstration project on a massive scale. It has been designed and implemented to gather evidence on the feasibility and effectiveness of congregate dining programs for older persons.

We need a great deal more experience with the present program before we can consider making it permanent, folding it into the title III program, or revising it in any fundamental way.

S. 2488 authorizes a 3-year extension of the program. A 3-year term is necessary for the following reasons.

1. It will allow for a reasonable evaluation of the program on the basis of a substantial period of operation.

2. It will place the title VII program in cycle with the other titles of the Older Americans Act, and

3. It will allow States and localities to plan for the continued operation of the program without fear of an imminent loss of funding.

I believe that the uncertainty a 1-year extension would cause for program sponsors and governmental agencies alike would throw the program into chaos, chaos from which it would be impossible to obtain a valid evaluation of its costs and benefits.

S. 2488 authorizes appropriations of $150 million, $175 million, and $200 million for the next 3 fiscal years. Senator Kennedy and I agree that the inflationary pressures of the last year or more now dictate higher levels of funding in order to maintain the program at its present level. We support the authorization levels approved by the House—$150 million, $200 million, and $250 million.

I do not think it is appropriate to amend the authorizing legislation further at this time although I realize a number of questions have been raised about the shape of the law.

Are the requirements concerning home-delivered meals realistic and adequate?

Are the provisions for administrative expenses, as well as funds for supportive services adequate?

Are the requirements for the employment of older persons realistic when one considers the demands of working in a large institutional kitchen?

Are we getting the most for our dollars in terms of demonstrable improvements in the nutritional health and general well-being of the elderly?

Do present funding limitations together with the absence of a means test result in some poor people being denied meals while middle-class elderly persons receive them?

I submit, Mr. Chairman, that while questions obviously exist, we do not have enough experience with the program to answer them completely and reasonably.

I oppose tinkering with the law on the basis of incomplete information. I oppose tinkering because of the inevitable delays this would cause in completing action on this important piece of legislation.

I do want to make one more point before I close.

When the Congress overwhelmingly approved the creation of the title VII program, we made a conscious decision to build that program on the foundation of the title IV demonstration projects.

Although the law provides that these original projects were to become part of title VII and were to conform to its requirements, I do not think it was our intent that this had to be done at any cost, even to the point of destroying the basic character of these original programs.

Differences in operation can be tolerated as long as the standards are as high as those prescribed in title VII.

If this subcommittee concurs with my view, then some language in the report accompanying this legislation would likely be sufficient to clarify the point.

Thank you, Mr. Chairman, for inviting me to appear this morning.

I urge you to report S. 2488 as soon as possible so that nearly 200,000 older Americans will know that the nutrition program for the elderly will continue after July 1.

I certainly wish to thank you and the members of your distinguished staff for the magnificent support, enthusiastic support, that you have shown for these programs in the past. It has made them possible really.

Senator EAGLETON. Thank you very much, Senator Percy.

Your interest in matters relating to the elderly and nutrition are well known. We very much appreciate your testimony and the contribution you have made.

Senator PERCY. I thank my distinguished friends at the table here for letting me intervene.

Senator EAGLETON. Ms. Lytle, you may continue.

Ms. LYTLE. Mr. Chairman, I request that the statistics at the end of my report be made a part of the record.

Senator EAGLETON. Yes, it will be made a part of the record.

[The information referred to follows:]

Attached is a chart indicating the the need for expansion in each state. Figures are based on responses by Title VII Directors to a questionnaire from the Senate Special Committee on Aging.

STATE	MEALS SERVED DAILY (FULLY IMPLEMENTED) F.Y. '73	NUMBER WHO WOULD PARTICIPATE IF ADEQUATE FUNDS AVAILABLE	NUMBER OF PROJECTS AND SITES WITH F.Y. '73 ALLOCATION		NUMBER OF PROJECTS AND SITES NEEDED TO FEED ALL WHO WOULD PARTICIPATE	
Alabama	3,470+	150,000	P-6	S-72	P-12	S-250
Alaska	600	6,000	P-6	S-15	P-25	S-300
Arizona	1,680	25,000	P-8	S-28	P-125	S-375
Arkansas	2,000+	-	P-9	-	-	-
California	18,413	30% of more of elderly pop.	P-52	S-300	P-100	S-300
Colorado	1,850	50,000	P-5	S-49	P-30	S-200 - 250
Connecticut	3,050	46,000	P-11	S-70	P-160	S-1,000
Delaware	1,200	2,500 - 3,000	P-4	S-24	P-4	S-34
District of Columbia	1,100	10,000	P-5	S-42	P-9	S-150
Florida	9,604	Over 1.5 million	P-19	S-118	P-2,850	S-17,700
Georgia	3,740	214,066	P-8	S-72	P-18	S-162
Hawaii	1,310	4,160	P-4	S-13	P-4	S-32
Idaho	1,080	10,500	P-8	S-37	P-11	S-55
Illinois	10,936	354,828	P-30	S-240	P-50	S-440
Indiana	5,366	200,000	P-11	S-119	P-22	S-500
Iowa	2,994	43,015	P-11	S-81	P-11	S-170
Kansas	3,719	7,500	P-5	S-50	P-20	S-80
Kentucky	3,270	360,459	P-7	S-49	P-15	S-200
Louisiana	3,090	double	P-9	S-50	P-14	S-100
Maine	1,500	3,427	P-5	S-24	P-5	S-57
Maryland	2,879	60,000	P-12	S-62	P-22	S-137
Massachusetts	4,600	10,000	P-18	S-100	P-23-25	-
Michigan	7,300	12 - 15,000	P-31	S-127	P-95	-
Minnesota	4,000 - 4,500	13,500 easily	P-17	S-105	P-Same	S-300
Mississippi	2,358	Great potential for expansion	P-9	S-42	-	-
Missouri	5,390	200,000	P-9	S-100	-	-
Montana	930	1,500	P-5	S-15	P-10	S-33
Nebraska	1,565	2,000	P-8	S-45	P-8	S-51
Nevada	1,150	2,000	P-10	S-20	P-14	S-29
New Hampshire	1,205	3,000+	P-6	S-22	P-6	S-56
New Jersey	6,035	300,000	P-22	S-70	P-30	S-1,500

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STATE	MEALS SERVED DAILY (FULLY IMPLEMENTED) F.Y. '73	NUMBER WHO WOULD PARTICIPATE IF ADEQUATE FUNDS AVAILABLE	NUMBER OF PROJECTS AND SITES WITH F.Y. '73 ALLOCATION		NUMBER OF PROJECTS AND SITES NEEDED TO FEED ALL WHO WOULD PARTICIPATE	
New Mexico	2,000 - 2,500	3,500+	P-4 or 5	S-45 - 50	P-10-12	S-80-90
New York	21,000	-	P-19	S-250	P-Same	S-500
North Carolina	4,641	50,000	P-24	S-100	-	-
North Dakota	650	600	P-6	S-15	P-10	S-20
Ohio	8,200	50 - 75,000	P-18	S-176	P-75	S-300
Oklahoma	3,086	100,000	P-5	S-44	P-11	S-1,333
Oregon	3,000	5,000 or more	P-5	S-60	P-3 more	-
Pennsylvania	13,766	500,000 Daily	P-43	S-283	P-68	S-8,000
Rhode Island	1,000	2,000	P-6	S-15	P-6	S-27
South Carolina	5,484	15,000	P-12	S-51	P-30	S-200
South Dakota	1,450	38,000	P-6	S-14	P-8	S-150
Tennesse	3,840	200,000	P-5	S-78	P-9	S-240
Texas	10,400	250,000	P-15	S-?	P-127	S-240
Utah	1,030	1,000 or more	P-3	S-16	P-6	S-15 or more
Vermont	1,100	8,000	P-7	S-41	P-7	S-65
Virginia	4,000	120,000	P-18	S-90	P-22	S-330
Washington	2,448	10,000	P-14	S-70	P-20	S-150
West Virginia	2,000	6,000	P-12	S-79	P-16	S-100
Wisconsin	4,900	thousands more	P-16	S-78	P-50 more	S-200
Guam	310	1,500	P-1	S-7	P-1	S-19

Ms. LYTLE. The State title VII administrators almost unanimously express the need for vast expansion.

For instance, in the State of Missouri, programs are serving only 5,390 meals daily, although there are over 250,000 elderly below the poverty level. The Office on Aging there estimates that 200,000 would take advantage of the program if adequate funds were available. In Maryland, fewer than 3,000 meals are being served although estimates are that 60,000 would participate.

In New York City alone, there are about a quarter of a million elderly poor, but only 10,000 meals are served under title VII. Many communities with thousands of poor and isolated elderly have been unable to get a program at all because they are "nontarget areas." As a matter of fact, such complaints have been the most frequent ones our office has received.

Although the programs are relatively new, many are experiencing demands beyond their capacity. Many have waiting lists or expect to have to implement such procedures soon. Several States report that the popularity of the program is outstripping expectations and straining limited budgets. At one site in New Jersey, for example, 25 to 30 elderly were expected the first day, and 169 arrived. Another site in Illinois was planning to serve 100 meals daily and within a short period was serving 180.

Another factor which must be taken into account is the increase in food costs and other inflationary trends. There was a 31-percent increase in the retail price of food between March 1972, when title VII was enacted, and December 1973, when many programs were getting underway. This, of course, is the primary reason why the program is planning to feed 38,000 fewer meals daily than was originally intended for the first year of funding. Of course, food costs have continued to rise just as other costs have. New York City estimates that an increase of one-third in the budget allowance for food will be necessary next year. Packaging goods necessary for home-delivered meals have gone up from 8 cents per meal to 20 cents. Fuel costs, both for heat and for transportation, are claiming a larger portion of project budgets than anticipated.

Most State directors I have spoken with have indicated that there must be a 15- to 25-percent increase in funds just to allow for inflation.

One State estimated that there would be a 21-percent cutback in the number of meals served daily without additional funding. If we were to project that estimate nationwide, the program would be serving only about 168,000, which is over a third less than the original goal for first-year funding, which was 250,000.

Of course, the elderly, with their small fixed incomes, are among those hardest hit by the rising food costs since they must spend a larger proportion of their budget on food. That fact makes the need for expansion of the program all the more urgent.

Another troublesome problem caused by limited funds which I have noted in some areas is the attempt by local staffs and participants to force, or strongly pressure, participants into making contributions. They see it as a means to expand the capacity of the program. The program is designed to provide an opportunity for contributions but the individual is to choose for himself what contribution he will make, if any at all. I think the intent was to protect someone who, for in-

stance, toward the end of the month had no money left to participate in dignity. It is unfortunate and, in some cases, a violation of the law, that the burden for expansion is being placed on our elderly citizens in some areas.

Senator EAGLETON. What case histories do you have where people have been unduly pressured to make contributions?

The ones I visited have a bowl or coffee cup, or something, and I watched the people come in, and some put a quarter in—some change, I do not know the exact amount—but I did not detect any pressure or arm twisting.

But, as I say, these are just a couple of visits.

Ms. LYTLE. I do not mean to indicate this is a widespread occurrence.

I know of about five communities where people have complained to us and are trying to change policies within the title VII programs where people are forced to pay exactly 50 cents, or something like that. If they do not, they are stopped at the door, you know. It is occurring.

Senator EAGLETON. You do not think it is widespread? You find these to be rather isolated incidents?

Ms. LYTLE. I believe so, but it is happening.

Another point I would like to make on this is that last summer, Congress passed legislation authorizing food stamps to be used in title VII programs, and that has not been implemented yet because the Department of Agriculture has not published final regulations.

In addition, to stressing the need for increased funding, I would like to emphasize the need for extending the authorization of this program for 3 years. The history of funding for title VII has been a rocky one. Presidential vetoes of HEW appropriation bills prevented the implementation of this program for over a year. During that period, States did not know if they should gear up for the program. Now, States are again uncertain as to whether it will continue and for how long. It is important that the Congress make its commitment to the continuing development of these programs clear. Uncertainty regarding funding every year has a debilitating effect on programs and staff.

I would like to turn to some of the problems which have become apparent as the project have been implemented. Failure to provide the supportive services which should be an integral part of the projects is a glaring one. The fact that many projects are not as comprehensive as originally designed results from two factors. First, many of the States and local areas are finding it impossible to deliver all of the services required with only 20 percent of the States' allocation. Demands on other funds, particularly title III, are so strong that, in many cases, projects must rely solely on title VII funds. I hope that you will consider an increase to 30 percent in funding of supportive services, provided, of course, that the number of meals served also increases.

Senator EAGLETON. That 20-percent formula is by Department regulation, is it not?

Mr. LEONARD. Yes.

Ms. LYTLE. The priorities established by the Administration on Aging have also led to this result. They have stressed getting the

meals on the table and the development of the other services have suffered as a consequence. Now that the meal sites are underway, I think it is time to concentrate on assuring the quality of title VII programs as originally intended.

The State administrators were also overwhelmingly critical of the recordkeeping and reporting system developed by a consulting firm for the Administration on Aging. Everyone would agree that good fiscal accounting, recordkeeping and statistical data are vital, but they should not serve as a deterrent to the operation of a good program. Feedback from the local level indicates that the staff who most deal with program and fiscal management find the forms burdensome.

I might add that burdensome is one of the more polite terms used. I understand that some revisions in the system are being considered and I hope you will encourage the Administration to develop further modifications in this area.

Another problem of concern to the States is the lack of administrative funds. The Older Americans Comprehensive Services Amendments prohibited the use of title VII funds for administrative costs after December 1973. An unspecified amount under section 306 of the Older Americans Act is to be used, but there has been no increase in appropriations under this section to compensate for the administration of the new program. A majority of the States do not expect to have adequate funds available to administer and evaluate the program. States were equally divided as to whether 5 percent or 10 percent of the State allotment should be available.

Several primarily rural States have also requested that special rules be established to facilitate the implementation of projects in rural areas. Rural States find the 20 percent limitation on supportive services particularly restrictive. There are usually no adequate transportation systems for the elderly, and developing them is an expensive proposition.

Another suggestion is to drop the age requirement for native Americans from 60 to 55. A much smaller percentage of Indians live beyond the age of 60, and there are many truly elderly Indians between 55 to 60.

Finally, I would like to stress that the elderly nutrition program is designed to fill an important need. I hope that it will be extended and improved so that many more of our senior citizens can benefit from it.

Thank you for this opportunity to come before you today.

Thank you.

Senator EAGLETON. Thank you very much, Ms. Lytle.

Mr. Leonard, you may proceed.

Mr. LEONARD. Mr. Chairman, thank you.

I apologize for not having a prepared statement. I have been out for the last week working in various title VII projects in several of the nearby States. I got home last night about 7 o'clock.

What I would like to do is simply relate to you some of the problems as I see them that can be dealt with, both legislatively and through language that will help guide the administration of the program.

The basic need that we see really goes in about four areas. One is the problem that forward funding, as it is presently being practiced, creates.

The second is the funding level, and the third is the funding allocation, and the fourth are some of the administrative problems relating to the lack of adequate funds for administration.

Now, the problem of forward funding, as it is practiced, is that we are just now having released for 1974–75 the funds that Congress has authorized for 1973–74, that is fiscal 1974. So that, in effect, while forward funding is a much better procedure in terms of planning, it puts the States in the position of planning for last year's problem.

If you were to deal with the problems you would have now, the States ought to be planning to use the funds that you are considering to authorize in this legislation, $150 million, as opposed to $100 million. That means that the program, if it is to be continued at the $100 million level, now faces an increase in cost at least of 10 percent and possibly more, depending on what the rate of inflation is by July, August, and September.

So the $150 million poses this kind of problem. The level of funding is not clear to the States nor to the projects—particularly to the projects—yet the kind of problems indicated here this morning, increased participation and of having to consider turning people away, are here now. In fact, the problem is even more serious, I think, than what was related in certain cases, in that projects are already beyond their targets and goals.

Unless additional funds are made available, they are going to have to cut down participation. They are going to be faced with the problem of how do you reduce or tell people they cannot participate?

Now, funding allocation gets to the kind of current problems that projects are starting to move into. That deals particularly with problems of transportation that has been talked about here. Mr. O'Malley talked about escort services, of outreach, the kind of outreach that you do two things with. You locate the particular target groups you are trying to reach with the program, the very isolated elderly, the elderly poor and elderly minority.

Then the second is the need assessment that goes along with it, because if you must respond to the range of needs that the elderly have.

The need is to work with the individual to make sure that the local service they require is actually delivered. It is much more than referral. Those things include continued work on supplemental social security income.

Food stamps—which is income in a related way—is another problem. Unless Congress clarifies what the relationship of the elderly to the food stamp program will be after June, we are going to have a good deal of confusion as the program expires. Then we have to revert back to the bill which you sponsored originally.

I do not want to get into that. It is going to be a problem because, unless there is an extension, a lot of effort locally is going to have to be spent reestablishing eligibility and trying to clarify the new policy, whatever it is. Taking a policy decision administratively from the Federal level down to a local community level passes it through about three or four different administrative sets, and a good deal of confusion occurs.

The other problem areas are home services or health services, such as physical examination of the individual elderly. From the determination made in these exams—if eyeglasses, hearing aids, or shoes are needed—then the particular remedial effort should be taken, and the project staff needs to see that the service is actually done.

Another problem, which Dr. Gerrard referred to, is the effort to try to do more homebound meal service. This is a particular problem in both rural as well as urban areas. It is a special problem in rural areas, particularly in the mountain regions.

I was in Front Royal, Va., last week working with the project there. It is very similar to the kinds of projects operated in West Virginia, in that the isolation you discover, particularly as you go up into the hollows, is overwhelming.

The individual elderly have been so isolated that they are unable to relate socially to strangers. It is impossible to bring them into a site where they have to socialize because they have lost social skills, and it takes time to rebuild them. In many cases the older people are quite ill, and in a number of instances the staff has discovered elderly who are in terminal stages of cancer, who needed medical attention and would not have received it, who would have died if they had not been discovered.

This all takes money. It takes more money that what most projects are able to provide within the 20 percent.

I would like to urge the committee to consider if the increase for $150 million is approved, that language be provided authorizing the administration to increase the support service allocation to 25 percent, and up to a maximum of 30 percent when the $200 million or $250 million levels are reached.

Senator EAGLETON. I am not quarreling with your suggestion, Mr. Leonard. But if we do that, and assuming that inflation continues roughly at the same pace, the net effect of that would probably be distributing fewer meals, would it not?

Mr. LEONARD. The $150 million represents a 50-percent increase. If you increase the support service category 25 percent, that takes an additional 5 percent out of it, which represents about $7.5 million. There would be an increase, an actual increase in the amount of funding for both new programs to start and for existing programs to expand, as well as to provide more funds for support services.

Transportation is a much more serious problem than was originally anticipated when the program was authorized. The problem is not only organizing volunteers to provide transportation service, the escort service, but in many cases it requires, in order for a project to service the community it is in, the project to obtain buses, either through leasing or through purchase, and to provide staff to operate the equipment for 4 to 6 hours a day.

Budgets simply do not provide room for that. But if the program is going to reach the target groups, the isolated and minority and poor, they have to do it. It has to come out of the program budget.

The fourth area I wanted to talk about briefly was administrative funding. That gets into the problem of recordkeeping and reporting.

I think a lot of the problems arise from the procedure that is used. The nutrition information system is a manual system at the local and

State level. When it reaches the Federal level, it is converted to a computer system. Many of the problems the projects are having relate not to acquiring and recording the data, as much as to converting the data, so it can be used in the computer system the Federal Government has set up.

That is one problem.

Another problem is that because of the emphasis being placed on title III at the State level, and it means that a lot of State funding is directed toward those problems, and administratively, the title VII program tends to take second place. It gets what is left, or it often gets overlooked, so that I think there needs to be some indication on the part of Congress as to what extent or degree of importance that Congress believes ought to be placed to correct and to improve the administrative elements in the title VII program.

Again, I apologize for not having this written down. I can write this up if it will be helpful to the committee.

Senator EAGLETON. That is not necessary, Mr. Leonard. Your presentation has been excellent. You outlined it in four categories, as you said at the outset.

It has been very, very helpful to us.

I do want to point out that what we are talking about here in this bill are of course authorization levels, $150 million, $200 million, and $250 million. There is no certainty that that is the amount of money that ultimately would be appropriated. I personally would hope it would be. But, as you know, there is, sometime, a dichotomy between authorization process and appropriation process. More often than not there is.

Mr. LEONARD. I am very familiar with the problem.

Senator EAGLETON. That is why I am somewhat reluctant to try to spell out by statute what percentage of the program ought to go for supporting services.

Mr. LEONARD. I am not recommending it be put into the statute, I am recommending the committee clarify its intentions in the legislative history.

Senator EAGLETON. Thank you very much, Mr. Leonard and Ms. Lytell.

We have two additional witnesses. If they do not mind, we will take a brief recess at this time, so I can take care of some other duties briefly.

We will take a brief recess and we will come back and take the remaining testimony.

The committee will stand in recess for about 10 or 15 minutes.

[Short recess.]

Senator EAGLETON. The committee will be in order.

We will hear from our final two witnesses from the Metropolitan Commission on Aging, Syracuse, N.Y., Ms. Anna Babic, executive director, and Ms. Helen Howard, project director, senior nutrition program.

I wish to thank both of you for your indulgence in permitting us to have that brief recess. I hope it did not unduly inconvenience you. You may proceed.

STATEMENT OF ANNA L. BABIC, EXECUTIVE DIRECTOR, METROPOLITAN COMMISSION ON AGING, SYRACUSE, N.Y., ACCOMPANIED BY HELEN HOWARD, PROJECT DIRECTOR, SENIOR NUTRITION PROGRAM

Ms. BABIC. My name is Anna L. Babic. I live in Onondaga County, N.Y., and I am the executive director of the Metropolitan Commission on Aging of Syracuse and Onondaga County. The commission is a county office for aging, and as of July 1 will be officially designated as an area agency on aging. I would like to present some comments on the title VII program, from the perspective of the local community. Rather than having these comments be solely my own, I have taken the opportunity to request input from other county offices for aging in New York State, from title VII directors in the State, from title VII staff in Onondaga County, and from representatives of ACCORD, our older persons' advocacy group. This testimony is an attempt to synthesize a host of inputs, for consideration and deliberation.

Conceptually, title VII is a very exciting program. The combination of nutritionally adequate meals, plus the provision of a range of additional, mandated services, plus an emphasis upon socialization, represents a unique departure from previous Federal programs, which, by and large, have been narrowly categorical in character. Title VII, on the other hand, represents an opportunity to provide an entry point from which older persons can gain access to the total spectrum of services which the community provides for its senior citizens.

However, it is for these very reasons that title VII is also an extremely complex program. First and foremost—as has been consistently and rather forcefully pointed out by State and regional offices—it is to be considered a nutrition program. This stance contributes to its complexity. For example, before January 1, few of us who are now charged with administration of the program knew what recommended dietary allowance meant, let alone the implications, in terms of translating these nutritional requirements into meals-on-the-table. Therefore, there has been an ongoing education process, at all levels of operation. As a reverse case in point, many registered dietitians knew little about ancillary social services, so they have had to learn the importance of incorporating these into the ongoing program.

In retrospect, the planning guides which we were furnished were excellent. They were useful in determining target areas where meal sites were to be located. In performing this exercise, we verified what had been suspected about our local situation, but we were able to identify these areas with some modicum of legitimacy. We were also encouraged, by our State office for aging, to use the mechanism of a community forum. This process enabled us to quickly reach a large number of interested parties, to distribute information about the program, and to elicit rapid feedback.

Implementation of the program has identified the fact that title VII has, built into it, a number of conflicts. Especially significant to us have been: Lack of resources, time pressures, and the dichotomy between "use of existing resources" and "maintenance of effort."

Lack of resources must be an all too familiar complaint. However, in the present situation, it might be useful to examine the specific constraints. Few of the New York State title VII projects have a funding level which permits them to do more than touch the surface of the target population. The projected goal of "number of meals per day" is not adequate to serve 10 percent of the number of individuals, 60 or over, who had incomes below the poverty level in 1970. Even if this poverty group was served exclusively—and I would vigorously oppose such a stance—our resources would barely make a measurable impact upon the number of individuals who would be eligible. This factor should be taken into consideration, not only in terms of future funding, but in terms of planned evaluation of present operations.

The lack of resources also complicates the provision of the seven mandated additional services. Where additional services exist in a community, there is one set of circumstances with which to deal—such as convincing other service providers to "buy into" the title VII concept. Where these resources do not exist, the situation becomes impossible. This, of course, mostly affects rural counties. Their unanimous plea is "we need transportation."

Time pressures also precipitate conflict, especially between local projects and State and Federal representatives. The implications of the magnitude and complexity of our task really did not register at the local level until November 1. That was the day on which the "official" title VII application arrived on my desk. From then on, things should have been done "yesterday." The application represents a gruesome grind—merely in volume, it is a tortuous task. It consists of three parts: Part A, 12 pages, one copy per project; part B, 20 pages, one copy per site; part C, 12 pages, one copy per budgetary unit—administration plus each subcontractor. In Onondaga County, this equaled nine sets of part B and four C's. In addition, agencies with whom we were subcontracting had to be educated and assisted in the process, after the contract award process occurred. The result was a massive document—one copy of which was approximately 4 inches thick. Hopefully, this process will be expedited in the future, and it merely represents the "growing pains" of initiation of a new program.

Also, some of the application requirements are extremely unrealistic, in terms of projections for a new program. For example, every line item must be broken down, functionally. Meals, administration, and each of the seven mandated services must be prorated, in dollar amounts. We found this exercise to be the most annoying of the entire application process. Admittedly, the information could be extremely useful. However, it is an extremely complicated exercise in arithmetic, prior to implementation of a project. We are planning to do a time study, so that our projections for 1975 will have some basis in our actual operation. But it is important for me to point out that, in terms of the inordinate amount of time which this exercise took, that, when finished, we still had nothing more than a guess.

Implementation within 90 days was also extremely unrealistic. It would be possible, were we only concerned with providing a nutritional meal on the table. But we are talking about people and, in particular, older people. If we accept the human services aspect of title VII, then we must also take into consideration such factors as: Physical barriers in potential sites, outreach and public information efforts,

and more than putting a meal on the table and saying "that's it." This expectation also ignored the fact that the program was being initiated in the dead of winter—and winter in upstate New York can be a considerable external force over which we have no control. Therefore, the 90-day expectation created a conflict between expediency and an orientation to human services.

The third built-in conflict is precipitated by the rules and regulations, and it occurs between "use of existing resources" and "maintenance of effort." Separately, these are each highly desirable operational directives. However, the results of trying to combine the two creates conflict at the local level. Simplistically, if existing resources are used—a most logical methodology—then those agencies which have been struggling for years with inadequate meals, which do not meet the standards set for title VII, and who want additional moneys in order to upgrade their programs, end up being handicapped by the maintenance of effort requirement. In contrast, agencies which elected to begin the program on January 1 do not encounter this handicap. I would like to suggest that efforts be directed to devise alternatives which would not place such a heavy penalty upon these past providers of meals to older persons.

Senator EAGLETON. Could you spell out exactly what you mean by that?

Ms. BABIC. I have been unable to come up with any alternatives to suggest. I have thought about it and perhaps it is just a built-in conflict.

I do agree that maintenance of effort is an important concept, and also that we try to use existing resources and improve them. Perhaps once we do that, the maintenance of effort moneys could be considered part of the local share; but that certainly is not clear as the rules and regulations are now structured.

Therefore, we have agencies which are committed—that are really providing services, but we have no way of incorporating their efforts into our reporting system, or financial system, at the local level.

The preceding comments offer a general impression of title VII, as some of us have perceived its implementation, in New York State. However, my major concern in the entire program has not yet been mentioned.

This concern is basically within the area of accountability. I see two types of accountability: Fiscal and programmatic. They are, admittedly, interrelated. Fiscal accountability is perhaps the easiest with which to deal, even though it represents a never-ending source of irritation. No one would presume that fiscal accountability is not vital to the operation of programs, but it is extremely complicated and time-consuming. One copy of our reimbursement report, for example, is several inches thick. It is encouraging, however, because the process, although rather complicated, appears to be smoothing off very quickly. We are extremely pleased about this.

The most philosophically depressing part of the entire title VII operation is the upcoming programmatic accountability system. If one assumes that the primary focus of title VII is upon nutritional needs and upon permitting "* * * older Americans an opportunity to live their remaining years in dignity", and one also realizes that present resources are extremely inadequate in terms of meeting these ex-

pectations, then the proposed programmatic accountability system becomes intolerable. In the words of one of my fellow county directors, "we seem to defeat our purposes, constantly."

First of all, we are being presented with a formal registration form. This form, which has been revised at least once, is admittedly less offensive than its earlier version. However, there are several spinoffs from it which should be mentioned. First of all, until and unless the form is completed for an individual, that individual is not considered to be a participant, but a guest. It seems to me that a formal registration process defeats some of the exciting concepts about title VII which I mentioned earlier. No one would deny that it is not important to retain some verification that, indeed, Mrs. Jones ate a title VII meal on Wednesday, May 22, 1974. This system can be handled quite easily, with the use of a guest book of some sort. It would never be completely accurate, but then few social accounting systems can claim 100-percent accuracy.

Second, the form, as presently constructed, requires that a second party complete it. This, to me, presents two conflicts. We are making an implicit assumption that older persons are unable to fill it out themselves; and, we will be required to use already scarce resources, be they paid or volunteer staff, to complete the process.

Third, the information which is solicited appears to be relatively useless, in terms of telling us much about the nature of those individuals who are "participants".

Fourth, the information, from which who knows what conclusions will be drawn, is totally accurate only on the day upon which it is solicited. For example, Mrs. Jones may walk to the site regularly during warm, sunny weather; she may need transportation in inclement weather. Or she may become unable to walk at some future date.

Fifth, the information is collected in triplicate. One copy is retained at the site, one copy is retained at the project office, and one copy, minus identification, is forwarded to the State Office for Aging. Retaining a copy at the site, in many instances, will mean that the file must be carried with the site manager. When using donated facilities, it is unlikely that office space will be provided.

These comments are an overview of the anticipated registration process. The forms have been presented to us, at the local level, with the following explanation: a major form of data collection is required by the Federal Government and the modification which we receive is the result of negotiations and compromises between the Federal Government, presumably the Administration on Aging, and New York State Office for Aging.

Senator EAGLETON. I have never seen one of these forms. I guess I ought to take a look at it.

[Document handed to Senator Eagleton.]

Senator EAGLETON. It says "participant" as opposed to "guest"; participant fills this out one time and does not have to fill it out——

Ms. BABIC. Filled out one time.

Senator EAGLETON. A guest is someone who just comes in on a given day and decides to have a meal that day and does not have to fill this out?

Ms. HOWARD. On the last page of the manual a guest is defined as someone who may or may not be eligible under title VII that is, may or

may not be over 60 years of age or a spouse of a person over 60 years of age, who has not completed one of those forms. So it does not necessarily mean that a guest is ineligible for the program, it means simply that a guest has not filled out a form or has not had a form filled out for him, because the individual is not allowed to fill out the form himself.

Ms. BABIC. We have been told that the individual is permitted to fill out the form. However, it gets a little embarrassing if you give it to an older person and you get about three-fourths of the way down, where it says, the interviewer fills out the rest of this, without asking a direct question.

Senator EAGLETON. Presumably the purpose of having this is to have some statistical analysis as to who is being reached by this program.

Ms. BABIC. Yes, sir.

Senator EAGLETON. You consider this to be unduly burdensome?

Ms. BABIC. Not only unduly burdensome, but in a direct contradiction to what I feel the program, as legislated, represents in terms of a program of human services for older people.

Senator EAGLETON. I will be the devil's advocate for a minute. I am not a great one for a large amount of paperwork, if it can be avoided, if there is no need for it.

How would the Federal Government account for what is being done on a program-by-program basis? Would it all be done on good faith?

Ms. BABIC. We have done some brainstorming on this very sort of thing.

Senator EAGLETON. You are getting to that?

Ms. BABIC. Yes.

Senator EAGLETON. I am sorry.

Ms. BABIC. That is quite all right.

The result is that the reporting system requires a local project, at each site, to register, solicit information, collect the information, and forward it to the State Office for Aging—for what purpose, it seems to be unclear. I am extremely concerned about this aspect of a program which purports to be people-centered. I think of the endless series of forms which we are all required to fill out, and which we more or less accept today. I also think about older persons, to whom many of these forms are unfamiliar, and for who we are trying to provide a human service. I think about two of our sites, in the worst poverty areas of the city of Syracuse, where older persons are reluctant to tell staff their names and phone number, or address, until a great deal of effort has been expended, to promote trust. And I think about the energy and resources which must be used, in order to obtain this information. And I wonder about what use the information will be, if indeed we use our scarce resources to obtain it.

My conclusions are, before we subject our older citizens to another series of registrations, that we think about the bureaucratic complexities of the present systems which they encounter. We must remember SSA, SSI, medicare, medicaid, and so on. I think that we must seriously examine the reasons for which we require the process, in the first place.

If we are indeed focusing upon programmatic accountability, then I submit the following: for persons 60 years of age or older, who attend a meal site where all participants and guests eat the same menu,

where there is about a 50-percent chance that the meal will be served upon paper plates, where there is equal probability that an individual will either help to set up or to clean up—in terms of all these factors, there is some type of involvement which is impossible for us to measure, with the tools for social measurement which are available at present.

This is admittedly a detailed description, but I hope that it will serve to illustrate how strongly most of the people whom I contacted feel about this particular issue. People involved in title VII want to put major emphasis upon service, they want to use their limited resources to improve service, they feel that indiscriminate collection of information from and about the older persons who come to title VII projects is in direct contradiction to the purposes for which the program has been created.

However, there are also a variety of alternatives which appear to be more palatable to local directors.

First of all, many of them expressed a desire to be consulted for their perceptions, prior to issuing and/or developing information retrieval systems. This may be unrealistic, but it would be useful for those of us at the local level to know that somebody in a local project somewhere had been consulted.

Second, it is necessary to know the exact purpose for which data is being collected, and to be able to differentiate the use to which both "hard" and "soft" data will be put. The present New York State form is primarily "soft" data. The local people to whom I spoke believe that both kinds are needed. However, we would like to be presumptuous enough to suggest that there are alternative methods for obtaining this data.

I did not mention that one of the reasons for this registration form was to have an unduplicated count.

Senator EAGLETON. What is an unduplicated count?

Ms. BABIC. That means that Mrs. Jones is recorded at one site, and if she goes to any other site, like in New York City where there are 60 sites, somebody knows that she is already registered at the first site.

Senator EAGLETON. Do some people go to more than one site occasionally?

Ms. BABIC. Of course. We think it should be encouraged. We would like to do a little research sometime to find out how many people in Onondaga County do go from site to site. We know they do, and think we can find out this information.

Senator EAGLETON. Why would they not go to the site most proximate to the place of residence?

Ms. BABIC. Why do we sometimes go to a place further away? It is for any variety of reasons. There is a "shopping" element. The cooks vary from site to site. Sometimes we have found that people on the bus have met others who were going to a new site, and they join them. There are many reasons for doing it.

In Onondaga County, for example, when we opened a rural site in Jordan, there was a woman with whom I talked who had not been in Syracuse for 10 years. We would like to put our resources into getting that group of people together to visit a site in Syracuse, and, by the same token, invite Syracuse sites out into the county.

We think that this should be encouraged, that socialization and mobility are most exciting aspects of title VII.

We would suggest that an unduplicated survey could be conducted on a regular basis. It is possible to solicit responses to a wide variety of questions, on the same day, at all sites, in an extremely simple form. The site manager could ask the questions, and solicit response by a show of hands. This would automatically eliminate the problem of illiteracy; language barriers could be handled by bilingual questioners.

There would be no duplication, because no participant can be in two sites at the same time. The information would be updated, on an ongoing basis; no specific individual will be identified, on a record somewhere, in matters which have changed over a period of time. No names need ever be used, nor will names leave the site. The mechanics of the system could be worked out by statisticians, so that the process could take place frequently enough to be considered a valid collection system.

We should also consider secondary benefits of our efforts. The registration form asks for the name of a person who is to be notified in case of an emergency. Why not issue a title VII card, to be carried in one's wallet? Then the information would be available, in case of an emergency, wherever the emergency occurs. This would represent a simple procedure with spinoff benefits.

For "hard" data, income and other personal questions, we would submit that anonymous questionnaires could be distributed, perhaps semiannually. Again, these would be distributed on the same day at all sites. Responses would be totally anonymous, would be optional, and help would be available, if needed by any participant.

For either type of detailed data, sampling techniques could be used. Special subsample studies could be done, by the State office for aging or by allocating additional resources to local projects, on a statistically valid subsampling process. The State office for aging, as part of its quarterly onsite visits, could obtain a variety of information, both observationally and conversationally. These are but a few of the possibilities.

I personally feel quite strongly that if registration must be, then it should be an optional, self-registration in so far as possible. I believe that considerations of this sort are an absolute necessity if a program, which is extremely successful at this point in time, is to continue to be successful. The present process represents a complete denial of the intent of title VII of the Older Americans Act.

In closing, I would like to comment briefly upon our local relationships to State and Federal representatives. I will be as candid as possible. I believe that in Onondaga County we have had a great deal of help and support from both of these sources. Our relationships have been reasonably schizophrenic—sort of a love/hate affair. This, to me, is highly desirable, because in that manner we keep each other honest. I also believe quite strongly that, despite several instances of major disagreement, that our goals have been consistently similar. It is just that from time to time our methodologies have been in conflict.

Senator EAGLETON. Ms. Howard, did you have something you wished to add to the statement?

Ms. HOWARD. No.

Senator EAGLETON. Ms. Babic, have you taken up any of these form and procedural reporting proposals with your State office, with Mr. O'Malley or any other people?

Ms. BABIC. With the State director, yes, we have.

Senator EAGLETON. What is their attitude with respect to the forms—I know they have to issue things in compliance with regulations of AOA, but do they seem to agree with you that a lot of this is needless paperwork, or what is their comment?

Ms. BABIC. Perhaps Ms. Howard could tell you the evolution of the present form.

Ms. HOWARD. A form was suggested by Oregon State University, which was totally unacceptable to people at the local level. New York State Office for Aging revised that and came out with another form that was potentially even worse. There was some input, and then they came out with this new system, of which you have a copy.

Senator EAGLETON. That is the one in this green book?

Ms. HOWARD. Right. We are still not happy with the concept of individual registration. The answer of the New York State Office for Aging to that is that it is required, that Congress is asking questions and wants to see the program evaluated, and this system of individual registrations is the only response that they can make to those questions.

We are suggesting that perhaps a more simplified system could be developed, with your understanding that this data collection is very difficult, with the limited amount of a staffing available and with elderly volunteers performing a major portion of the necessary activities of each site.

Senator EAGLETON. Is this form which is being used in New York, or similar form, being used in the other States to your knowledge?

Ms. BABIC. That is part of the difficulty. We have no idea what is going on in any other State, and it is sometimes difficult to know what is going on in the next county.

Senator EAGLETON. Do volunteers mostly participate in assisting the individuals in filling out this form?

Ms. HOWARD. Yes.

Senator EAGLETON. If that is the case, how heavy a burden is it to the professional people who were there to administer the program?

Mr. BABIC. The volunteers are normally there doing other things as well.

Ms. HOWARD. They do tasks such as setting tables, serving meals, assisting the participants to and from the mealsite, assisting with transportation. This is a very burdensome program for volunteers. Because funding is not sufficient to hire staff to do all of these kinds of things, we are asking for volunteers, and elderly people are quite willing to volunteer to support the program in many instances. But a lot of clerical kinds of tasks, we feel, are above and beyond the call of duty of a volunteer.

If this is a demonstration project, as Senator Percy referred to it, we feel that there are other kinds of evaluative measures that could be done, aside from simply counting the numbers of participants receiving the various services, to determine what kind of impact the program is having upon the elderly.

For instance, some kind of evaluation of health status of elderly participants and how that might change over time with supposedly improved nutrition might be a key to introducing preventive health services for elderly people, which they desperately need. This kind of thing could be done on a voluntary basis with additional resources put in, especially for that. I think it would have potentially greater benefits than this present process of counting individuals receiving various services on each given day.

Senator EAGLETON. Well, we will have AOA with us tomorrow, and we will inquire of them on these forms and their counting service. They have retained a consulting firm of Allen, Hamilton, et al., and presumably they were in on, perhaps, I do not know, the design of some of these forms, et cetera.

Forms for the sake of having forms, of course, do not serve much purpose unless they have legitimate end results. We will inquire into that tomorrow.

Thank you very, very much. We appreciate your presentation.

Ms. HOWARD. Thank you.

Senator EAGLETON. That concludes today's testimony.

We will convene tomorrow at 9:30 with some administration witnesses, and perhaps others.

[Whereupon, at 12:20 p.m., the subcommittee was recessed, to reconvene at 9:30 a.m., Thursday, May 23, 1973.]

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EXTENSION OF NUTRITION PROGRAMS FOR THE ELDERLY, 1974

THURSDAY, MAY 23, 1974

U.S. SENATE,
SUBCOMMITTEE ON AGING OF THE
COMMITTEE ON LABOR AND PUBLIC WELFARE,
Washington, D.C.

The subcommittee met, pursuant to recess, at 9:48 a.m., in room 6226, Dirksen Senate Office Building, Hon. Thomas F. Eagleton (subcommittee chairman) presiding.

Present: Senators Eagleton and Beall.

Committee staff present: James J. Murphy, counsel to the subcommittee.

Senator EAGLETON. Good morning, ladies and gentlemen.

The Senate Subcommittee on Aging of the Committee on Labor and Public Welfare is now in session to continue its hearings with respect to the nutritional programs.

Dr. Flemming, I know you have a prepared statement, and I understand that Mr. Thomas, the Assistant Secretary for Human Development, must catch a plane.

We do have some questions we want to propound to Mr. Thomas on matters relating to organization.

We either can take your prepared statement and move to that, or if you do not mind, I will let Mr. James Murphy, counsel to the subcommittee, start with some questioning of Mr. Thomas at the outset so as to expedite his travel schedule.

This is not directly related to the bill immediately before us, to wit, nutrition, but it does, of course, concern matters related to age insofar as implementation and enforcement of the law is concerned.

So I yield at this time to Mr. Murphy and let him propound these organizational questions to Mr. Thomas since he has been doing some research in that subject area.

Mr. MURPHY. To either Mr. Thomas or Dr. Flemming, or whoever has the best answers.

Are you familiar, Dr. Flemming, or Mr. Thomas, with a study made by the General Accounting Office (GAO), dated May 14, of the various delegations and attempted delegations of power from the Commission that have been made in the last year or so?

STATEMENT OF DR. ARTHUR S. FLEMMING, COMMISSIONER, ADMINISTRATION ON AGING; ACCOMPANIED BY STANLEY THOMAS, ASSISTANT SECRETARY FOR HUMAN DEVELOPMENT; GEORGE MERRILL, ACTING DEPUTY ASSISTANT SECRETARY FOR LEGISLATION; AND DONALD F. REILLY, DEPUTY COMMISSIONER ON AGING

Dr. FLEMMING. I am aware that such a study was made. I have not seen the results of the study.

Mr. MURPHY. I have only one copy which I got last night. I gather it was made at the request of Mr. Brademas, who has made it public, so I can ask you questions from it in any case.

Dr. FLEMMING. Right.

Mr. MURPHY. It appears from GAO that this is roughly the sequence that was followed, and you can correct this, of course, if it was wrong.

First, the Older Americans Act Amendments took AOA out of SRS. However, from April 1, 1973, until August 22, 1973, the SRS Regional Commissioners retained the authority to approve State plans.

Thereafter, on August 22, you delegated that authority to the Regional Program Directors on Aging, subject, however, to consultation with the Assistant Regional Director for the Office of Human Development, and the approval of the Regional Director, is that correct?

Dr. FLEMMING. Right.

Mr. MURPHY. Therefore, on November 5, the Secretary submitted a plan for delegation of authority to approve State and area plans.

The Secretary submitted his plan for delegation of authority to the Regional Commissioners for HEW on November 5.

Mr. THOMAS. That was Regional Directors.

Mr. MURPHY. Yes.

That submission was in accordance with section 201(a) of the Older Americans Act. It did not take effect because Congress was not in session 60 days thereafter, and 60 days notice is required before such plan can take effect.

Thereafter, since the November 5 attempted delegation did not take effect, on December 21, Dr. Flemming issued a memorandum to the Regional Program Directors substantially reinstating the procedures described in your August 22 memorandum.

Is that statement incorrect?

Dr. FLEMMING. Yes.

At that point, I issued a memorandum withdrawing all delegations of authority to act from the Regional Offices.

So that had the effect of canceling out the August memorandum.

I am sorry, Mr. Murphy you are correct. December 21 amended the August memorandum, and then on February 4, I issued a memorandum canceling out all delegations of authority to act to the Regional Offices.

Mr. MURPHY. Your December 21 memorandum, as I understand it, substantially reinstated the delegation of authority to Regional Program Directors who were directed to take actions in consultation with the Assistant Regional Director for the Office of Human Development (OHD) and approval of Regional Director for HEW. However, it

did add that final the decision on matters which the Regional Program Director, Assistant Director and Regional Director disagreed, final action of those matters will be taken by the U.S. Commissioner?

Dr. FLEMMING. That is correct.

This grew out of the hearings that we had before the House Committee where there seemed to be some misunderstanding on that point. So I decided to clarify that.

In the December memorandum, I said, "If this results in disagreement"—namely, the consultation—"I should be notified immediately so that together with the Assistant Secretary for Human Development, the matter can be taken up with the Regional Director before a decision is made by me after consultation with the Assistant Secretary for Human Development."

That was in December.

Then, in February, I canceled out the delegations of authority.

Mr. MURPHY. Thereafter, on February 4, as you mentioned, you revoked all the previous actions.

Then, on February 6, you, Mr. Thomas, I believe, issued a memorandum to the HEW regional directors, advising them that this authority had been withdrawn, and now the Commissioner on Aging, Dr. Flemming would take final actions on all matters relating to the approval and development of State plans under titles III and VII of the Older Americans Act.

Dr. FLEMMING. That is right.

Mr. MURPHY. On March 26, the Secretary submitted another plan for delegation of authority, this time again to the regional directors of HEW, who would then be authorized to redelegate authority within their regions to either the counterpart of Mr. Thomas or the counterpart of Mr. Flemming within the region. That is presently pending, as I recall.

I do not believe the 60 days has quite elapsed.

Mr. THOMAS. No, it has not.

Mr. MURPHY. I cite all this history both to get in on the record and because, reading this from the perspective of, let us say, a State director on aging, it becomes evident that the State directors, faced with all these delegations and redelegations and revocations and consultations, could not possibly have known who they were supposed to respond to in the regional office.

Mr. THOMAS. The principal communication between the State agency on aging, as contrasted, let us say, with a Governor, has pretty generally been between the regional program directors on aging, and I do not think there has been that substantial great confusion. I may be wrong.

Perhaps Dr. Flemming would want to expand on it.

Dr. FLEMMING. I think, Mr. Murphy, that during this period that you have identified, it has been clear to the State agencies on aging that their channel of communication would continue to be with the regional program director.

Now, what the regional program director could or could not do after the State agency heads communicated with them differed during this period, as indicated in your summary. But in terms of the State agencies on aging, their point of contact has been the regional program directors.

Mr. MURPHY. I suppose perhaps out of habit, but is not the logical progression to contact that person who has authority over you, has authority over your actions and over your plans, so that if the regional program director does not have that authority, is not the State person going to naturally gravitate toward the person in the regional office who has the power to decide on matters affecting him?

Mr. THOMAS. The principal communication of interaction would be with the regional program director simply because I think it has been fairly clear that advice and counsel as to actions to be taken with respect to the State plan, whether Dr. Flemming, or to the regional director or assistant regional director, would be made by the regional program director on aging.

Consequently, I do not think we have seen any particular problem with respect to the interaction between the States and Regional Program Directors on Aging.

Mr. MURPHY. Under this delegation proposed in the March 26 letter, it will be possible, will it not, in some regions where the Regional Director chose to retain all powers to himself, that regardless of what the Program Director for Aging may tell his State Aging Director, it will have no effect if the Regional Director disagrees? The program Director may make the recommendation; but the Program Director only proposes while the Regional Director disposes.

Mr. THOMAS. I perhaps draw a parallel between the way the executive branch works in general.

For example, the Secretary of HEW is ultimately responsible for all the elements of the Department of HEW. That does not presume to mean that when it comes to an issue concerning health or social security or education, that every person requires an audience or interaction with the Secretary himself.

Indeed, I think what is reflective of this situation is that Regional Directors, obviously, as well as Dr. Flemming, as well as Assistant Regional Directors, all have confidence in the activity of the Regional Program Directors, and all have many things to do.

So, consequently, I think the problem you cite, at least in other instances, is very unlikely.

Mr. MURPHY. I think the analogy with the overall departmental structure in HEW is well taken.

From Congress' viewpoint as well.

There is a growing concern here that the assignment of responsibilities to the Secretary gives no assurance to Congress as to who is going to carry them out. Hence, many statutes assign responsibilities specifically to the Commissioner on Education, let us say, or in the case of the Older Americans Act, to the Commissioner on Aging, in order to overcome that kind of amorphous responsibility in which is sometimes granted to the Secretary.

And if you can get hold of him, you can find out something about what is going on with the program.

Mr. THOMAS. The ultimate responsibility always rests with the Secretary.

The degree of accountability is most important.

Congress holds the Secretary accountable for things that do or do not happen, the focus of accountability.

Mr. MURPHY. In this case, Congress holds the Commissioner on Aging responsible.

On March 26, those responsibilities go to somebody else.

In this case, it will be, if the Commissioner at the national level were delegating his powers from himself, and to the Secretary saying, I withdraw responsibility and ask the Secretary to carry out these duties——

Dr. FLEMMING. Mr. Murphy, I think at this point the last letter from the Secretary to the President of the Senate and the Speaker of the House is important.

He says:

I am submitting to the Congress the following plan for delegation, with my concurrence, of certain authorities to act by the Commissioner on Aging to the officers of the Department of Health, Education, and Welfare not directly responsible to him, namely the Regional Directors. These authorities will be exercised pursuant to policy regulations and guidelines promulgated by the Commissioner and subject to post-audit by him. The Commissioner will delegate to the Regional Directors authority to act in connection with the administration in the regions of programs under title III and title VII. The Commissioner on Aging will retain responsibility and authority over the title III and title VII programs. He will be able to revoke his delegation of authority to act whenever he decides to do so. He will have the responsibility of considering appeals from actions taken by Regional Directors. As indicated policy regulations and guidelines will be issued by the Commissioner and will govern the matter in which Regional Directors will operate under the delegation of authority to act.

Then the letter goes on to say that "this delegation is designed to strengthen the position of the program for the elderly in the Regional Offices. Both the Commissioner and I would like to see the Regional Directors play a leading role in working with the States in the field of aging.

The strengths and authority of the Regional Directors can best be brought to bear in the interest of the elderly of the country if the Regional Directors have specific authorities to act under the newly expanded programs of assistance to state and localities under the Older Americans Act."

The letter says further, "Specific authorities to act in the area of aging will permit them to coordinate the aging program with other departmental programs which serve the elderly and other vulnerable groups in our society."

Now, I recognize that when the Congress places responsibility with a particular official in the executive branch, in this instance the Commissioner on Aging, no one can divest the Commissioner on Aging of this responsibility. If things go right, he is responsible. If they go wrong, he is responsible.

But I have always felt that a public official who is being held responsible does have the right to delegate authority to act within policy guidelines and subject to post-audit.

Now, in this particular instance, the Congress said that the Commissioner on Aging should not delegate authority to act to anyone who was not directly responsible to him. And the Congress said that if there is a desire to do that, then a communication should be addressed to the Congress indicating that this is the desire, and no action should be taken until the communication has been before the Congress for a period of 60 days.

It is my judgment that if the Congress decides not to object to a delegation of authority to act on my part to the regional director, it will be in the best interest of older persons. It will make a real contri-

bution to the achievement of the objectives that the Congress has set forth in the Older Americans Act.

I recognize that reasonable people can differ on an organizational issue of this kind. But I would really like to be in the position where I, in effect, have the regional directors of HEW on our team in the field of aging, where I can delegate authority to act to them, and where I can hold them accountable for the way in which they delegate their authority to act.

I think if I am in that position, then I am in the best position in terms of discharging the responsibilities which have been assigned the Commissioner on Aging by the Congress. I know I cannot divest myself of these responsibilities. And certainly I do not want to do so.

But it is a judgment on my part that, making it possible for regional directors to exercise some authority to act, delegated to them by me, would strengthen our program in the field of aging.

Mr. MURPHY. I have a twofold question in response.

First of all, what advantages do the regional directors bring to the program that the regional program directors for aging, people specifically involved in aging matters, do not? What do regional directors have that program directors do not have?

And, second, is it not a fact that the regional directors have a great many responsibilities, that it is an unreasonable expectation that they will devote much of their time to aging, given the wide range of authorities given the Secretary by statute but have to be carried out by the regional director?

Mr. THOMAS. Senator Eagleton and Mr. Murphy, I think this gets to the very core of the substance of the title III and title VII programs.

As you know, those programs require the provision, in the case of title III, the agencies at the local level, to perform a number of different kinds of programs for the elderly, and the title VII program, in addition to meals, there are other supportive services in which we are interested.

The management agenda here is simply to recognize that it is imperative that all of the elements of the Department of HEW in the health areas and social service areas, that all of those elements and all the resources that those elements have are brought to bear on the problems of the elderly.

The person that is in the most judicious position to do that kind of bringing together of resources is the regional director, or his designee, in the context that he is a corporate official. He has overall responsibilities for the activities of that office.

In addition, the regional director sits on the Federal Regional Councils and, as you well know, there are many problems, for example, in the area of transportation or the area of housing and in other areas that affect the elderly.

It is from that corporate position, and is indeed the reason why the Secretary created the Office of Human Development in the Office of the Secretary. It is from that corporate position that you can exercise the kinds of leverage with those other agencies to bring other resources that are not the specific jurisdiction of the Commissioner on Aging, or any other official to bear on the problem of that group.

I think it is important that if we look at the real philosophy of the title III program, as well as the title VII program, where they are

designed to create services and to fill service gaps for the elderly, we look at the philosophy of that act and we recognize the incredible importance of having an official, both in Washington as well as in the regional offices, who can bring the other elements of our Department, as well as the other Federal agencies, into concert so that the things that Dr. Flemming undertakes in his role as head of the Domestic Subcommittee of the Council on Aging, or what is going on in the region subcommittees, the program on aging does not have that leverage or stature to do that.

In addition, we are most interested in assuring that the Governors of the States are equally aware of and interested in and desirous of coordinating services to the elderly.

The principal interface between the Department of HEW and the Governor is the regional director. That is another reason why we think it is very essential.

Finally, we do not lose the talent and expertise of the regional program directors.

Mr. MURPHY. Carrying your rationale on to a logical conclusion, and applying it to the parallel structure of the national level, would you not have to say that Dr. Flemming's position is such that he cannot influence the activities of the departments, that we have to go through the Secretary, contrary to the intent of Congress, in asking the Commissioner on Aging to be the principal spokesman for the elderly?

Mr. THOMAS. I do not think the two reasons are mutually exclusive.

What we are looking for is complements. There is no question that Dr. Flemming and his position are able to clearly bring, in effect, coordination between agencies within the department as well as with other agencies.

What we are simply doing here is saying to the extent that, indeed, a regional director of the Secretary of the Department are complementing that initiative, it is all to the better, and it ultimately has a better effect on older people.

Mr. MURPHY. What is done in health, or in education?

Take the field of education, where the responsibilities are specifically charged to the Commissioner of Education.

Mr. THOMAS. As a matter of fact, one of the challenges that confronts the Department, I think one of the things that the Secretary is particularly interested in is the fact that, to the extent that we should—maybe we are not as coordinated as we should be between education and the academic context compared to education and health, or education and social services.

We have to do a more effective job of coordinating programs in the education area and in the health area. We are working on that.

I think this is one of the areas where we in the Office of Human Development may be a little bit ahead of the rest of the Department as it relates to the elderly, children or native American population, et cetera.

Mr. MURPHY. What does the Office of Human Development bring to the Administration on Aging programs?

I go into a region, and I find that where the aging staff used to be 10 or 12 or 13 persons, it has been substantially reduced, since OHD does not have personnel slots of its own and has to acquire them from principal elements——

Mr. THOMAS. We have directed assistant directors and assistant regional directors, consistent with the intent of Congress, to insure that utilization resources of the region is consistent with congressional intent.

We have been assured by them that that is the case.

We would be delighted to provide that information to you for the record.

Mr. MURPHY. You are saying that OHD has not borrowed from AOA and the Office of——

Mr. THOMAS. No.

What I am saying is that all of the resources that were appropriated by the Congress to be utilized for programs affecting the aged have been so utilized.

Mr. MURPHY. Whether they are utilized by OHD or AOA?

Mr. THOMAS. For example, let us take administrative services processing of personnel papers. That is a service that would be provided to the aging.

Now, it may be that that is in an administrative services office, within the entire Office of Human Development, but the utilization of resource in terms of manpower is specifically directed at personnel actions or the procurement of furniture or the processing of a grant operation directly to the Aging Office.

Mr. MURPHY. I do not suppose anyone would quibble over that kind of administrative service.

That is the kind of thing that led to the assignment of the Office of the Commissioner of AOA, to the Secretary's office, because some functions have been spun off into the overall role of SRS.

Research is the principal thing.

Now, you are spinning off, I understand, a minor thing, administration, personnel functions, into OHD, given the superior umbrella, but that is the kind of thing that——

Mr. THOMAS. I would be delighted to state for the record that in terms of any other kind of activity, such as research, evaluation, demonstrations, or anything that we have no intention, no desire, no plan to do anything like that.

But when it comes to administrative services area, we think it does make fairly good sense to insure that we get the appropriate kind of administrative services.

I think in the final analysis it is the proof of the pudding, which is, as I know you will be addressing later, the proof of the pudding is the actual operation of the program.

I think that the testament to the effectiveness of the way we have done this in the past year will be strictly in the number of meals we are serving, in the number of people participating in the programs.

I think that is the proof of the pudding.

We had a program July 1 that did not exist and, as Dr. Flemming's testimony will reveal, we are serving 180,000 meals each day, 5 days a week.

I think we have established over a thousand[1] projects.

If we look at the accomplishments, we can perhaps see that the organization of the office, indeed, has perhaps helped us reach those goals.

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[1]Later changed to 664 on corrected transcript.

Mr. MURPHY. If OHD and AOA are doing such a terrific job, why delegate powers to the regional director who, for all you know, has no commitment to aging, has no interest in aging, no knowledge of the subject of aging?

Is it not just a kind of administrative symmetry that is desired by the Department, that may be good in some cases and not so good in others?

Dr. FLEMMING. No, it is not for the purpose of administrative symmetry.

Let me go back to the point that Secretary Thomas made, I think very effectively.

One of the great opportunities that the Congress has provided the Commissioner on Aging in the amendments to the Older Americans Act is the opportunity to bring about a more effective coordination of resources in the field of aging, not just in the Administration on Aging, but in many units within HEW and many other departments and agencies of the Government.

Now, if we are going to discharge this function effectively, we are, first of all, going to have to have some very definite understanding with some of the units within HEW, SRS, specifically, CSA, the health agencies, and the Social Security Administration.

As we set our goals for the fiscal year 1975, we are putting a great deal of emphasis on the development of those working agreements.

These goals we set are going to be tracked by the Secretary on a regular basis, approximately every 6 weeks. He will take a look at what progress is being made in the direction of implementing these working agreements within HEW.

While that is going on, if the regional director can be held responsible for the implementation of similar working agreements at the regional office level, we will have a much better chance of getting effective results in the area of coordination than if we depend solely on the Regional Program Director on Aging.

I, of course, at one time knew the regional directors very well. I have become acquainted with the new ones that have come into the picture since I came back into the Department. I have discovered that a good many of them have a very real interest in the field of aging and see the field as constituting a real opportunity for service. They are willing to devote time, energy, and resources to it. I think we can and should capitalize on that interest.

Secretary Thomas has also talked about coordination across departmental lines.

Here again the regional director, as an active member of the Federal Regional Council, can be a real help to us.

This is why I said to the Secretary that I would like to delegate some authority to act to the regional directors, because I believe that they are in a position to really be of genuine service to the field of aging and of genuine service to the regional program directors on Aging.

Mr. THOMAS. If I could add one comment, Mr. Murphy, which is the question that Dr. Flemming has noted a number of times, which is the whole issue of accountability.

There is the thought that, as a consequence of the delegation, that there is still no accountability, and that is unequivocably untrue.

We have established a fairly elaborate and, I think, a very productive system which I would be delighted to share with you, either now or at another time, on how our accountability system works.

Not only do we have management conferences with the Secretary every 6 to 8 weeks, but, in addition, on a monthly basis—well, first of all, as a result of policies and goals established by the Commissioner, works plans are developed in each regional office that tell us precisely, tell them precisely what they are to accomplish over a given period of time.

On a monthly basis, they have to submit to us specific items that demonstrate where they stand with respect to those goals and accomplishments.

Mr. MURPHY. If I may interrupt you.

Who submits these?

Mr. THOMAS. The regional directors forward those to us. They are forwarded to the office. Dr. Flemming and his staff review them. And if we have any questions or concerns, we immediately are back to them and resolving those concerns.

The Secretary is obviously kept totally abreast to this in our own management conferences.

There is no abrogation of responsibility and, indeed, there is, to some extent, more intensive accountability, which would not exist if they did not have responsibility.

In the final analysis, we believe this corporate interest in bringing all resources of the Department to bear on the elderly is, in the final analysis, going to help the elderly which, I think, is to everybody's interest, certainly in this room.

Mr. MURPHY. Mr. Chairman, one last technical question.

If the Congress should decide they do not approve this particular delegation, there is one thing, of course, that could be done. That is, the legislation to extend title VII could be amended to withdraw the authority under section 201 that the Commissioner now has to delegate authority to persons not directly responsible to him; that would be changed.

That would be the sledge hammer approach, I suppose.

In the event Congress should decide that this particular delegation is inappropriate, but not wish to take the power away from you entirely, what kind of congressional action would you respond to?

Dr. FLEMMING. I certainly, in conformity with my previous practice, would, first of all, look at whatever language was incorporated in the title by the Congress.

If it is not clear on its face, of course, we would take a close look at the legislative history, endeavoring to determine what the will or the intent of the Congress might be.

I can assure you that whatever action the Congress takes is action to which I will make the necessary adjustments.

Mr. MURPHY. One last thing.

Can we get copies of any statements made by AOA, letters, memoranda, whatever, embodying the statements or recommendations on the issue of delegation?

That is, do you have recommendations that you have made on this issue to the Secretary or Mr. Thomas?

Dr. FLEMMING. I prepared the draft of the letter from the Secretary to the Congress which I then transmitted to him through the

Assistant Secretary. A few changes were made, but not of any substance.

I will be very happy to supply you with any memoranda of that kind that will help clarify my position on the matter.

[The material referred to appears in the appendix on Tab 1, on page 160 of this hearing record.]

Dr. FLEMMING. I have dealt with a good many organizational issues over the years. I guess the older you get, the more you realize that things can be made to work in a variety of ways.

But, after I was appointed to this position, just about a year ago now, I arrived at the conclusion that I could get better results under the Older Americans Act if I had the opportunity of delegating authority to act to the regional directors, but in accordance with policy guidelines that I would provide as Commissioner on Aging, and subject to post-audit on my part.

Mr. MURPHY. Thank you.

Senator EAGLETON. Let me make just one comment, Dr. Flemming, and Mr. Thomas, and then we will go on to your principal testimony and principal reason for being here today.

We availed ourselves of your presence to go into organizational matters.

You both will recall that during the legislative endeavors regarding the Older Americans Act back in 1972 and 1973, the principal thrust of this committee and Congress and the appropriate committees on the House side, was to elevate the identity of the Administration on Aging to give it focus and to give it direct responsibility to operate in the area of aging and not to have aging programs become submerged at such a low level as to lose any attention and focus.

Thus, we are concerned, as expressed by the questions of Mr. Murphy, that by the delegation of this authority to the regional directors perhaps once again aging programs will just get lost in a huge sea of governmental operations that are routinely carried on, and properly carried on, in the Department of HEW.

But we do not want to see that occur.

Dr. FLEMMING. Senator, my feeling is that if I am permitted to delegate authority to act to the regional director, we thereby elevate the field of aging in the regional office by making the man who is running the regional office directly accountable to me for what would happen in the field of aging.

I believe that if we make the regional director accountable in this way, he will be able to bring into the field of aging resources that a regional program on aging, working alone, would find it difficult to tap.

Again I recognize that people can differ on an issue of this kind. Nevertheless, I really think that I could operate most effectively if I had the opportunity of delegating authority to get to the regional director.

Senator EAGLETON. Well, time will tell as to whether your predictions work out. For everybody's interest, we hope they do.

We are concerned and a bit apprehensive, I must tell you.

Let us proceed, then, with today's testimony.

Mr. Thomas, because of your travel plan, if you feel you must go, feel free to leave at any time you see fit.

Dr. FLEMMING. Mr. Chairman, I am very happy to have the opportunity of appearing before the members of this subcommittee in

connection with your consideration of the extension of the authorization of a nutrition program for the elderly which is provided for in title VII of the Older Americans Act, as amended.

The following steps have been taken in connection with the implementation of this new program:

1. Funds were made available on July 1, 1973.

2. The Administration on Aging allotted $99,600,000 to the States on July 27, 1973.

3. The States completed the allocation of the $99,600,000 to 665 nutrition projects on December 31, 1973.

It is my purpose in this testimony to identify what has been done to date to implement the policies set forth by the Congress in title VII and then to identify what we plan to do in the immediate future.

Our overriding objective in the past 9 or 10 months has been to make meal programs available to today's older persons just as quickly as possible.

In order to help achieve this objective we suspended for the first quarter of this calendar year the requirement for submitting a quarterly report on all aspects of the program.

We did institute, however, an interim weekly reporting requirement designed to help us determine how quickly meals were being made available to older persons.

The quarterly reports have been revised, based on suggestions from State and area agencies on aging, and the reporting system was instituted at the beginning of the second quarter of this calendar year.

We also authorized the States to suspend for 90 days the requirement that supporting services must be in place at the time a project starts provided they had assurances that steps were being taken to institute the supporting services.

The supporting services requirements may be suspended for another 90 days on recommendation of the States and with the approval of the Commissioner on Aging.

24 States have exercised the authority to suspend the requirement for 90 days in connection with 236 projects; to date 21 States have requested approval for an additional extension in connection with 128 projects.

In allocating funds to the States we specified that all projects should be fully operational 90 days from the date the project was authorized to begin operations.

Our weekly report for the week ending May 17, 1974 showed that 182,648 meals are being served by 664 projects at 4,714 sites.

The States estimated in February that they would be serving 212,000 meals a day when the projects are fully operational, and we anticipate they will reach this goal sometime in June; 451 of the projects are in urban settings and 213 are in rural settings.

We have also placed major emphasis on the States giving preference in awarding grants to projects that will serve low-income individuals and members of minority groups.

Our weekly report from the States for the period ending May 17, 1974 shows that the average number of daily meals being served to persons below the Census Bureau's poverty threshold was 120,715 or approximately 66 percent of the total.

This same report also shows that the average number of daily meals being served to members of minority groups was 61,311 or approximately 34 percent of the total.

We plan in the weeks and months which lie just ahead to place emphasis on the implementation of the following objectives:

1. To develop an action program designed, in accordance with the policy set forth in title VII, to make use of resources such as the Food and Nutrition Service of the Department of Agriculture and the social services titles of the Social Security Act, in order to broaden the base of the title VII program.

We have established an interdepartmental task force on nutrition within the framework of the cabinet-level Committee on Aging—a group which we believe will be able to assist us in developing an action program designed to contribute to the achievement of this objective.

We are also developing guidelines for the State agencies on aging designed to help them take the lead in coordinating the title VII projects with other Federal and State resources that can be utilized in such a manner as to help meet the nutritional needs of older persons.

2. To accelerate the development of the supporting services provided for in the budgets of the title VII projects.

The States were authorized to use 20 percent of their allocations for this purpose.

We intend to do everything possible to make sure that, once the serving of meals has started, no time is lost in instituting the services called for in the project plans which were submitted to and approved by the State agencies on aging.

Major emphasis will be placed on the initiation or strengthening of outreach programs.

We are working with the Department of Transportation to develop a joint agreement that will help to provide the transportation required by some persons if they are to participate in programs such as the title VII program.

We have been and are continuing to pursue vigorously with the Federal Energy Office the objective of making sure that the transportation needs of participants in nutrition projects, and the transportation needs of volunteers serving the projects, are recognized in working out policies for the use of gasoline.

3. To develop an action program designed to coordinate with the nutrition projects, resources in such areas as recreation, education, health and welfare counseling, and referral services.

In some instances the expenditure of comparatively small sums of money under either title III or title VII can result in building bridges between the older persons participating in nutrition projects and other services.

In other instances these bridges can be built without the expenditure of additional funds.

For example, the State of Washington has developed an agreement with the regional medical program in which the regional medical program will perform onside health screenings of title VII participants, with no charge to the participant or the project.

This is another area where the Interdepartmental Task Force on Nutrition can be of assistance.

4. To continue and strengthen training programs for participants in nutrition projects.

These programs have been and will continue to be designed (1) to assist in the implementation of the provisions of title VII, and (2) to

provide an understanding of the issues which confront persons working in the field of aging.

From September 1973 through April 1974, 1,048 persons have participated in nutrition training sessions sponsored by the Administration on Aging; it is estimated that an additional 252 will participate in similar programs by the end of fiscal year 1974.

Plans are being developed to provide in fiscal year 1975 continuing opportunities for training in the field of aging in educational institutions, such as community colleges, located in the areas where both title III and title VII projects are underway.

Educational institutions that conducted the title VII training programs sponsored by the Administration on Aging in 1974 will be given the necessary financial support to enable them to provide technical assistance in 1975 to the educational institutions that will be providing training in areas where title VII projects are located.

5. To monitor and assess, working through the State agencies on aging, the nutrition projects with the end in view of determining whether their programs are contributing to the major objectives set forth in title VII.

We believe that an early emphasis on this function is important in order to identify both the strengths and weaknesses of the concepts embodied in legislation and the steps taken to implement those concepts.

We also believe that this function is important in order to make it clear to all concerned that the Federal Government intends to follow through on a provision such as the one incorporated in title VII; namely, that the States shall, "provide assurances that, to the extent feasible, grants will be awarded to projects operated by and serving the needs of minority, Indian, and limited English-speaking eligible individuals in proportion to their numbers in the State."

Many questions relative to this program will have to remain unanswered until it has been in operation for a longer period of time.

Both the House and Senate committees in reporting the proposed title VII to their respective bodies referred to the desirability of initially providing for a 2-year authorization for the program.

The House committee stated that, "the original authorization was amended to 2 years by the committee so as to permit an opportunity for evaluation of the nutrition projects by the Congress at an early date."

The Senate committee, taking note of possible legislation relative to title III, stated that they, "limited the authorization of appropriations in S. 1163 to 2 years so that the nutrition program provided therein can be evaluated at an early date with a view to the proper role of this program in any broader scheme that may be proposed hereafter."

If the authorization is extended for 1 year, as the administration recommends, it means that we will be in the middle of the second year of operation when the issue again comes before the Congress. This would be an opportune time for evaluation.

At the same time the other provisions of the Older Americans Act will be before the Congress thus providing the opportunity of considering simultaneously our operating experiences under both titles III and VII.

We look forward to the opportunity of working with the Congress, the States and other public and private bodies in continuing to implement a program which is capable of replacing despair with hope in the lives of many older persons.

Senator EAGLETON. Thank you, Dr. Flemming.

Dr. FLEMMING. You are welcome.

Senator EAGLETON. I have a few questions, and then I will yield to Senator Beall.

In listening to your testimony, Dr. Flemming, I do not recall, and I may have missed it, any reference to the meals delivered to homes.

It is my understanding that your guidelines call for no more than 10 percent of the people to be geared to home delivered meals, is that correct?

Dr. FLEMMING. In developing the guidelines we called attention to the desirability of putting emphasis on meals in congregate setting. We did suggest that we felt that ordinarily it would be wise not to deliver more than 10 percent of the total number of meals to homes.

Now that was a guideline. It was not a regulation.

The fact that it has been looked upon as a guideline is indicated by the fact that on May 17, 1974, the States reported that the number of daily meals currently being served in congregate settings was 160,919 or 88 percent of the total. The number of meals currently being delivered to the homes was 21,729 or 12 percent.

As I have traveled over the country and have been on the receiving end of questions, I have discovered that some of the States or at least some of the project directors are really regarding the guideline as a regulation.

So we have issued a memorandum to the field underlining the fact that it is a guideline and not a regulation.

There are exciting spinoffs that come from programs providing for meals in congregate settings. I think therefore we are wise in putting the emphasis on such programs. I also recognize, however, that there are some situations where older persons just cannot participate in a nutrition program unless the meals are delivered to their homes.

Senator EAGLETON. Very good, because we have received some complaints or observations, however you wish to label it, that they were viewing in certain areas that 10 percent as a hard and fast rule that could not in any event be exceeded or modified.

So I hope that your new guideline or newsletter will explain that.

Would the same apply with respect to the 20 percent for funds available for supporting the services?

Dr. FLEMMING. That is a regulation. Here again of course, the objective was to make sure that major emphasis was placed on getting meals to older persons.

I do not think anybody can afford to be dogmatic on the 20 percent, as to whether it is too high or too low. I think we have got to be very careful not to let an undue proportion of the funds that are appropriated by Congress to be used for services other than services in the nutrition area.

Now just how rigidly the project directors have held to the 20 percent provision will become clear when we get our first quarterly reports. They are due in July. We will certainly be willing to take a look at the regulation at that time in the light of experience.

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Senator EAGLETON. What are some of the supporting services that you would personally like to see emphasized as this program expands and develops, and we realize that it is in its early formative stages?

Dr. FLEMMING. As I indicated in my opening statement, I feel that the supporting service that belongs at the top of any list of priorities is an outreach service. We know that there is real danger that older persons who are isolated and cut off from society will be unaware of the existence of these programs.

So I think we ought to put considerable emphasis on the development of meaningful outreach services.

Then the service that should occupy the number two position on the list of priorities is transportation. After we locate these persons, some of them are not going to be able to participate unless provision is made for transportation. This is why I am very much interested in working on the agreement with the Department of Transportation, so that we can tap the resources that are available at the Department of Transportation to as great an extent as possible. Obviously if we can tap those resources, additional money can be used for meals.

For example, I have heard of a few situations where title III funds were used to purchase minibuses in order to help solve the transportation problem. Really they did not need to spend the money that way. Money for minibuses is available from the Department of Transportation. We are working on an agreement that spells out just what resources are available through the Department of Transportation which in turn will be sent to the regions and to the State agencies.

Of course if you wanted to go down the list, the law very properly it seems to me, puts a good deal of emphasis on nutrition education. I think this is very important.

You also have to emphasize information and referral sources.

I hope that many of these supporting services will be financed in other ways, I mean through title III, through the Department of Transportation, through the social service titles of the Social Security Act, and through general revenue sharing.

I happened to be in Michigan yesterday and I understand that an appropriation bill has passed one house, which will appropriate a million dollars of State money to supplement the nutrition program in the State of Michigan. The allocation under title VII for Michigan is $3½ million. That is an encouraging development.

Senator EAGLETON. At the current funding level of $100 million, which has already been reached insofar as the program of current operation is concerned, how important is the outreach factor?

I agree we ought to try to reach as many people as we can, get the word to them and make them aware of the availability of the program, but with $100 million already being spent and being consumed, how many more people can we reach and reach them with what, if there are not the meals available?

Dr. FLEMMING. First of all, we do not know what our turnover figure is in connection with these projects. We really do not know how many people are being served. We know the number of meals that are being served, namely, 182,000, but we do not know how many people are involved in those programs. We will have this figure after we receive our first quarterly report. I suspect we will find a certain amount of turnover, certain amount of attrition, whatever term we may want to

use. That may provide us with some leeway or provide the projects, with some leeway.

But if as a result of outreach programs we find ourselves in some difficulty, along the lines that you have indicated, then I think when we have those facts, we should be prepared to make recommendations consistent with the facts.

Senator EAGLETON. Dr. Flemming, in your prepared statement, you talked about developing an action program with the Department of Agriculture.

We have had testimony from people who were operating programs on the local level, that insofar as surplus food and surplus commodities are concerned, they are having difficulty getting some of the commodities, especially meat. So far as milk is concerned, although milk is supplied to schools for about 11 cents a carton, if it is available at all in some of these other programs for the elderly, they have to pay approximately 17 cents.

Dr. FLEMMING. We are right now working with the Department of Agriculture in an effort to develop arrangement or an agreement with State purchasing agents so that title VII projects can buy in wholesale bulk.

This, of course, can result as you indicate in substantial savings on an item such as milk.

I hope we can work out that agreement rather shortly.

Senator EAGLETON. When you buy this wholesale bulk, from whom do they buy, from the Department of Agriculture? I am making specific reference to the surplus foods.

Dr. FLEMMING. I will have to supply the answer to that for the record.

Senator EAGLETON. I would hope that surplus foods would be as readily available for these worthwhile programs for the elderly as they are in the school programs, with the same range of commodities made available at the same prices.

I would just off the top of my head see no reason why this program should receive less in terms of quantity or quality or be gouged in terms of price.

Dr. FLEMMING. Well, I share your hope because at the present time there is not a great deal of use being made of this particular resource. We made a survey in March of this year, and at that time the estimated dollar value of the commodities used since the inception of the nutrition program down to March was about $182,101, which is less than 0.02 of title VII Federal allotment.

I think there are opportunities there that we should take advantage of, and do everything we can to work out the kind of understanding that will lead to the result that you have in mind.

Senator EAGLETON. It may well be that the school lunch program has certain legislative priorities and advantages that are not as readily available for the elderly.

If that be the case, and if your ongoing study of the situation indicates that you are having difficulty getting surplus foods advantageously and at a decent price, we wish you would bring that to our attention in a report or memorandum so that we can take appropriate action to remedy the situation.

Dr. FLEMMING. If it is agreeable to you, I would like to insert in the record a memorandum which will spell out just what the situation

is now, where we have arrived in connection with our discussions with the Department of Agriculture, and which will identify any problems that we feel need to be resolved.

[The material referred to appears in the appendix on Tab 2 and Tab 3.]

Senator EAGLETON. Very good, sir.

We have in the record, and it is rather common knowledge, of course, the precipitous rises in food costs, transportation costs, fuel costs, et cetera, which pervade the entire economy.

Since this is primarily a nutrition, food-related program and since it relies heavily on transportation to get the people there, do we not have to consider additional authorization of funds in order to anticipate at least two things, increased demand for the utilization of the program as your outreach increases and, two, the accommodation of these inflationary costs?

Dr. FLEMMING. I have already commented on the outreach aspect of it.

Senator EAGLETON. Yes.

Dr. FLEMMING. We of course recognize the increase in the cost of food and the impact that that will have on these programs.

As you know, the projects over the country have this year made what in effect are capital investments, incurred startup costs.

Now in most instances the money they have used for capital investment this year will be available for meals next year. I do not know the order of magnitude of that figure. We will not know it until about the middle of July when we get our first quarterly reports.

Also, there is $1 million that they used, that States used under title VII for administration that gets shifted over to title III funds for next year. Under the proposed budget the States will receive for administration in 1975 $15 million under title III as contrasted with $12 million this year and will not use any of the funds appropriated for title VII for administration.

When we learn just how much money has been used for startup costs, we will then evaluate the situation with the objective in mind of making sure that there is no cutback in existing programs. If the evaluation that we make indicates the possibility of cutbacks because of the cost of living increases, I can assure you that we will make appropriate recommendations designed to correct that situation.

Senator EAGLETON. Doctor, we have had testimony that there are already in some areas, even in the early developmental stages of the program a waiting list of elderly people who would like to participate in the program. But in the maximum that a given program can accommodate in one day, say, 150 meals at one sitting, or 200 people that would like to participate, some 50 people are left out.

So that it seems the demand is there, I mean, the need is there.

The difficulty is going to be fulfilling the need. If there is an increase in transportation, hopefully, out of the Department of Transportation, an increase in the demand, and escalating of food costs, it is inevitable to have the program even minimally available, we are going to have to expand the financial input into it.

Dr. FLEMMING. Well, on the evidence relative to waiting lists, it is certainly relevant evidence in evaluating the situation that is evidence that certainly should be considered. I would like to make a

nationwide survey. And I hope that we can request the information in such a way as to get real hard evidence. I think this can be done.

Senator EAGLETON. Bringing it to my own home State, some people in Missouri are under the impression that the regulations will soon be issued under both titles III and VII requiring that 25 percent of the 10-percent local match must come from public funds.

Would you care to comment on that?

Mr. REILLY. I believe that is in the law, Mr. Chairman.

Senator EAGLETON. As to title III, it is in the law, but I do not believe it is in the law as to title VII.

Mr. REILLY. That is correct. It is title III only, and we have nothing in the works in terms of applying it to title VII.

Dr. FLEMMING. Under the existing law the responsibility for providing funds for administration shifts to title III, unless the law is changed.

Senator EAGLETON. Right.

My last question that I have of Dr. Flemming concerns some testimony yesterday with respect to the participant registration form.

This testimony came out of the State of New York, I believe, and I have in front of me this form that requires all kinds of questions to be filled out for the New York State Office of Aging by the individual participant, and then there are certain other questions below the line that the supervisor, or the administrator fills out in addition.

There is considerable objection to the burdensome nature of the paperwork involved, and I know that this is an ever-constant complaint with respect to Government.

Is there some way, as this program develops, that we can devise a truly simple system that gets the information that you need, but is not so overly burdensome as to consume hundreds of man- and woman-hours to assemble?

Dr. FLEMMING. The objective that you have just reflected in your question is an objective which I am in agreement.

The form to which you referred is not a form required by the Administration on Aged. That is a form that has been developed by the State of New York. Now, it may that they feel that some of the information called for by that form is information that we in turn are asking for. I would have to have the form analyzed from that point of view, but it is not an Administration on Aging form.

At one of the first meetings I had with the executives of State agencies on aging, quite a number of comments were made by the executives relative to what is called the nutritional information system. They said that it was getting in the way of their getting their projects going.

So I said all right—I will suspend all requirements under that information system for one quarter, and in the meantime I would like you to give us your ideas as to the changes that could be made in the system.

I made that request back in November, and then we kept the channels of communication open until about February 11 to receive comments from the States.

We received comments from four States, and the city of Chicago. And out of those four comments, two said they thought the system was OK. We had received some oral comments from New Jersey and Virginia. When we went back to them they said that after recon-

sidering the matter, they felt that the system was OK. Nevertheless we took a very close look at it. I did, personally. Some changes were made.

Then we transmitted the revised systems to the States. It is this revised system that they will be operating under when they submit their quarterly reports for the second quarter of this year.

I will be glad to supply it for the record, the two pages of forms that are involved, so that the committee can have the opportunity of considering them.

As far as I can determine, what we are asking for is information that we need from a management point of view, and I think the States need from a management point of view. I am certainly wide open at any time to suggestions for eliminating this particular request or that particular request, if it cannot be justified from a management point of view.

I don't believe in calling for information just to satisfy somebody's curiosity. I just do not think we ought to burden project directors with providing information which is unrelated to the management of the program. That it seems to me should be our test.

Senator EAGLETON. Senator Beall?

Senator BEALL. Thank you, Mr. Chairman.

Dr. Flemming, it has always been a pleasure to see you, and we are happy to have you with us this morning.

Dr. FLEMMING. Thank you. Pardon me. I might say, Senator Eagleton, that it looks to us that this form goes beyond our requirements. There are other States that are asking for more information than we are asking for.

Now, I will not take issue with those States, necessarily. They may have decided that they need some additional information to improve the management of the program. After all, we are holding them responsible for operating these programs in their respective States, so I am not saying they are wrong. But as we are furnished comments on this issue, we do have to keep in mind that, in addition to the Federal reporting requirements, there may be superimposed some State reporting requirements.

Pardon me, Senator Beall.

Senator BEALL. I recently held a very successful hearing in Baltimore with regard to this program, and I must say that all of the beneficiaries who testified were universally enthusiastic about the program, about the positive effects the program had had, and the necessity of expanding and strengthening it.

They all commented about what it had done for them, and the main benefit seemed to be more social than nutritional. They commented on the fact that the program gave them a new lease on life by enabling them to participate and socialize with other people.

They all expressed concern about transportation. I observed that within the program there were great variations in the cost of providing services from one project to another project. It seems to me that this is something that is going to have to get some attention here in Washington, because I would suspect that, as the program grows, a wide variation in cost may appear from place to place, and project to project.

Obviously in areas of large participation it is cheaper to provide the service than it is in smaller, more remote projects, but there did appear to be a rather wide variation.

I was interested in Senator Eagleton's question about the participation of the Department of Agriculture. It seemed to me as a result of the testimony we heard in Baltimore, that the school lunch facilities provide a great opportunity for the bulk purchase of food.

It seems to me that if your programs can be coordinated with the school lunch program, you can get the advantage of bulk purchasing power in conjunction with the Department of Agriculture. I was wondering if you have studied that possibility at any length?

Dr. FLEMMING. Not at any length, but this is certainly an opportunity to which we should address ourselves.

As you and Senator Eagleton may know, there are two States that have opened up in effect their school lunch programs to older persons: the Commonwealth of Massachusetts and the State of Wisconsin.

We are watching these developments with interest, because we recognize that other States might decide to move in the same direction.

I appreciated your observations relative to costs. As we look at the initial costs we are going to have to be careful to determine what goes into those costs. For example, I was in an area in Indiana a few days ago where they used very little money for startup costs. They had programs underway before title VII came along. They had made their capital investment. Their cost per meal is going to be much lower than a situation where a large capital investment has been made to get the program underway.

Senator BEALL. The testimony we received yesterday from people involved in the New York programs indicated that they are reaching about 3 percent of the eligible population. If that is true across the country, it is perfectly obvious that the program is going to grow rather rapidly, and need a great deal of money. I am wondering about the availability of additional funds even though it is for a very desirable purpose. Fortunately this is not the kind of program where the service is provided on the basis of the income level of the recipient, thus there are many recipients who are financially able to make a contribution to this program.

As a matter of fact, many senior citizens would be perfectly happy to do so, if necessary, just for the privilege of participating in this program. I am wondering if you have the authority to conduct some demonstration projects where you would use some sort of fixed charge, similar to that used in the school lunch program, where those who can afford to pay will pay, and for those who cannot pay will not have pay?

Dr. FLEMMING. I am happy to have the opportunity of commenting on that issue.

Just before I do, in connection with an earlier comment made by you, I am reminded of the fact that at the last meeting of the Interdepartmental Task Force on Nutrition, under the Cabinet Level Committee on Aging, we discussed with the representatives of the departments a number of possible or potential action programs, and one is related to the fact that the school lunch program can provide resources for nutrition programs for older persons.

And so we are working on developing a joint communication from the Administration on Aging and the Department of Agriculture, to the State Agencies on Aging and education departments, encouraging exploratory discussions on this possibility. We have asked the Department of Agriculture to take the lead on this matter.

Now to return to the question of financial contributions by participants in the nutrition program. The law, of course, makes it possible for contributions to be made by participants in the title VII programs.

The guidelines that we issued recognized that fact, and specified that those running the project could invite contributions. We specified that the contributions that were received could be used for the purpose of strengthening that particular project or that particular site, either by broadening its base, bringing in more persons, or by purchasing equipment.

Now, those guidelines were biased toward a uniform contribution on the part of the participants. In a good many projects throughout the country this is what has happened. They have fixed a uniform contribution of say 25 cents. But it seems to me that it should be possible for those running the project to develop a statement which they give to each participant which in effect identifies a fair share, depending on level of income. No one would make any inquiries as to the income of the participant. It would just be between the individual and the project. The participant would decide whether he wanted to contribute and in what amount. No questions would be asked.

There is not any doubt at all but that there are persons participating in these programs who are participating in them because of the spinoffs that come from the programs.

There is a meal site in my own church here in Washington. I heard the story just the other day of a person who, at the end of a particular meal, came up to the site director and said, "Look, here is $5. I do not need a free meal, but I desperately need this program—what this program is doing for me in terms of developing new relationships and new associations."

So I really think that we should probably revise the guidelines somewhat, not to direct, but to encourage the project directors and the site directors to move in the direction of making it possible for participants to make contributions. It could lead to additional resources which could be used for the purposes of broadening the base of the programs.

There are persons who would feel much more comfortable about participating in one of these projects if they had that kind of opportunity. Otherwise, although they like to participate in the project, they have a guilty conscience because they are getting something free that they really could pay for.

Senator BEALL. Speaking of broadening the base, what is the status of the National Center for Information Resource Clearing House for the Aged?

Dr. FLEMMING. We are getting that underway. We are getting it underway with a very specific objective in mind, an objective set forth in our title III regulations.

We hope that by June 30, 1975, we will be in a position where older persons throughout the Nation will be able to turn to information and referral sources which are reasonably convenient and accessible to them. And I hope we will be able to achieve this objective.

Senator BEALL. We found out in our Baltimore hearing that transportation is the thing that is constantly on peoples' minds.

Section 412 of title IV calls for a "special study and demonstration project of the transportation problems of older Americans."

Has anything taken place in this regard?

Dr. FLEMMING. Yes. Section 412 calls for a report by January 1, 1975, which of course, is pretty close.

We have developed with the Department of Transportation a plan for the study. When we submit the results of the study on January 1, it will undoubtedly be an interim report. When the deadline of January 1, 1975, was set it was thought that the older Americans amendment would become effective about 1 year before they actually did become effective. We decided against asking for an extension of the deadline. We will do the best we can between now and January 1. Then if there are gaps in the study we will make recommendations designed to close the gaps.

This report will include statements relative to some of the demonstration projects that the Department of Transportation has financed and will finance.

I am sure when the report is submitted this committee and other committees will say that they would like some more information. I believe, however, in pulling together what we have available at a given time, taking a look at it, and then deciding what else we need.

Senator EAGLETON. Rest assured we will always need more.

Senator BEALL. Are you funding through your office any demonstration projects?

Mr. REILLY. Are you asking on transportation?

Senator BEALL. Yes.

Mr. REILLY. Yes, we currently are supporting two projects which are jointly funded with the Department of Transportation.

(1) Demonstration of a specialized transportation system in lower Naugatuck Valley, Conn.; and (2) demonstration of demand-responsive neighborhood transportation systems linked to public transit in Cleveland, Ohio.

Dr. FLEMMING. By the time we get the returns from the States as to what they are doing with model projects funds we may also find quite a number of them underway. We will be very glad to give the committee a report on such developments as soon as we have the information.

Senator BEALL. In that respect, there is an amendment before the committee that will authorize $35 million for transportation support services under title VII.

I wonder if you would want to comment on that approach to the problem?

Dr. FLEMMING. If the Congress is inclined to earmark some money for transportation for older persons I would hope that they would place the basic responsibility with the Department of Transportation, but in such a way as to make it clear that, under the leadership of the administration on aging, State agencies on aging, and the area agencies on aging, these resources should be coordinated with the title VII and title III programs, and other programs that have been undertaken in behalf of the older persons.

I feel in the field of aging where we have a major department dealing with one aspect of the problem, we should do everything, that is,

the administration on aging should do everything we can to persuade those in the Department to recognize their responsibilities in the field of aging. Then I would hope that they would ask the Congress to provide whatever resources might be needed if they are to discharge their responsibilities.

We have had an affirmative response to our ideas for coordination from the Department of Transportation. Overall responsibility has been placed with the Assistant Secretary, General Davis. I have discovered he is very much interested in the field of aging, and is willing to participate in action programs designed to help solve some of the transportation problems that confront older persons.

Senator BEALL. Thank you, Dr. Flemming.

Senator EAGLETON. Dr. Flemming, would you be able to provide for the record the statement of the following two items: one, examples of programs that you consider to be among the best that are in operation currently in the United States, and secondly, what you are doing in the community—the lessons learned from these good or excellent programs—how many others, 600——

Dr. FLEMMING. 665.

Senator EAGLETON. That are going around the country.

We would like examples of the ones that you think are operating at optimum efficiency, et cetera.

Dr. FLEMMING. I will be happy to do that.

[The material referred to and supplied for the record follows and related information appear in the appendix, Tab 5, on page 175 of this hearing record.]

Senator EAGLETON. One final comment.

I have received from you a recent study that has shown that only about one half of 1 percent of revenue-sharing money has been used on behalf of the elderly.

As the principal spokesman in this country for the elderly, what observations would you have to make on this report?

Dr. FLEMMING. Well, I think you are referring to the General Accounting Office report, are you not?

Senator EAGLETON. Yes.

Dr. FLEMMING. That report covered a limited number of areas. However, I would be the first to recognize that the States and local jurisdictions have not invested any large percentage of their general revenue-sharing funds in the field of aging.

Nevertheless, as I again move over the country, I am discovering that there are situations where there have been encouraging breakthroughs.

I think, to a considerable degree, the question of whether we are going to get significant breakthroughs depends on the way senior power operates at the local level.

For example, I was in a State not far from your State where I heard about a group of older persons noting that this revenue-sharing money was available to their county, and deciding that they would ask their county commissioners appropriate funds to purchase two minibuses they felt they needed in order to help deal with the transportation problems. They presented the request to the county commissioners and they were turned down.

They did not stop. They circulated petitions. They asked to have the item redocketed. When it was redocketed, the county commissioners had an audience of 400 persons. Also they had an articulate spokesman. It took them just 20 minutes to decide that they made a mistake the first time, and they appropriated $10,000 from the general revenue-sharing funds. It seems to me it is local pressure of this kind that needs to be developed if we are to take full advantage of the provision in the general Revenue Sharing Act which says that one of the priority areas for which local governments can spend money is for services for the poor or aged.

Now, I think we have a responsibility at the Federal level to keep identifying examples of where there has been a breakthrough, and insisting that this is a resource that can and should be tapped.

It is not too encouraging a picture at the present time. I do not think we should give up. I think we should just keep putting on the pressure to get more and more general revenue-sharing funds directly toward programs such as title VII.

Senator EAGLETON. Thank you very much, Dr. Flemming.

As usual, you make an excellent witness, and we are always pleased to have you with us, and we appreciate your advice.

Dr. FLEMMING. I am delighted to have this opportunity, and I personally appreciate the interest of the members of this committee, not only in title VII, but in all other programs in aging.

Senator EAGLETON. Thank you, sir, and thank you, gentlemen.

We will now receive for the record a statement from Senator Mondale, a very active member of this committee who is very concerned with the problems of the elderly.

STATEMENT OF HON. WALTER F. MONDALE, A U.S. SENATOR FROM THE STATE OF MINNESOTA

Senator MONDALE. Mr. Chairman, thank you for the opportunity to speak this morning in support of extension of the nutrition programs authorized by title VII of the Older Americans Act.

I am most impressed by the success of this program in Minnesota, where more than 4,000 elderly persons participate at more than 100 meal sites in 66 counties. Three-fourths of these participants receive incomes below the poverty line. This program is vital to their physical well-being as well as beneficial to their social, recreational, and educational life.

I heard about one oldtimer from the Iron Range up in northern Minnesota who asked the worker at the senior center: "Is there some special medicine in the food that is served?" The worker explained that the food was simply a "well balanced, nutritious meal." The 80-year-old man replied: "I knew there was medicine in it because I've been feeling better and getting my strength back."

A widower in his eighties, also a participant in a Minnesota nutrition program, said: "I was a good * * * not a great farmer in my day, but I am a lousy cook. This lunch means a lot to me because I can take care of myself very well except for cooking and preparing the food. I don't want to go to a nursing home if I can help it."

I strongly suupport the bill before you today, but I am concerned about the inadequacy of the proposed funding. The administration budget provides for the same level of funding in fiscal 1975 as it did in 1974, and all of us know that the same number of dollars will not buy the same number of meals as it did last year. I hope that we can convince the Appropriations Committee to provide funding at 125 percent of last year's level, to stave off cuts in the programs.

In addition, the bill before you has no provision for funding for the administrative costs of the program. Officials in my State tell me that they will need a 7 percent increase in order to cover the costs of administration in the coming year. Mr. Chairman, I request unanimous consent that you include in the record a statement about this program prepared by the Governor's Citizens Council on Aging in Minnesota. It faces in fully implementing the program in the coming year. Thank you.

[The information referred to follows:]

THE NUTRITION PROGRAM FOR THE ELDERLY IN MINNESOTA

May, 1974

Six of Minnesota's 17 projects are completing their first budget year in June 30, 1974, six more on September 30, and five on December 31. They represent a target achieved by the Governor's Citizens Council on Aging plan for the allocation of the $1.8 million, that the state was allotted by the Administration on Aging from the late-to-arrive fiscal 1973 appropriation; an appropriation the states were required to have committed by December 31, 1973.

The Council's plan was to attempt state-wideness of program by awarding at least one project grant in each of the economic development regions, plus one for some consortium of Indian reservations. That was accomplished. See attached mailing list. Funds were allocated proportinate to the population over 60 years of age under the poverty line.

The last sites will be opened shortly and will number over 100. Over 4000 people are being served daily now, and the target groups (low-income, lonely/isolated, and minorities) are well represented in those served - - 75 percent being below poverty level, and the minorities by their proportion in the total population and growing.

Meal service is mixed - - catered (both commercial and non-profit institutions), restaurant, and site-prepared - - in that order of volume. Average contributions per meal range from less than 10¢ to 75¢.

There are many aspects of the program to be gratified about:

- - The acceptance of the over-all federal design and state plan by participants, by local communities and local government, by state agencies and state government.

- - The meeting of target number of meals-being-served within 90 days of funding, in all but a few explainable circumstances.

- - The high and continuing demand at meal sites.

- - The still awkward but steadily growing development and use of participant Project Councils to help run the program.

- - The high turn out of volunteers.

- - The participation in and use of such federal and state training opportunities by project staffs and volunteers, that time and manpower have been able to make available.

- - The letters from and about participants with such items as: "The meal was very good, but getting together with others was even better"; "Two ladies, old friends, living only 12 miles apart, had not seen each other for over 20 years - - until our site opened"; "A dyed-in-the-wool vegetable-hater was cajoled by his dinner companions into trying and liking 'em"; The town drunk - - it's not nice but that's what they call him! - - now comes clean and groomed, and never has a drink before the noon meal!" "These two brothers hardly ever left their house, but now they come to our meal regularly. They talk to people and sometimes smile." Etc., etc.

THE NUTRITION PROGRAM FOR THE ELDERLY IN MINNESOTA

May, 1974

There are also concerns:

- - The federal allotment to the states for the second year (fiscal 1974) is the same ($1.8 million for Minnesota) as for the first year. This not only prevents any expansion to more people and communities but, with inlfation, even threatens a cut-back in number of meals now being served.

- - The very popularity of the meal sites opened makes communities, that do not have them, very worried about the current inability to expand the program.

- - The difficulty of pursuing even reasonably adequate administrative standards of accountability, efficiency, and effectiveness - - of monitoring over 100 sites! - - with no money allowed for state administration.

- - The threat of sites becoming soup kitchens under the double stress of inflation and weak administrative over-sight.

- - The over-all threat to this promising, challenging attack on the twin problems of malnutrition and isolation-loneliness-lack of motivation that is inherent in the too little money, too little time, to mount and honestly test the program concepts and methods.

LJF:em

Senator EAGLETON. Our final witness will be Mr. John B. Martin, consultant to the American Association of Retired Persons and the National Retired Teachers Association. I am very pleased to welcome you, Mr. Martin.

Mr. Martin has been before this committee on numerous occasions, both in his current capacity and previously as the Commissioner on Aging, and he, too, I must say, is a very distinguished and fine gentleman.

STATEMENT OF JOHN B. MARTIN, CONSULTANT TO THE AMERICAN ASSOCIATION OF RETIRED PERSONS AND THE NATIONAL RETIRED TEACHERS ASSOCIATION, AND FORMER COMMISSIONER ON AGING; ACCOMPANIED BY JANET WEGNER, PROFESSIONAL STAFF

Mr. MARTIN. Thank you, Senator.

Senator EAGLETON. You may proceed, Mr. Martin.

Mr. MARTIN. I appreciate the opportunity to be here this morning to testify with regard to the extension of the authorization of title VII, nutrition program, and as consultant to the American Association of Retired Persons and the National Retired Teachers Association. I have with me one of our younger professional staffers, Janet Wegner, who works on these nutritional matters.

The authorization for title VII of the Older Americans Act expires on June 30. Because of various delays in funding, the program has been underway for less than 1 year, and has not reached its full level of operation under 1973–74 funding.

On March 27, 1973, I wrote to Secretary Weinberger expressing my concern that the administration might be planning to phase out the nutrition program after a single year of operation.

I was concerned about this because of the attitude of the administration toward the categorical programs, and therefore wrote to the Secretary.

The Secretary replied under date of April 20, 1973, as follows:

> In regard to your concern about the future of the nutrition program, I would like to reassure you that the administration would, under no circumstances, start such a substantial program, and then propose to let it lapse after only 1 year of operation.
>
> We are still hopeful that funding will become available for the nutrition program during 1973, and of course, we have just finished testifying before the House subcommittee in support of a $100 million level of funding for the nutrition program for fiscal year 1974.
>
> Since you have brought this issue to my attention, I will instruct the Assistant Secretary for Human Development, working with the appropriate staff officers in the Department, to develop a comprehensive plan for the nutrition program in relationship to our other legislative and programmatic priorities.

I do not know to what extent the Assistant Secretary for Human Development has been able to carry out this instruction, but I am familiar with the fact that the program is now moving rapidly forward, and that efforts have been and are being made to coordinate the title III and title VII programs.

The question now is the extent to which the program will be encouraged by appropriate longer term authorization and funding to develop and expand to meet the needs of those it is designed to help.

One of the reasons for early delay in setting this program in motion has been unwillingness to commit local funds and effort until the Federal program was funded and ready to move. Local officials have been burned in the past by the unrealized promise of Federal largesse. They are cautious also about entering a program for which they may be left holding the bag if the Federal commitment is subsequently withdrawn.

If the present program is extended for 1 year only, it will greatly strengthen the belief that the program will shortly be phased out and left to local initiative. It is important, therefore, that the authorization be renewed for a 3-year period, as is done by H.R. 11105.

In addition, our associations believe that authorization levels for the program should be increased to the amounts authorized in H.R. 11105—$150 million in fiscal year 1975, $200 million in fiscal year 1976, and $250 million in fiscal year 1977.

Frankly, those figures were first suggested about 3 or 4 months ago, and there has been some escalation in prices since that time, so that this would certainly be a minimal figure.

The success of the nutrition for the elderly program has already been amply demonstrated and we feel that the benefits of the program should be extended to a greater number of older persons.

In addition, increased authorization levels are necessary because the cost of food has risen more than 36 percent since the program was first enacted into law in March, 1972. The $100 million originally appropriated for the program was intended to provide meals and services for 250,000 persons. Due to rising costs, this estimate has been revised downward to 213,000, and the program must have additional funds simply to maintain its present level of activity over the next few years.

Finally, increased authorization levels will permit a substantial increase in the quality of the program, especially in the supportive services offered as an integral part of it. We feel that the amounts authorized in H.R. 11105 are reasonable, and will allow for improving the quality of the program, expanding it to serve a greater number of people, and keeping pace with rising food costs.

Our associations are concerned that a continuing emphasis should be placed on maintaining the quality of the program. We are aware that there has been strong pressure to reach projected levels of meals served as quickly as possible and that to do this, it has been necessary to delay, temporarily, insistence upon the provision of supportive services, on the training of project personnel before initiating the projects, and on in-depth gathering of data.

We consider this a serious matter, since we believe that the quality of the program depends not merely on the food served, but also on related service components, proper training of project personnel and an adequate data base.

With adequate attention to these matters, title VII projects can become focal points around which many of the elements of the title III program can be grouped and made more effective.

While it is true that nutrition projects cannot be made part of title III comprehensive and coordinated systems on a mandatory basis, it is highly desirable, where this can be done on a voluntary basis.

We feel, therefore, that every effort should be made to continue

development of the nutrition program as a multifaceted program in which food is the essential element, but which is enriched by a variety of other services.

Our associations feel that a number of minor adjustments should be made in the nutrition for the elderly program. In particular, we are concerned that there may not be adequate funds available to cover administrative costs at the State level.

And there was discussion here this morning, and we hear the complaint from different parts of the country, that the administrative costs, which are now to be placed upon title III, raise some uncertainty as to whether funds will be available. This causes concern among project directors.

Public Law 93–29, the Older Americans Comprehensive Services Amendments of 1973, specifies that for fiscal years ending after June 30, 1973, funds allotted to a State for State planning and administration under title III may be used for the administration of the title VII program.

However, since funds from the title III program are not always available, and competition for these funds is keen, our associations urge that nutrition for the elderly projects be permitted to spend up to 10 percent of available title VII funds for administrative costs of the program.

We do not feel that this would constitute a substantive change in the operation of the programs since funds for administration were originally handled in this way.

Senator EAGLETON. Mr. Martin, may I interrupt you, if I may? I have to go to another committee to testify and participate in a hearing.

Senator Beall has indicated that he can remain, so if you will, I will excuse myself.

I did not want to walk out in the middle of your presentation without explaining my absence. I have read you statement thus far, and I am generally in accord with the thrust of your statement, especially that it must be more than a 1 year bill, otherwise the local program operators will worry that perhaps that is the end of the line.

Mr. MARTIN. I am sure that is true, Senator, and I appreciate the necessity for your appearing at more than one place during the morning.

Senator EAGLETON. Thank you very much, and thank you, Senator Beall, for chairing.

Senator BEALL (presiding pro tempore). Thank you.

Mr. MARTIN. With reference to the collection of data, our associations have studied with interest the results of the survey conducted by the Food Research and Action Center. While we have had no opportunity to verify these findings on our own, it appears that there is sufficient criticism of the nutrition information system to warrant a careful examination of the complexity and amount of information required of each project.

If the system is unduly complex and burdensome, it may well result in poor and inaccurate reporting of information, or even failure to report, and might defeat the purpose for which the system was established. For this reason, NRTA and AARP hope that this committee will encourage the Administration on Aging to conduct a careful study of the validity of the nutrition information system.

34-262 O - 74 - 11

As you are aware, hearings on the Labor-HEW appropriations bill for fiscal year 1975 have been completed in the House, and hearings have begun in in the Senate Appropriations Subcommittee on Labor-HEW. We urge the Senate, therefore, to pass H.R. 11105 as promptly as possible in order that funds for the program may be included in the Labor-HEW appropriations bill for fiscal year 1975.

Because the program has been in operation for such a short period of time, we feel that substantive changes in the program (other than increased levels of authorization) should not be made at this time.

In summary, our associations urge:

1. Prompt Senate passage of H.R. 11105.
2. Renewed authorization for a 3-year period.
3. Increased authorization levels to allow for rising food costs and expansion of the program.
4. Avoidance of any major changes in the program at this time.

That is my statement, Mr. Chairman, and I will be glad to answer any questions you may have.

Thank you.

Senator BEALL. Thank you, Mr. Martin.

At the outset, I want to commend you for the advance planning you did which allowed the title VII program to get off to a good start.

Mr. MARTIN. Thank you.

This has been a favorite program of mine from the beginning, and the 30 projects that were originally developed as demonstrations have led to the development of this program, and I am very proud of it.

Senator BEALL. You have reason to be proud of it. It is off to a good start.

You commented about the desirability of extending the title VII authorization for 3 years, and I agree with your reasons for doing so.

I think that most State and local officials as well as the recipients of the benefits of the program ought to have some idea that it is going to continue for more than just one year at a time.

I was wondering if it would be desirable to extend this patricular authorization for a year just to make it conform with the rest of the law, so that we can try to tie these things together a little better.

Mr. MARTIN. I understand the argument, Senator, but I think that the desirability of giving the forward thrust is more important in the minds of the people who are administering the program.

We would like to see it continue for another 3 years. Then if it is desired to meld it into the program, it can be melded into the general program of AOA, and it can be done.

Senator BEALL. You indicated that you thought the higher money amount was desirable.

Mr. MARTIN. We suggested that the amounts be $150 million, $200 million, and $250 million.

I understand that yesterday somewhat larger a sum was suggested.

There is no question but what the rapid rise in food costs has seriously hindered the program from expanding, and we cannot tell what the future is going to be on that, but if you are going to expand it, and if you are going to come anywhere near meeting any substantial segment of the need that you commented on earlier this morning, something like 3 percent of the population who are eligible are now making use of it, we will have to move those authorization figures up very substantially.

Senator BEALL. You have heard comments here today about the transportation difficulties.

Do you have any thoughts about that that you would like to get in the record at this juncture?

Mr. MARTIN. Yes, I would.

If transportation is taken out of the program, in other words, if the transportation costs come out of this amount appropriated for essentially food, and services, transportation, especially in rural areas will eat up this program entirely.

If you take a limit off it, you see the limit really now is under the regulations, 20 percent for all services, which includes transportation, but in the rural areas this could be as much as 30 percent without any other services than transportation, or 40 percent.

So that it seems that transportation needs to be dealt with on a separate basis, and I was not familiar with the $35 million figure that you mentioned, or was that proposed——

Senator BEALL. Proposed to be added to title VII.

Mr. MARTIN. Title VII?

Senator BEALL. Yes; as a separate authorization, in title VII.

Mr. MARTIN. I think something of that sort is desirable, because otherwise project managers are going to be badly torn between broadening their program and including the necessary number of people in it on the one hand, and getting the necessary transportation component into the picture on the other.

It is a very serious problem, and it has gotten worse as the cost of gasoline—fuel has gone up, and other difficulties of this sort.

So that I would favor separating it out from the supportive services proportion of the authorization.

Senator BEALL. Thank you.

Mr. Murphy?

Mr. MURPHY. Mr. Martin, if you do provide a separate authorization for transportation, do you not run the risk of two things that might happen?

First of all, that no funds are going to be allowed to be used out of the basic authorization for transportation and so the problem will be to get an appropriation for that separate authorization, or there will virtually be no transportation associated with title VII at all.

Second, as we move towards some kind of closer relation between title VII and title III programs which is obviously going to be some time down the road, do you not also run the risk that you have two separate transportation systems?

Everybody likes to have their own fleet of cars and stationwagons or buses, or whatever it is, and in Missouri, there is a rapidly expanding program called OATS, older americans transportation fund under title III.

Now, if you have a separate transportation network funded under title VII, is that not likely to be duplicative?

Mr. MARTIN. Those are certainly possibilities. It may be that it would be better to proceed for the time being with the total authorization covering transportation, but with a careful eye to how the funds are used until we get a little bit better fix on it.

We have not had the program, I agree, in operation very long, and therefore it might be better to carry it along as is for another 2 or 3 years.

Mr. MURPHY. Do you think it might meet the problem and need to be given some discretion or alteration of the 20-percent limit now imposed on supportive services so that in those occasions where there is a demonstrated need for transportation that goes beyond, let us say, the 20 percent, then the State can permit that project to expand its transportation services?

Mr. MARTIN. I think you have to be careful of that, because every bite you take out of that money invades the amount that is available for food. I have seen the figures on some of the projects which are rural in character, and transportation costs run very high. At least they did in the demonstration projects we funded.

Mr. MURPHY. Thank you.

Thank you, Senator.

Senator BEALL. Thank you, Mr. Martin.

The hearing is adjourned.

[Whereupon, at 11:53 a.m., the subcommittee was adjourned, subject to the call of the Chair.]

APPENDIX

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
OFFICE OF THE SECRETARY
WASHINGTON, D.C. 20201

Office of Human Development
Administration on Aging

JUN 14 1974

Honorable Thomas F. Eagleton
Chairman
Senate Labor and Public Welfare Committee
Subcommittee on Aging
United States Senate
Washington, D. C. 20510

Dear Mr. Chairman:

In response to your request at the hearing before your subcommittee on May 23, 1974 relative to the extension of the authority for Title VII of the Older Americans Act, I am providing the following materials for the record:

(1) Copies of internal memoranda from me to others in the Department regarding the proposal to delegate authority to act for Titles III and VII to the Regional Directors (Tab 1);

(2) A statement of how Title VII projects can use volume purchasing, through State Purchasing Agencies (Tab 2);

(3) A summary of the current status of the surplus commodity program in terms of Title VII projects (Tab 3);

(4) Copies of the two forms required by the Nutrition Information System (Tab 4); and

(5) A list of what AoA considered to be the best Title VII projects in the country, and an indication of what we were doing to distribute what is learned from these projects to other projects (Tab 5).

Very sincerely and cordially yours,

Arthur S. Flemming
Commissioner on Aging

Enclosures

Tab 1.--Copies of internal memoranda on proposal to delegate authority to act for Titles III and VII to the Regional Directors

MEMORANDUM

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
OFFICE OF THE SECRETARY
Office of Human Development
Administration on Aging

TO : Stanley B. Thomas, Jr.
Assistant Secretary for
Human Development

DATE: MAR 11 1974

FROM : Arthur S. Flemming
Commissioner on Aging

SUBJECT: Proposal to Delegate Authority to Act for Titles III and VII of the Older Americans Act to the Regional Directors of HEW

Attached for your consideration and possible transmittal to the Secretary is the proposal to delegate authority to act for Titles III and VII of the Older Americans Act to the Regional Directors of HEW.

THE SECRETARY OF HEALTH, EDUCATION, AND WELFARE
WASHINGTON, D. C. 20201

MAR 26 1974

Honorable Gerald R. Ford
President of the Senate
Washington, D. C. 20510

Dear Mr. President:

In accordance with section 201 of the Older Americans Act of 1965, I am submitting to the Congress the following plan for delegation, with my concurrence, of certain authorities to act by the Commissioner on Aging to officers of the Department of Health, Education, and Welfare not directly responsible to him. These authorities will be exercised pursuant to policies, regulations, and guidelines promulgated by the Commissioner and subject to post-audit by him. This plan will not be implemented until the period of time required by the statute has elapsed.

The Commissioner will delegate to the Regional Directors authority to act in connection with the administration in the regions of programs under Title III (Grants for State and Community Programs on Aging), and Title VII (Nutrition Program for the Elderly) of the Act.

The Commissioner on Aging will retain responsibility for and authority over the delegated programs. He will be able to revoke his delegation whenever he decides to do so. He will have the responsibility of considering appeals from actions taken by Regional Directors. As indicated, policies, regulations and guidelines will be issued by the Commissioner, and will govern the manner in which Regional Directors will operate under the delegations of authority to act.

This delegation is designed to strengthen the position of the program for the elderly in the Regional Offices of the Department. Both the Commissioner, Arthur S. Flemming, and I would like to see the Regional Directors play a leading role in working with the States in the field of aging. The strength and authority of the Regional Directors can best be brought to bear in the interests of the elderly of the country if the Regional Directors have specific authorities to act under the

newly expanded programs of assistance to States and localities under the Older Americans Act. Further, specific authorities to act in the area of aging will permit them to coordinate the aging program with other Department programs which serve the elderly and other vulnerable groups in our society.

Under this plan the Regional Directors will have authority to redelegate their authority to act to the Assistant Regional Director for Human Development and the Regional Program Director for Aging. The Regional Directors, however, will be held accountable for the manner in which these authorities are exercised.

On October 31, 1973, we submitted a letter to Senator James Eastland, Acting President Pro Tempore, dealing with the subject matter of this letter. We believe that the 60-day period provided for in the law for consideration by the Congress of such a submission began anew on January 21, 1974, when the second session of the 93rd Congress convened. We have no objection, however, in this case to restating our views in this letter and to having a further 60-day period begin to run with the receipt of this letter. In that regard, this letter will confirm recent consultations held with the Select Subcommittee on Education of the House of Representatives Committee on Education and Labor.

Sincerely,

Secretary

COPY

Tab 2.--A statement of how Title VII projects can use volume purchasing, through State Purchasing Agencies

Volume Purchasing

State Agencies have been advised that volume purchasing practices should be used where possible to enhance the purchasing power of available funds. Three methods are suggested:

1. State Agencies on Aging have been advised to negotiate with the respective State Purchasing Agencies for use of the State specifications and bid prices. In the meal's component particularly, use of the State's volume contract prices can represent substantial savings over prices available to the single project.

2. The State Agencies on Aging can serve as a purchase coordinator for projects within the State that choose to take advantage of the buying power of the total group.

3. The State Agency on Aging may foster the development of an informal consortium or purchasing co-operative among projects in a position to negotiate volume prices with State and local vendors.

The Central Office is developing additional assistance for State Agencies on the subject of volume purchasing.

Tab 3.--A summary of the current status of the surplus commodity program in terms of Title VII projects

Commodity Program

Department of Agriculture Commodity programs under Section 32, Surplus Removal and Section 416, Price Supports, are authorized and remain available to Title VII projects. However, without surpluses, this authority represents very few actual commodities at the State and project level.

The State Agencies have been advised in the Manual of Policies and Procedures for the Nutrition Program to direct projects to be certified for any Department of Agriculture Program available in the State, so that in the event any commodities under any authority become available, that project would be in a position to receive them.

State Agencies were advised on May 22, 1974 that in the event commodity distribution programs were phased out, contingency plans should be developed at the project level to cover the increased cost of purchase of a like amount of food.

The Manual of Policies and Procedures for the National Nutrition Program provides guidance to the State on utilization of USDA Food Assistance programs. State Agencies were advised in the policy manual to work with the Agriculture Agency designated to administer food distribution for institutions to assure maximum feasible utilization of donated foods in nutrition projects. As a minimum the State Agency shall, under the program policies, when a nutrition project has been given an award, inform the State Cooperating Agency of the project's name, address, the location of the meal site(s) and the anticipated number of elderly persons to be served at each site.

The Guide to Effective Nutrition Project Operation discusses two types of Federal food assistance programs available to the Nutrition Program. The first is for institutional use. That is the project. The second type has been available for use individuals to assist them in the preparation of meals at home. In the appendix to that Guide, AoA has provided a list of the USDA, Food Distribution Programs Cooperating Agencies in each State, by name, address and telephone number.

Training at both the State Agency and Project level included information on use of these resources.

Title VII projects have used commodities to a limited extent. Through February 28, 1974 projects had used only $182,101 for such commodities. A State-by-State breakdown on the utilization of commodities is attached.

Section 1446 a-1 of the Food and Agriculture Act of 1965 provides through Section 709 for the use of Commodity Credit Corporation funds for purchases of diary products requirements for school and other programs.

Under this provision, the Secretary of Agriculture is authorized to use funds of the CCC to purchase sufficient supplies of dairy products at market prices to meet the requirements of any programs for the schools (other than fluid milk in the case of schools), domestic relief distribution, community action, and such other programs as are authorized by law, when there are insufficient stocks of dairy products in the hands of the CCC available for such purposes.

The channel for distribution of food under this authority is the State Cooperating Agency but this discretionary authority has been used very few times since 1968.

	Est. Value of Surplus Commodities
TOTALS	182,101
REGION I	7,351
Connecticut	843
Maine	3,678
Massachusetts	Not Used
New Hampshire	556
Rhode Island	98
Vermont	2,176
REGION II	33,523
New Jersey	404
New York	129
Puerto Rico	32,774
Virgin Islands	216
REGION III	8,860
Delaware	226
Dist. of Col.	Not Used
Maryland	320
Pennsylvania	6,500
Virginia	1,310
West Virginia	504
REGION IV	5,172
Alabama	Not Used
Florida	Not Used
Georgia	200
Kentucky	Not Used
Mississippi	Not Used
North Carolina	2,607
South Carolina	453
Tennessee	1,912
REGION V	16,300
Illinois	300
Indiana	Not Used
Michigan	9,000
Minnesota	Not Used
Ohio	5,000
Wisconsin	2,000
REGION VI	11,018
Arkansas	Not Used
Louisiana	Not Used
New Mexico	Not Used
Oklahoma	11,018
Texas	Not Used
REGION VII	9,028
Iowa	2,220
Kansas	Not Used
Missouri	3,098
Nebraska	3,710
REGION VIII	4,628
Colorado	780
Montana	575
North Dakota	3,000
South Dakota	Not Used
Utah	273
Wyoming	Not Used
REGION IX	78,866
American Samoa	N/A
Arizona	4,536
California	7,728
Guam	1,200
Hawaii	17,000
Nevada	48,402
Trust Territory	N/A
REGION X	7,355
Alaska	342
Idaho	979
Oregon	5,505
Washington	529

*) 39 States

*) ~~$182,101 through February 28, 1974~~

FNS-646 (8-72) (FORMERLY FNS-645)

Tab 4.--Copies of the two forms required by the Nutrition Information System

U.S. DEPARTMENT OF
HEALTH, EDUCATION AND WELFARE
OFFICE OF HUMAN DEVELOPMENT
ADMINISTRATION ON AGING
WASHINGTON, D.C.

QUARTERLY NUTRITION PROJECT REPORT

Page 1 of ___

OMB NUMBER
83 R0266

(1) TITLE AND ADDRESS OF PROJECT

TITLE

STREET NUMBER OR P.O. BOX

CITY

STATE

ZIP

(2) OHD REGION CODE (1 – 8) (9 – 10)

(3) PSA CODE (11 – 12)

(4) STATE PROJECT NO. (13 – 20) 7

(5) QUARTERLY REPORT ENDING

MONTH (21 – 22) DAY (23 – 24) YEAR (25 – 26)

(6)

A. NUMBER OF DAYS PROJECT PROVIDED MEALS THIS QUARTER (27 – 28)

B. SPARSELY POPULATED RURAL PROJECT (29)

(7) STAFF

	NUMBER	
	PAID	VOLUNTEER
A. NO. OF FULL TIME STAFF	(30 – 32)	(33 – 35)
B. NO. OF PART TIME STAFF	(36 – 38)	(39 – 41)
C. NO. OF STAFF – TOTAL	(42 – 44)	(45 – 47)
D. NO. OF 60+ STAFF	(48 – 50)	(51 – 53)

(8) RACIAL/ETHNIC COMPOSITION OF STAFF (1 – 8)

	NUMBER	
	PAID	VOLUNTEER
A. AMERICAN INDIAN	(9 – 11)	(12 – 14)
B. NEGRO	(15 – 17)	(18 – 20)
C. SPANISH LANGUAGE	(21 – 23)	(24 – 26)
D. ORIENTAL	(27 – 29)	(30 – 32)
E. OTHER MINORITY	(33 – 35)	(36 – 38)
F. NON MINORITY	(39 – 41)	(42 – 44)

Page 2 of ___

(9) MEALS AND PARTICIPANTS SERVED

L (1–8)

	TOTAL MEALS QUARTER	TOTAL NO. OF PARTICIPANTS QUARTER	TOTAL NO. OF PARTICIPANTS YEAR-TO-DATE
A. MAIN MEALS – TOTAL	9–14	15–20	21–26
1. CONGREGATE	27–32	33–37	38–43
2. HOME DELIVERED	44–49	50–54	55–60

B. TOTAL NO. OF MAIN MEALS (INCLUDED IN A) SERVED TO PERSONS OTHER THAN PARTICIPANTS 61–65

C. TOTAL NO. OF MEALS PREPARED BUT NOT CONSUMED 66–70

D. NUMBER OF ELIGIBLE PERSONS UNABLE TO BE SERVED 71–76

M (1–8)

E. FREQUENCY OF PARTICIPANTS RECEIVING MEALS

1. 1-15 MEALS THIS QUARTER 9–13
2. 16-30 MEALS THIS QUARTER 14–18
3. 31-45 MEALS THIS QUARTER 19–23
4. 46+ MEALS THIS QUARTER 24–28

(10) PARTICIPANT STATISTICS

A. RACIAL/ETHNIC DISTRIBUTION

	QUARTER	YEAR-TO-DATE
1. AMERICAN INDIAN	29–33	34–38
2. NEGRO	39–43	44–48
3. SPANISH LANGUAGE	49–53	54–58
4. ORIENTAL	59–63	64–68
5. OTHER MINORITY	69–73	74–78
6. NON-MINORITY	9–14	15–20

N (1–8)

B. ESTIMATED PERCENT OF PARTICIPANTS BELOW BUREAU OF CENSUS POVERTY THRESHOLD – YEAR-TO-DATE ..... 21–23 %

	NO. OVER 60	SPOUSES UNDER 60
C. AGE DISTRIBUTION – YEAR-TO-DATE	24–28	29–33
	NO. MALES	NO. FEMALES
D. SEX DISTRIBUTION – YEAR-TO-DATE	34–38	39–43

(11) PROJECT EXPENDITURES FOR THE QUARTER

A. MEAL EXPENDITURES – TOTAL . . . . . $ [ ] .00 (44–50)

1. CONGREGATE . . . . . $ [ ] (51–56)

2. HOME DELIVERED . . . . . $ [ ] (57–62)

B. SUPPORTING SERVICES EXPENDITURES – TOTAL . . . . . $ [ ] (63–68)

1. TRANSPORTATION EXPENDITURES TO AND FROM MEALS . . . . . $ [ ] (69–74)

C. ADMINISTRATIVE EXPENDITURES – TOTAL . . . . . $ [ ] (75–80)

[0] (1–8)

D. CAPITAL EXPENDITURES – TOTAL . . . . . $ [ ] (9–14)

E. TOTAL EXPENDITURES THIS QUARTER . . . . . $ [ ] .00 (15–21)

F. AMOUNT OF TOTAL E. REPRESENTING NON FEDERAL RESOURCES USED . . . . . $ [ ] .00 (22–27)

(12) MAIN MEAL EXPENDITURES BY SELECTED CATEGORY

A. RAW FOOD EXPENDITURES – TOTAL . . . . . $ [ ] .00 (28–34)

B. LABOR EXPENDITURES – TOTAL . . . . . $ [ ] .00 (35–41)

(13) CASH CONTRIBUTIONS

A. ESTIMATED PERCENT OF PARTICIPANTS CONTRIBUTING AT ALL TO MEALS . . . . . [ ] % (42–44)

B. TOTAL RECEIPTS FROM PARTICIPANT CONTRIBUTIONS . . . . . $ [ ] .00 (45–50)

C. TOTAL OTHER CASH CONTRIBUTIONS . . . . . $ [ ] .00 (51–56)

SOCIAL SERVICES REPORT

Page 4 of ___

P 1 8 SERVICE CATEGORY	PERSONS/PERCENT PARTICIPANTS SERVED YEAR-TO-DATE	EXPENDITURES	SERVICE UNITS
TRANSPORTATION	PERSONS 9 14	$ 15 19	PASSENGER MILES 20 25
OUTREACH	PERSONS 26 31	$ 32 36	CONTACTS 37 42
ESCORT	PERSONS 43 48	$ 49 53	ESCORTS TRIPS 54 59
INFORMATION & REFERRAL	PERSONS 60 65	$ 66 70	INFO. & REF. 71 76
Q 1 8 COUNSELING	PERSONS 9 14	$ 15 19	HOURS 20 25
SHOPPING ASSISTANCE	PERSONS 26 31	$ 32 36	HOURS 37 42
NUTRITION EDUCATION	ESTIMATED PERCENT % 43 45	$ 46 50	SESSIONS 51 56
RECREATION	ESTIMATED PERCENT % 57 59	$ 60 64	HOURS 65 70

(14) SIGNATURES

SIGNATURE OF PROJECT OFFICIAL — TITLE — DATE

SIGNATURE OF STATE AGENCY OFFICIAL REVIEWING FORM — TITLE — DATE

SIGNATURE OF REGIONAL OFFICE OFFICIAL REVIEWING FORM — TITLE — DATE

34-262 O - 74 - 12

CONGREGATE MEAL SITE REPORT:

Page 5 of ___

[redacted]

1 8

CONGREGATE MEAL SITE	RURAL URBAN DESIGNATION	TYPE FACILITY SEE CODES BELOW	NO. OF MEALS SERVED	NO. OF DAYS MEALS SERVED PER WEEK
9 10	11	12	13 19	20
21 22	23	24	25 31	32
33 34	35	36	37 43	44
45 46	47	48	49 55	56
57 58	59	60	61 67	68
69 70	71	72	73 79	80

[redacted]

1 8

9 10	11	12	13 19	20
21 22	23	24	25 31	32
33 34	35	36	37 43	44
45 46	47	48	49 55	56
57 58	59	60	61 67	68
69 70	71	72	73 79	80

[redacted]

1 8

9 10	11	12	13 19	20
21 22	23	24	25 31	32
33 34	35	36	37 43	44
45 46	47	48	49 55	56
57 58	59	60	61 67	68
69 70	71	72	73 79	80

CONGREGATE MEAL SITE FACILITY CODES:

CODE
1. SENIOR CENTER
2. CHURCH

CODE
3. SCHOOL
4. PUBLIC OR LOW RENT HOUSING

CODE
5. DOMICILIARY INSTITUTION
6. OTHER

U. S. DEPARTMENT OF
HEALTH, EDUCATION AND WELFARE
OFFICE OF HUMAN DEVELOPMENT
ADMINISTRATION ON AGING
WASHINGTON, D.C.

NUTRITION PROJECT SUMMARY FORM

REVISED MARCH 29, 1974

OMB NUMBER
83 - R0267

AoA USE ONLY
A [ ]

(1) TYPE OF ACTION (CHECK ALL APPROPRIATE BOXES)

A) [ ] NEW AWARD (8) B) [ ] CONTINUATION (9) C) [ ] SUPPLEMENT (10) D) [ ] COMPLETION/TERMINATION (11) E) [ ] OTHER (12)

(2) OHD REGION CODE [ ] (13 14)

(3) PLANNING AND SERVICE AREA CODE [ ] (15 16)

(4) STATE PROJECT NO. 7 [ ] (17 – 24)

(5) CONGRESSIONAL DISTRICTS [ ] (25 26) [ ] (27 28) [ ] (29 30) [ ] (31 32) [ ] (33 34)

(6) TITLE AND ADDRESS OF PROJECT

TITLE (35 – 63)

STREET ADDRESS (9 – 35)

CITY (36 – 50)

COUNTY (51 – 65)

STATE (9 – 23)

ZIP (24 – 28)

[ ] (29) SPARSELY POPULATED RURAL PROJECT

AoA USE ONLY
B [ ] (1) (DUPE CARD) 7

AoA USE ONLY
C [ ] (1) (DUPE CARD) 7

(7) PROJECT AREA TO BE SERVED—CENSUS TRACTS

30 – 35 36 37 – 42 43 44 – 48 50 51 – 56 57 58 – 63 64 65 – 70 71 72 – 77

(8) PROJECT DIRECTOR

NAME (FIRST, M.I., LAST)

CHECK IF APPLICABLE

AGE = 60+ [ ] (78)

MINORITY GROUP [ ] (79)

AoA USE ONLY
D [ ] (1) (DUPE CARD) 7

(9) BUDGET YEAR: GIVE THE BUDGET YEAR OF THE PROJECT

[ ] (9) NUMBER OF YEARS IN OPERATION

THIS COVERS THE PERIOD BEGINNING [ ] (10 11) MONTH [ ] (12 13) DAY [ ] (14 15) YEAR

ENDING [ ] (16 17) MONTH [ ] (18 19) DAY [ ] (20 21) YEAR

(10) RECIPIENT AGENCY:

(NAME)

CHECK IF APPLICABLE: IS THE RECIPIENT AGENCY A:

PUBLIC AGENCY [ ] (22) PRIVATE NON-PROFIT [ ] (23) MINORITY OPERATED [ ] (24)

HOW MANY SITES ARE MINORITY OPERATED [ ] (25 27)

(11) FINANCIAL INFORMATION:

1. FEDERAL FUNDS:
   A. NEW OBLIGATION AUTHORITY $ [ ] .00 (29 – 35)
   B. CARRY-OVER FUNDS [ ] (36 – 42)
2. NON-FEDERAL RESOURCES [ ] (43 – 49)
3. PROPOSED INCOME [ ] (50 – 56)
4. TOTAL $ [ ] .00 (57 – 64)

(12) PROJECT AREA AND PARTICIPANTS:

AoA USE ONLY E (1) (DUPE CARD) (7)

1. TOTAL POPULATION OF PROJECT AREA (9–15)
2. 60+ POPULATION OF PROJECT AREA (16–21)
3. 60+ POPULATION BELOW POVERTY LEVEL (22–27)
4. RACIAL/ETHNIC COMPOSITION OF 60+ POPULATION OF PROJECT AREA:
   - AMERICAN INDIAN (28–33)
   - NEGRO (34–39)
   - SPANISH LANGUAGE (40–45)
   - ORIENTAL (46–51)
   - OTHER MINORITY (52–57)
   - NON-MINORITY (58–63)
5. ESTIMATED 60+ POPULATION REQUIRING DAILY MEALS (64–69)

(13) PROJECT DATA

AoA USE ONLY F (1) (DUPE CARD) (7)

1. DAYS MAIN MEAL WILL BE SERVED EACH WEEK (9)
2. CONGREGATE MEAL SITES PLANNED (10–12)
3. TOTAL MEALS TO BE SERVED DAILY (13–16)
   - a) CONGREGATE MEALS DAILY (17–20)
   - b) HOME DELIVERED MEALS DAILY (21–24)
4. MEALS WILL BE ☐ (25) CATERED ☐ (26) PROJECT PREPARED
5. RACIAL/ETHNIC COMPOSITION OF PERSONS TO BE SERVED ANNUALLY
   - AMERICAN INDIAN (27–31)
   - NEGRO (32–36)
   - SPANISH LANGUAGE (37–41)
   - ORIENTAL (42–46)
   - OTHER MINORITY (47–51)
   - NON-MINORITY (52–56)
6. TOTAL NUMBER OF PERSONS TO BE SERVED ANNUALLY (57–61)
7. TOTAL NUMBER RURAL PERSONS TO BE SERVED ANNUALLY (62–66)

(14) SUPPORTING SOCIAL SERVICES AVAILABLE TO PROJECT PARTICIPANTS AND ESTIMATED FUNDING

AoA USE ONLY G (1) (7)

AoA USE ONLY H (1) (7)

	EST. ANNUAL EXP. BY SOURCE		
	TITLE VII	TITLE III	OTHER
SOCIAL SERVICES-TOTAL	$ (9–14)	$ (15–20)	$ (21–26)
(TRANSPORTATION)	(45–50)	(51–56)	(57–62)
ESCORT	(9–14)	(15–20)	(21–26)
COUNSELING	(45–50)	(51–56)	(57–62)

	EST. ANNUAL EXP. BY SOURCE		
	TITLE VII	TITLE III	OTHER
INFORMATION & REFERRAL	(27–32)	(33–38)	(39–44)
NUTRITION EDUCATION	(63–68)	(69–74)	(75–80)
SHOPPING ASSISTANCE	(27–32)	(33–38)	(39–44)
RECREATION	(63–68)	(69–74)	(75–80)

(15) TOTAL PROJECTED PROJECT STAFF:

AoA USE ONLY I (1) (7) FULL TIME (9 10) PART TIME (11 12)

(16)

TITLE OF STATE AGENCY OFFICIAL _____ SIGNATURE _____ DATE _____

(17)

TITLE OF PROJECT OFFICIAL _____ SIGNATURE _____ DATE _____

Tab 5.--A list of what AoA considered to be the best Title VII projects in the country

IDENTIFICATION OF THE BEST

PROJECTS CURRENTLY OPERATING

UNDER TITLE III OF

THE OLDER AMERICANS ACT

INTRODUCTION

Recently, each State Agency on Aging was asked to identify a single project which was the best Title VII project in the State. Attached is a listing of those projects which were so identified by each State.

The Administration on Aging intends to utilize this information in the following ways:

1) Each project director of the best project selected will receive a congratulatory letter for his or her efforts in the effective implementation of the Title VII program, and being selected the best project in the State;
2) Each State will be asked to notify other project directors, and potential project grantees, of the designation of the best project in the State, including why that project was so selected. State Agencies will be urged to utilize the best project as a site for demonstrating to other project, and potential project, personnel how an effective meals program for the elderly can be organized.

IDENTIFICATION OF BEST TITLE VII NUTRITION PROJECTS *

ALABAMA	- Senior Activities on Independent Living (SAIL) P. O. Box 1665 Mobile, Alabama 36601
ARIZONA	- Maricopa County Community Services 4645 East Washington Phoenix, Arizona
ARKANSAS	- Senior Citizens Services of Miller County Texarkana, Arkansas 75501
CALIFORNIA	- Nutrition and Service Project 55 West Younger Avenue San Jose, California
CONNECTICUT	- Quinebaug Valley Senior Citizens P. O. Box 108 Route 205 Brooklyn, Vermont 06234
DELAWARE	- SERVE 1901 Market Street Wilmington, Delaware
FLORIDA	- Geriatric Program for Little Havana 1819 S. W. 12th AVenue Miami, Florida 33139
HAWAII	- Maui County Nutrition Project 200 High Street Wailuku, Hawaii
IOWA	- Area 15 Agency on Aging Indian Hills Community College Indian Hills, Iowa
KANSAS	- C.A.S.E. 619 Ann, Suite 321 Kansas City, Kansas 66101
KENTUCKY	- Green River Family Services, Inc. 105 1/2 North Main Street Henderson, Kentucky 42420

LOUISIANA	- New Orleans Food and Friends Program 707 Lafayette Street New Orleans, Louisiana
MAINE	- Meals for NE 890 Hammond Street Bangor, Maine
MARYLAND	- Garrett County Senior Clt. Hot Meals P. O. Box 149 Oakland, Maryland 21550
MASSACHUSETTS	- Chicopee Regional Nutrition Project 161 School Street Chicopee, Massachusetts
MISSISSIPPI	- South Delta Nutrition Project for the Elderly P. O. Drauer 1408 Greenville, Mississippi 38701
MISSOURI	- Central Missouri Area Agency on Aging 909 University Street Columbia, Missouri
MONTANA	- Havre Project Box 711 Havre, Montana
NEBRASKA	- Omaha Nutrition Program for the Elderly 4951 Center Street Omaha, Nebraska
NEVADA	- Care and Share Box 1058 Hawthorne, Nevada
NEW HAMSPHIRE	- The Elderly Nutrition Services Old Amhurst Road Hillsborough, New Hampshire
NEW JERSEY	- Sussex County Nutrition Project for the Elderly 62 Maine Street Newton, New Jersey 07660
NEW MEXICO	- Senior Citizens Nutrition Project 509 1/2 Camino - DeLas Marquez Sante Fe, New Mexico 87301

NEW YORK	- Rockland County Nutrition Project 7 Elmwood Drive New York City, New York 10956
NORTH CAROLINA	- Mountain Projects, Inc. Box 417-D, Route 1 Waynesville, North Carolina
NORTH DAKOTA	- Fargo Senior Commission on Aging 914 Main Avenue Fargo, North Dakota
OHIO	- NICE 181 Washington Blvd. Columbus, Ohio 43215
OKLAHOMA	- Kianichi Area Nutrition Program Box 8 Wilburton, Oklahoma 74578
RHODE ISLAND	- Senior - Ninn 458 Broadway Pawtucket, Rhode Island
SOUTH CAROLINA	- Orangeburg COA P. O. Box 1301 Orangeburg, South Carolina 29115
SOUTH DAKOTA	- Cheyenne River Meals Program for the Elderly Cultural Center Eagle Butte, South Dakota
TENNESSEE	- N.W. Tennessee Development District P. O. Box 63 Martin, Tennessee 38237
TEXAS	- Dallas County Nutrition Program 901 Sess Avenue 1325 Dallas, Texas
UTAH	- SoS Nutrition Program 1775 South Dakota Lane Provo, Utah
VERMONT	- Central Vermont Nutrition Program 56 State Street Montpelier, Vermont

VIRGINIA	- Nutrition Program Southeastern Virginia Planning District #20 #9 Koger Executive Center, Room 208 Norfolk, Virginia 23502
WISCONSIN	- Barron County Nutrition Program Barron County Court House Barron, Wisconsin 54812
PUERTO RICO	- Senior Citizens Center La Milagross Dept. of Social Services Cerro Las Mesas, Puerto Rico
VIRGIN ISLANDS	- Nutrition Program for the Elderly Box 5 Virgin Islands
WYOMING	- Wind River Project

* NOTE

1. The following States declined to identify a single Title VII project or the best project in the State.

IDAHO

OREGON

WASHINGTON

ALASKA

GEORGIA

WEST VIRGINIA

DISTRICT OF COLUMBIA

MINNESOTA

ILLINOIS

INDIANA

COLORADO

2. The identification of the best Title VII projects in the following States has not been received by Administration on Aging as of this date (6/14/74). When they are received, they will be forwarded to the committee.

PENNSYLVANIA

MICHIGAN

GUAM

AMERICAN SAMOA

TRUST TERRITORY

93D CONGRESS 2d Session } HOUSE OF REPRESENTATIVES { REPORT No. 93-914

NUTRITION PROGRAM FOR THE ELDERLY

MARCH 18, 1974.—Committed to the Committee of the Whole House on the State of the Union and ordered to be printed

Mr. PERKINS, from the Committee on Education and Labor, submitted the following

REPORT

[To accompany H.R. 11105]

The Committee on Education and Labor, to whom was referred the bill (H.R. 11105) to amend title VII of the Older Americans Act relating to the nutrition program for the elderly to provide authorization of appropriations, and for other purposes, having considered the same, report favorably thereon with an amendment and recommend that the bill as amended do pass.

The amendment is as follows:

Strike out all after the enacting clause and insert in lieu thereof the following:

That the first sentence of section 708 of the Older Americans Act is amended by striking out the word "and" before "$150,000,000" and by inserting before the period a comma and the following: "$150,000,000 for the fiscal year ending June 30, 1975, $200,000,000 for the fiscal year ending June 3, 1976, and $250,000,000 for the fiscal year ending June 30, 1977".

BACKGROUND

In 1972 Congress approved and the President signed, P.L. 92-258 which added a new Title VII to the Older Americans Act of 1965 to authorize a nutrition program for older Americans.

The program is designed to provide Americans aged 60 and older, particularly the needy, with one hot, nutritious meal a day, five days a week, principally in accessible community centers.

In addition to promoting better health among the elderly by improving their diet, the nutrition program is aimed at reducing the isolation of old age and making it possible for older Americans to meet with other citizens of similar interests on a day-to-day basis.

Further, the programs also provide an opportunity for citizens to meet in community centers so that in addition to the nutritional services for which Title VII is primarily designed, they may take advantage of recreation, health, and other social services.

Comprehensive Older Americans Services Amendments of 1973

Enactment of the Comprehensive Older Americans Services Amendments of 1973 (P.L. 93–29) further modified Title VII by:

allowing donation of surplus food commodities to programs funded under the Act;

encouraging the coordination of nutrition projects as part of the comprehensive service projects funded under Title III of the Older Americans Act;

forbidding the use of funds under Title VII for administrative expenses of projects after Fiscal Year 1973.

Appropriations History

Public Law 92–258 authorized appropriations of $100 million in Fiscal 1973, and $150 million in Fiscal 1974, for carrying out the purposes of Title VII.

The President's Fiscal 1973 budget request of $100 million was included in both the 1973 Labor-HEW Appropriations Bill as well as in the First Supplemental Appropriations measure, both of which were vetoed.

A subsequent supplemental appropriations measure passed the House and the Senate on June 29, 1973, and was signed into law on July 1 and included the $100 million in nutrition program funds, as well as a provision making them available until December 31, 1973.

For Fiscal Year 1974, the President requested $99.6 million for Title VII nutrition programs and Congress appropriated $104.8 million.

Accomplishments Under Title VII

Although hampered by delays in Fiscal 1973 funding, the Administration on Aging has already been able to report progress with respect to the nutrition programs funded under Title VII.

Although Fiscal 1973 funds did not become available until July 1, 1973, the Administration on Aging by July 27 had already allotted the $99.6 million appropriated to each of the several states.

By December 31, 1973, each of the states completed the allocation of its share of the $99.6 million to 665 nutrition projects across the country.

The Committee is pleased in this regard to be able to commend the officials of the Administration on Aging, including most particularly former Commissioner on Aging John B. Martin, for their foresight in preparing plans for the implementation of nutrition programs as soon as Congressionally approved funds became available.

By February 1, 1974, the Administration on Aging's weekly report demonstrated that 80,979 meals are being served each day to Americans aged 60 and over.

And, by March 31, the distinguished present Commissioner on Aging, Arthur Flemming told the Committee that 199,529 meals will be served daily, and that figure will increase by the end of Fiscal Year 1974 to 212,000 meals served each day.

Further, the Administration on Aging's statistics indicate that 70% of the meals served are directed toward persons below the Census

Bureau's poverty threshold, and that 30,285, or 37% of the recipients are members of minority groups.

Supportive Services

The Committee is pleased to note the progress made in carrying out the intent of Congress that meals be provided to as many of the elderly as possible, and, in particular, the needy elderly.

But the Committee notes also that in pursuing the worthwhile goal of making meals available to older people as quickly as possible the Administration on Aging has felt it necessary to suspend, for the first quarter of calendar year 1974, the requirement that quarterly reports be submitted on all aspects of the nutrition program.

And the Committee is further distressed to note that the Administration on Aging suspended for 90 days the requirements that supportive services, such as personnel training, be available before projects start. In addition, upon the recommendation of the State, and with the approval of the Commissioner on Aging, the supporting services requirement may be suspended for another 90 days.

The Committee realizes that these exceptions to the normal requirements have been prompted by the worthy desire of serving meals to the elderly as quickly as possible.

But the Committee must express its deep concern that such practices not continue in the future.

For the nutrition program for the elderly is not merely a program designed to feed as many of the elderly as possible. The supportive services required by the authorizing legislation are absolutely integral to the provision of quality services under the supervision of well-trained staff.

Inflation

The Committee is distressed to note as well that inflation has had a severe impact on the nutrition for the elderly program.

For although the Administration early in 1973 estimated that the appropriation for Fiscal 1974 ($99.6 million) would provide sufficient funds for 250,000 meals each day, the latest estimates indicate a 16% decrease in the number of meals that will be served to a new total of 212,000.

There is little evidence that inflation will not continue to restrict the number of meals which can be served under the program.

Indeed, John T. Dunlop, Director of the Cost of Living Council, told the House Banking and Currency Committee on March 6, 1974:

> The inflation in the prices of primary commodities in 1973-74 has been worldwide, unexpected, and beyond the range of previous experience.

And, continued Dr. Dunlop:

> The cash price of No. 1 Hard Red Winter Wheat at Kansas City on February 25, 1974 was $6.19 a bushel, the highest price recorded. Prior to 1972, the highest price was $2.97 in December 1947. . . . Thus, the full range of primary commodities—feed grains, fibers, metals, and energy—have reflected a virulent price inflation this past year.

On the basis of the anticipated continued sharp increases in food stuffs, therefore, several witnesses urged the Committee to raise the authorizations above the levels authorized in H.R. 11105 as originally introduced.

Energy Crisis

The Committee wants to express as well its grave concern that the current energy crisis, and, in particular, server shortages of gasoline in several areas of the nation, will seriously damage the nutrition program.

The Committee notes in this regard the testimony of Harry Walker, Executive Director of the Maryland Commission on Aging and Director of the National Association of State Directors on Aging, who told the Committee that gasoline shortages are having a profound impact on the ability of volunteers to bring elderly citizens to the nutrition centers or to bring food to the houses of elderly shut-ins.

Indeed, one local Maryland nutrition center director told the Committee that gasoline shortages forced the closing of several centers during the latter days of February.

The Committee notes also with respect to the energy crisis that an undated press release from the Department of Health, Education, and Welfare, along with an accompanying paper entitled "Impact of Energy Shortages on Health", give further evidence of the importance of sound nutrition for the elderly.

The press release quotes the Honorable Caspar Weinberger, Secretary of Health, Education, and Welfare, citing medical evidence indicating that even a 10 degree decrease in room temperature has little effect on health.

But, the release continues, Dr. Charles C. Edwards, Assistant Secretary for Health warned that:

> The elderly have a slower adaptation time than young adults to shifts in temperature and many older individuals will take a month or longer to become accustomed to a 10 degree temperature reduction.

The accompanying paper indicates:

> The major nutritional effects on vulnerable groups will be secondary health effects due to restrictions in transport, unemployment, inflated prices, and agricultural shortfalls.

The paper cites several groups, including the elderly as constituting "the most vulnerable nutritional groups," and goes on to note:

> Nutritional effects of sustained energy shortages will be of major clinical importance.

Concluded the paper:

> Inflation, a fixed income, poor diet and lack of transportation to essential services pose a far greater threat to the elderly at home than a gradual 10 degree reduction in room temperature.

The Committee, therefore, wishes to reiterate its grave concern over the implications of the energy crisis as it might affect both the operation of the nutrition program for the elderly and their general health and well-being.

And the Committee urges the Commissioner on Aging and the Secretary of the Department of Health, Education, and Welfare, to consult immediately with officials responsible for energy policy and oil and gasoline allocations to minimize, to the extent possible, the deleterious impact of the energy crisis on America's 20 million citizens aged 65 and over.

Testimony In Support of the Measure

On October 25, 1973, H.R. 11105, a bill to extend the nutrition program for the elderly for three years, was introduced.

Two days of hearings before the Select Subcommittee on Education provided overwhelming evidence of the support of the Administration, public officials, as well as groups representing the elderly, for extension of the nutrition program.

Said John B. Martin, former Commissioner of the Administration on Aging and presently a Consultant with the National Retired Teachers Association and the American Association of Retired Persons:

> We feel that every effort should be made to continue development of the Nutrition Program as a multi-faceted program in which food is the essential element binding the program together but enriched by other services which will make it more than a place to eat and run.

And, he concluded:

> In summary, we believe (1) that prompt passage of legislation providing increased authorizations for a three-year period is desirable and necessary, (2) that the quality of the program will be determined by the supportive services offered as well as by the number of meals served and should continue to be emphasized, (3) that every effort will be made to train project directors before initiating projects, (4) that in-depth reporting under the NIS reporting system will be fully implemented, and (5) that other substantive changes in present legislation beyond renewal and increase of authorization should not be made at this time.

Mr. Martin also urged that the funding levels of H.R. 11105 be increased from the amounts authorized in the bill, as introduced, to $200 million for Fiscal Year 1976 and $250 million for Fiscal Year 1977.

Administration Support

Mr. Martin also provided for the hearing record a letter, dated April 20, 1973, which he received from the Honorable Caspar Weinberger, Secretary of the Department of Health, Education and Welfare.

Said Secretary Weinberger:

> In regard to your concern about the future of the Nutrition Program, I would like to reassure you that the Administration would, under no circumstances, start such a substantial program and then propose to let it lapse. . . .

Said Commissioner Arthur S. Flemming to the Committee:

> Mr. Chairman, we look forward to the opportunity of working with the Congress, the states and other public and private bodies in continuing to implement a program which is capable of replacing despair with hope in the lives of many older persons.

And in response to a question suggesting that possibly as many as 8 million senior citizens could benefit from the nutrition program, Commissioner Flemming responded:

> There is no question at all in my mind but that we have simply started to deal with this need.

And Dr. Bruce Quint, Executive Director of Senior Centers of Dade County, Inc., Miami, Florida, told the Committee:

> This program is designed to bring elderly persons out of their houses and into a congregate setting so that they are exposed to other senior citizens. It permits them to be exposed to a wide variety of other social services so that the quality of their lives might be uplifted.
>
> Getting an individual to eat a good meal in a congenial social setting and exposing him to other activities such as casework, health services, recreation and leisure time activities, adult education, etc., can appreciably alter their lives.
>
> Title VII permits us to do just this for our center members.

Administration Position

Although voicing the Administration's support for extending the nutrition program for the elderly, Commissioner Flemming added that the Administration preferred to see the legislation extended for only one year.

Said Dr. Flemming:

> If the authorization is extended for one year, as the Administration recommends, it means that we will be in the middle of the second year of operation when the issue again comes before the Congress.

This would be an opportune time for evaluation.

The Committee was not, however, impressed with this line of reasoning.

For had the program been properly and promptly funded in Fiscal 1973, it would now be in the second year of its operation.

A one-year extension in the Committee's estimation would only continue the instability which has characterized the nutrition program for the elderly since it was enacted into law.

Dr. Flemming also added that a one-year extension would give Congress the opportunity to evaluate extending Title VII at the same time it was considering extending the other programs funded under the Older Americans Act.

And although the Committee found this argument appealing, it noted, as well, the testimony of former Commissioner Martin who testified that a one-year extension alone would convince state and local public officials that the Federal government did not plan in the long run to continue to support the nutrition program.

Said Mr. Martin:

> One of the reasons for early delay in setting this program in motion has been an unwillingness to commit local funds and effort until the Federal program was funded and ready to move.

And, he continued:

> Local officials have been burned in the past by the unrealized promise of Federal largesse. They are cautious also about entering programs where they fear that they may be left holding the bag for an entire program on which their original commitment was limited and for which the Federal commitment has been subsequently withdrawn.

Concluded Mr. Martin:

> If the present program is extended for one year only, it will greatly strengthen the belief that the program will shortly be phased out and left to local initiative. It is important, therefore, that the authorization be renewed for a three-year period. . . .

The Committee shares the views of Mr. Martin. For given the difficult history of the nutrition program, it might well prove disastrous to its development if local officials interpreted a single one-year extension as evidence of ambivalence on the part of the Federal government toward nutrition programs for the elderly.

Committee Action

On October 25, 1973, H.R. 11105, a bill to extend the nutrition program for the elderly for three years was introduced.

Ultimately, over 140 Members on both sides of the aisle joined in sponsoring companion legislation.

H.R. 11105 authorized $150 million for Fiscal 1975; $175 million for Fiscal 1976; and $200 million for Fiscal 1977 for the programs supported under Title VII.

On February 13 and 14 the Select Subcommittee on Education of the Committee on Education and Labor held hearings on H.R. 11105 and related measures.

The testimony was not only overwhelmingly in favor of extending the nutrition program for the elderly, but also in favor of increasing the amounts authorized to be appropriated.

On February 20 the Select Education Subcommittee amended the bill to authorize appropriations of $150 million for Fiscal Year 1975, $200 million for Fiscal 1976, and $250 million for Fiscal 1977, and reported the bill, as amended, by a unanimous voice vote.

On March 7 the Committee on Education and Labor ordered H.R. 11105, as amended, reported by voice vote.

Cost

In accordance with clause 7 of House Rule 13, the Committee estimates the costs which would be incurred in carrying out H.R. 11105 as follows:

Fiscal 1975—$150 million
Fiscal 1976—$200 million
Fiscal 1977—$250 million

Changes in Existing Law Made by the Bill, As Reported

In compliance with clause 3 of the rule XIII of the Rules of the House of Representatives, changes in existing law made by the bill, as reported, are shown as follows (existing law proposed to be omitted is enclosed in black brackets, new matter is printed in italics, existing law in which no change is proposed is shown in roman):

Section 708 of the Older Americans Act

APPROPRIATIONS AUTHORIZED

Sec. 708. For the purpose of carrying out the provisions of this title there are hereby authorized to be appropriated $100,000,000 for the fiscal year ending June 30, 1973, [and] $150,000,000 for the fiscal year ending June 30, 1974, $150,000,000 for the fiscal year ending June 30, 1975, $200,000,000 for the fiscal year ending June 30, 1976, and $250,000,000 for the fiscal year ending June 30, 1977. In addition, there are hereby authorized to be appropriated for such fiscal years, as part of the appropriations for salaries and expenses for the Administration on Aging, such sums as Congress may determine to be necessary to carry out the provisions of this title. Sums appropriated pursuant to this section which are not obligated and expended prior to the beginning of the fiscal year succeeding the fiscal year for which such funds were appropriated shall remain available for obligation and expenditure during such succeeding fiscal year.

Calendar No. 902

93D CONGRESS 2d Session } SENATE { REPORT No. 93–932

OLDER AMERICANS ACT AMENDMENTS, 1974

JUNE 13, 1974.—Ordered to be printed

Mr. EAGLETON, from the Committee on Labor and Public Welfare, submitted the following

REPORT

together with

SUPPLEMENTAL VIEWS

[To accompany H.R. 11105]

The Committee on Labor and Public Welfare, to which was referred the bill (H.R. 11105). To amend Title VII of the Older Americans Act relating to the nutrition program for the elderly to provide authorization of appropriations, and for other purposes having considered the same, reports favorably thereon with amendments and recommends that the bill (as amended) do pass.

SUMMARY

H.R. 11105 extends the nutrition program authorized by Title VII of the Older Americans Act of 1965 for an additional three years with authorizations of $150,000,000 for Fiscal Year 1975, $200,000,000 for Fiscal Year 1976, and $250,000,000 for Fiscal Year 1977.

The bill also restricts the Commissioner on Aging from delegating functions assigned him under the Act to officials not directly responsible to him.

The bill authorizes $35,000,000 for a new transportation program to be operated under Title III of the Older Americans Act.

Lastly, the bill imposes restrictions on the establishment of local share requirements for the Retired Senior Volunteer Program (RSVP) conducted by the ACTION agency.

Committee Amendment

The following is the text of the committee Amendment.

Sec. 2. (a) Section 201(a) of the Older Americans Act (42 U.S.C. 3011) is amended by striking out everything in such section that follows the word "Commissioner" the second time it appears in the fourth sentence of such section and inserting in lieu thereof a period.

(b) Any delegation of the functions of the Commissioner on Aging in effect on the date of enactment of this Act, issued pursuant to section 201(a) of such Act, shall be modified by the Commissioner to comply with the provisions of the amendment made by this section.

Sec. 3. Title III of the Older Americans Act of 1965 (42 U.S.C. 3021ff.) is amended by adding the following new section:

"TRANSPORTATION PROJECTS

"Sec. 309. (a) There are authorized to be appropriated $35,000,000 for the fiscal year ending June 30, 1975, to carry out the purposes of this section. From sums appropriated under this section, the Commissioner is authorized to make grants to each State having a State plan approved under section 305 for the purpose of paying up to 75 per centum of the costs of meeting the transportation needs of older persons, with special emphasis on providing supportive transportation in connection with nutrition projects operated pursuant to title VII of this Act. Sums appropriated under this section shall be allotted to the States in accordance with the allotment formula contained in section 303.

"(b) The allotment to a State under this section shall remain available until December 31, 1975, for grants and contracts to area agencies on aging, organized under section 305(b), or to other public or nonprofit private agencies that the State agency determines have the capacity to meet the transportation needs of older persons and to provide supportive transportation services in connection with nutrition projects operated under title VII. In making grants and contracts under this section, State agencies shall give priority to applicants proposing to serve areas in which there is no public transportation or in which existing public transportation is inadequate to meet the special needs of older persons.

"(c) Within ninety days following the enactment of legislation appropriating funds as authorized by this section, the Commissioner shall issue final regulations for implementation of the program herein authorized.

"(d) The Commissioner is authorized and directed to request the technical assistance and cooperation of the Secretary of Transportation and such other departments and agencies of the Federal Government as may be appropriate for the proper and effective administration of this section.".

Sec. 4. Section 201(a) of Public Law 93–113 (87 Stat. 401, October 1, 1973) is amended by inserting at the end thereof the following new sentence after clause (4): "In no

event shall the required proportion of the local contribution (including in-kind contributions) for any new grant or contract be more than 10 per centum, nor shall the proportion of such contribution for any renewal of any existing grant or contract be increased by more than 50 per centum over the proportion of such contribution required in the preceding such grant or contract, nor shall any such required contribution in any case be more than 40 per centum of the total cost of any such grant or contract.".

Background

The national nutrition program for older Americans has its roots in a number of pilot programs begun in 1968 under Title IV of the Older Americans Act in accordance with a congressional directive. These programs convincingly demonstrated that there was a very real need for such a program, both in improving the nutrition of the participants as well as in engaging them in a process of socialization—drawing them out of the isolation in which so many elderly persons confine themselves—and putting them in touch with ancillary services, such as health, recreational, and social services.

A permanent program, based on the pilot projects, was enacted by Congress and was signed into law by the President on March 22, 1972. This legislation authorized funds to be allotted to the States by the Federal Administration on Aging for the establishment of sites at central, accessible locations at which persons aged 60 or older, and their spouses, could receive one hot, nutritious meal per day, at least five days a week. Projects were also authorized to provide necessary transportation for participants and to furnish home-delivered meals to eligible individuals who are homebound.

Funds were authorized to be appropriated for fiscal years 1973 and 1974. Unfortunately, President Nixon's vetoes of bills appropriating funds for the new program prevented its actually getting underway in Fiscal Year 1973, as anticipated by the legislation. Funds were finally appropriated in the amount of $100 million at the end of Fiscal Year 1973, to be available until December 31, 1973. For Fiscal Year 1974, $104.8 million was appropriated.

ACCOMPLISHMENTS UNDER TITLE VII

The funding delay resulting from Presidential vetoes created severe handicaps for the program, which are still manifest. Potential State and local recipients of grants under the nutrition legislation were understandably unwilling to commit themselves and their local resources until they saw the Federal government match glowing promises with hard money. Hence, despite the long lead time between passage of the authorizing legislation in March, 1972, and the allocation of the first funds to the States on July 27, 1973, little preparatory work was done at the State and local level during this period.

The funds thus allocated were available to the States for making grants to local nutrition projects only until December 31, 1973. There began a rather chaotic scramble to prepare and submit plans by the States to the Administration on Aging and by project applicants to

the States. Sites had to be found, staff employed, arrangements made for food preparation, outreach begun, and a host of other details attended to.

In view of these growing pains, it is perhaps surprising that very substantial progress has been made. By May 1974, 664 nutrition projects were serving 188,253 meals daily at 4,714 meal sites. Four hundred fifth-one of the nutrition projects were located in urban settings and 213 were in rural settings. Eighty-eight percent of the meals were served in congregate settings; 12 percent were home-delivered.

The Administration on Aging has placed major emphasis on the awarding of grants to projects that will serve low-income individuals and members of minority groups. The States reported in May 1974, that the average number of daily meals being served to persons below the Census Bureau's poverty threshold was 120,715, or approximately 66% of the total. The average number of daily meals being served to members of minority groups was 61,311, or approximately 34% of the total.

The States have estimated that they will be serving 212,000 meals a day when all projects are fully operational, and it is anticipated that they will reach this goal during June of 1974.

SOME PROBLEMS AND SOME COMMENTS

As might be expected, along with the nutrition program's accomplishments, a number of problems in the program have been called to the committee's attention. The most recurring complaint has to do with the need for more transportation services in connection with Title VII projects and the committee has sought to meet this need by amending the bill, as discussed hereinafter. The committee was also concerned with the proposed delegation of the Commissioner on Aging's authority to the ten Regional Directors for the Department of Health, Education, and Welfare. That, too, has been dealt with in an amendment discussed at a later point.

There were other problems raised and considered by the committee that ultimately were not embodied in this legislation because of a feeling on the part of the committee that somewhat more experience with the Title VII program is required before it can be determined just what additional amendments may be necessary. Moreover, some of these matters can be adjusted administratively. Finally, the compelling need to enact new legislation in time for the program to be included in the regular Fiscal Year 1975 appropriations legislation dictated that extensive changes in Title VII not be made, lest the bill be caught up in controversy.

On these various issues, the committee has the following comments:

(1) *Supportive Services*—Regulations issued by the Administration on Aging for implementing Title VII provide that no more than 20% of nutrition funds may be spent for supportive services, the balance to be used solely for providing meals. This emphasis on serving food undoubtedly has been of value in getting participants enrolled and the program underway—it establishes sharply focused and relatively easily measurable goals at a time when greater complexity could overburden the developing program.

Nevertheless, a time must come when the program begins to stress socialization and related services, else it becomes little more than a

soup kitchen. The committee has no desire to impose a hard and fast rule on this subject, but suggests that the Administration on Aging consider permitting greater flexibility in the use of funds for supportive services. In some areas, it may be that a project is useless unless transportation is provided for substantial numbers of participants at a cost that cannot be met with only 20% of the project's funds (although this problem could be alleviated by enactment and funding of the special transportation program that would be established by this bill). The need for services other than transportation may be paramount in other areas and may require a greater share of funds than 20%.

In short, the committee suggests that consideration be given to modifying the 20% supportive services regulation to take into account particular circumstances where a different level can be justified.

(2) *Home-delivered meals.*—The guidelines contained in the manual issued by the Administration on Aging to nutrition project operators "suggest" that home-delivered meals be limited to 10% of the total number of meals served. While AoA maintains that this "suggestion" is not binding on local project operators, the committee has found the belief to be widespread that such a 10% limitation is an absolute requirement.

It may well be that 10% limitation is reasonable in most cases—given the socialization values inherent in congregate dining—but the local projects ought to be clearly informed that they may depart from that standard to meet particular local needs.

(3) *State administrative funds*—As originally enacted, Title VII permitted each State agency on aging to withhold up to 10% of the State grant for payment of the costs of administering the program at the State level. The provision was repealed by the Older Americans Comprehensive Services Amendments of 1973 (PL 93–29), and funds for State administration of all older Americans programs were consolidated into one section—Sec. 306.

The consolidation of State administrative funds was to be effective following the fiscal year ending June 30, 1973 (Fiscal Year 1973); however, because the Title VII program is "forward-funded" (i.e., funds appropriated in one fiscal year are not actually used until the following fiscal year), this consolidation will actually take effect on July 1, 1974, the beginning of Fiscal Year 1975. As this date approaches, the directors of State aging agencies have become increasingly concerned about the adequacy of funds available to them for administration of Older Americans Act programs.

The committee has given careful consideration to this potential problem. However, it has determined that the available information with respect to State administrative funding needs is too sketchy to permit an informed judgment to be made on the precise levels at which such funding should be set. It may well be that additional funds should be made available under Sec. 306 for this purpose or that State agencies be allowed to withhold some percentage of the funds allotted to them. As of now though, the committee is not able to make that determination.

There are three factors that strongly influenced the committee's decision to refrain from acting now on this matter:

(a) All of the Older Americans Act titles, apart from Title VII, will be reviewed by Congress during the first part of 1975, since

these programs expire June 30, 1975. It should be possible to acquire the necessary information regarding appropriate levels for funding the Federal share of State administrative costs before that time.

(b) The President's budget for Fiscal Year 1975 calls for an additional $3 million (for a total of $15 million) to be allotted to the States to meet State administrative costs. While most of the States will benefit from this increase, there are some small States now receiving only the minimum allotment of $160,000 under the formula contained in Sec. 306 that will not be affected by this increase in funding. Again, Congress will have an opportunity next year to reconsider the equities in this formula in the light of more than two years' experience with it.

(c) A number of State agencies have obtained additional State funds to pay some of the costs of their operations. To the extent that other agencies are experiencing a shortage of administrative money, the committee believes that efforts should be made to seek additional non-federal funds. This is not to say that the Federal government should renege on its commitment to provide assistance in paying such costs as they relate to federally-funded programs; in fact, substantial Federal contributions to State agency operations are being made, as noted above. But the prospect of Federal funds should not serve as a disincentive to obtaining additional support from State and local governments.

(4) *Forward funding*—Because of the delay in initially funding Title VII resulting from Presidential vetoes, a system of forward funding has evolved. Money appropriated in an appropriations bill for a given fiscal year has actually been carried over for use in the following fiscal year.

Given the uncertainties inherent in the appropriations process, forward funding can lend stability to a program as State and local agencies know well in advance what they can expect in the way of Federal funding for the coming year. Forward funding has long been sought for many programs particularly in the field of education.

Witnesses who testified on this legislation called attention to one potential problem with forward funding as applied to Older Americans Act programs. If an increase in appropriations should be provided for such programs, it is unrealistic to wait until the following year to make this increase available to the States. Thus, if a bill appropriating funds for Fiscal Year 1975 were to be enacted with a 50 percent increase for Title VII, those additional funds should be put to work immediately providing services for older persons, rather than delaying their use until Fiscal Year 1976.

(5) *Indian tribal funds*—The committee received statements expressing concern over administrative rulings on the use of Indian tribal funds to meet non-federal share requirements for Title VII programs conducted on reservations. There is some fear that such funds will be held to be Federal funds—since they are held in trust for the tribes by the Federal government—and thus be ineligible for use as non-federal share.

There is no indication that any such ruling has in fact been made so the committee did not feel it necessary to include particular language in the bill dealing with this matter. However, if there hould be any

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proposed action in the future on the part of the Administration that would disallow the use of Indian tribal funds in Older Americans Act programs, the committee expects to be informed in ample time to consider such remedial legislative action as it may deem to be warranted.

Further, it should be stressed that Indians are among the target groups specially identified and given preference in awarding grants under Title VII. States failing to meet these requirements of the law with respect to Indians and other minority and limited English-speaking eligible individuals are subject to having Federal payments suspended for failure of compliance.

(6) *Facilities*—During the Committee's hearings it was determined that senior citizen nutrition programs which utilized the school lunch facilities were able to provide nutritious meals at a very low price per meal. The cost of such meals is often between one and two dollars less per meal than those obtained from various other sources. In a program that seeks to get the maximum number of meals from limited resources, it would appear to be only prudent for the Administration on Aging to make every effort possible to maximize utilization of existing school lunch facilities. In addition, coordination with the school lunch programs would give the Title VII Nutrition Program their best opportunity to effectively use the U.S.D.A. Food Commodity Program. By joining with the school lunch program, the Title VII Nutrition Program could maximize bulk purchasing power thus reducing the cost per meal and expanding greatly the number of meals served each day.

(7) *Use of School Buses*—Throughout the hearings on H.R. 11105, the need to provide additional transportation support services was repeatedly stressed. This was not a particularly surprising development in light of the heavy emphasis placed on transportation needs by the senior citizens who served as delegates to the 1971 White House Conference on Aging. As described elsewhere in this report, the Committee created a new program within Title III that should help to meet some of the pressing transportation needs related to the Title III and Title VII programs.

In this connection, the Committee is interested in having A.O.A., the Department of Transportation, and other Federal agencies explore the possibility of using school buses to meet some of the transportation needs of senior citizens. We are aware of the fact that State and local laws as well as problems related to insurance, make the use of school buses for reasons other than the transportation of school children difficult. We do not believe, however, that such problems are insurmountable and we would hope that every effort will be made to utilize this resource for the use of older Americans.

Authorization of Appropriations

The committee has accepted the House bill with respect to extension of the Title VII programs for three years and the authorization of appropriations in the amount of $150,000,000 for Fiscal Year 1975, $200,000,000 for Fiscal Year 1976, and $250,000,000 for Fiscal Year 1977. The committee concurs in the judgment of the House of Representatives that a three-year authorization of appropriations is war-

ranted—rather than the one-year extension sought by the Administration—in order to assure program operators and recipients of services of a strong congressional commitment to the continuation of the Title VII program. In view of the delays and difficulties involved in getting this program started, any commitment of less than three years would so diminish confidence in the program as to imperil its existence.

The committee also agrees with the authorization levels established by the House of Representatives. Indeed, if anything it may be said that these levels are conservative given the dual impact on the program of inflation and increased demand.

It was originally estimated that an annual appropriation level of $100,000,000 would enable 250,000 meals to be served each day. The latest estimates are that that sum will only permit the serving of 212,000 meals daily. The principal cause of the reduction has been the escalating cost of food and other project expenses. Moreover, other costs, including those relating to energy problems, have taken their toll. Many nutrition projects rely heavily on volunteer services, especially for transportation of participants and delivery of meals to the homebound. Increasingly, volunteers are loathe to participate as the cost of fuel goes up.

The committee heard testimony indicating that in many areas demand for services under the Title VII program far exceeds available slots for participants. The program can therefor easily accommodate the increased appropriations authorized by this bill.

Committee Amendments

DELEGATION OF COMMISSIONER'S FUNCTIONS

Sec. 201(a) of the Older Americans Act assigns responsibility for carrying out the Act to the Administration on Aging, which is headed by the Commissioner on Aging. The Secretary of the Department of Health, Education, and Welfare is authorized to permit the delegation of the Commissioner's functions to officials not directly responsible to the Commissioner so long as the Secretary submits a plan for such delegation to Congress. The delegation becomes effective following sixty days of continuous session after submission of the plan to Congress. The committee amendment to H.R. 11105 repeals the Secretary's authority with respect to such delegation and has the effect of requiring that the functions of the Commissioner be carried out only by him or by officials directly responsible to him.

For some time the Secretary has been seeking to implement a plan for delegating certain responsibilities for aging programs from the Commissioner on Aging—to whom they are assigned by law—to the HEW Regional Directors in the ten Federal regions. A plan for such a delegation was submitted to Congress on November 5, 1973, but was subsequently revoked by the Secretary, apparently because Congress adjourned prior to expiration of the statutorily-required sixty-day notice period. Thereafter, on March 26, 1974, another plan for delegation from the Commissioner to the Regional Directors was submitted to Congress by the Secretary. If this delegation should be in effect when this bill is enacted, the committee amendment would

require the Commissioner to modify the delegation so that none of his functions are delegated except to officers directly responsible to him.

The advantages purportedly accruing from the proposed delegation, as perceived by the Secretary, are stated in his letter to Congress setting forth the delegation plan, as follows:

> This delegation is designed to strengthen the position of the program for the elderly in the Regional Offices of the Department. Both the Commissioner, Arthur S. Flemming, and I would like to see the Regional Directors play a leading role in working with the States in the field of aging. The strength and authority of the Regional Directors can best be brought to bear in the interests of the elderly of the country if the Regional Directors have specific authorities to act under the newly expanded programs of assistance to States and localities under the Older Americans Act. Further, specific authorities to act in the area of aging will permit them to coordinate the aging program with other Department programs which serve the elderly and other vulnerable groups in our society.

Even if it were conceded, for purposes of discussion, that the proposed delegation will benefit the Older Americans Act programs as stated by Secretary Weinberger, the committee is convinced that the disadvantages far outweigh any such gains.

The realignment of the Administration on Aging within HEW that was accomplished by the Older Americans Comprehensive Services Amendments of 1973 was designed to deal with the problem described by an advisory body to the Senate Special Committee on Aging, as follows:

> . . . the AOA falls far short of being the Federal "focal point in aging" sought by Congress. Instead, its concerns are splintered and scattered; there are limited, if any, policies and few clear-cut goals. Recent reorganizations have not strengthened Federal programs and commitment in aging in any way. Rather, they have fragmented an already flawed and feeble agency still further. This situation has created chaos as well as a lack of direction in Federal and State programs.

By affirming the status of the Commissioner as the official responsible for carrying out programs authorized by the Act, and by seeking to enhance the status of the Administration on Aging with HEW, the Congress intended to remedy the fragmentation and lack of centralized purpose that was the case prior to 1973. It was expected that out of this would emerge a national policy for coordinating the delivery of services to the elderly, with responsibility for implementation of this policy to be clearly lodged in an official answerable to Congress.

The proposed delegation to HEW Regional Directors runs directly contrary to these goals of the 1973 legislation. It would again fragment responsibility. Rather than one national policy, we would surely find ten regional policies. And instead of one official clearly answerable to Congress for administration of programs under the Act, there will be a host of officials making decisions who are ultimately not directly

responsible to the Commissioner, regardless of all the guidelines and policies he may attempt to impose on them.

This is not to say that the program can only be operated out of Washington. The committee amendment does not affect the Commissioner's authority to delegate the performance of some of his functions to officers in the regions who are, *in fact*, directly responsible to him, with their actions subject to his review. We stress that the official to whom the Commissioner chooses to delegate a portion of his duties must actually be directly responsible to him; any effort to designate some official other than one who is a part of the Administration on Aging, or who is the Commissioner's counterpart on the regional level, would clearly be a subterfuge, not to be countenanced under the committee amendment.

The position taken by the committee on this amendment is consistent with prior action of the committee in connection with S. 1539, the Education Amendments of 1974, which was reported favorably on March 29, 1974. Indeed, the education bill bars the delegation of any new function to employees in regional offices after June 1, 1973. Thus, the education bill prohibits not only "regionalization" (concentration of program authority in regional directors), it also would not permit "decentralization" (delegation of authority to regional program officers).

This bill is not as limiting as the education bill, and the committee is willing to allow the Commissioner to continue administering the aging programs on a decentralized basis in the absence of any evidence that this practice has proved to be detrimental. But again we emphasize that those persons involved in administration of the aging programs on the regional level must *in fact* be directly responsible to the Commissioner on Aging.

Transportation Program

Throughout the hearings on this bill and in numerous communications to the committee, a common thread has been the need for additional transportation to enable eligible individuals to participate in the Title VII program. It has been suggested that a special program for transportation be set up as a part of Title VII. Presumably, such a program would be in addition to current provisions of Title VII (as implemented by regulation) which permits the expenditure of up to 20% of project funds for supportive services, including transportation.

Rather than establish a separate transportation program for Title VII that is not coordinated with other activities conducted under the Older Americans Act, the committee has added a new Sec. 309 to the Act authorizing the appropriation of $35,000,000 for transportation, with special emphasis on providing supportive transportation for Title VII projects. However, agencies that are funded under this provision would also be able to use this money to provide other transportation services for the elderly. Rather than devoting these sums entirely to providing the limited kinds of transportation needed to get participants to and from Title VII projects, grantees can integrate these services into a whole host of other activities.

Potential grantees under Sec. 309 can be area agencies on aging or other public or private, non-profit agencies. The maximum federal

share under this program has been set at 75%. It is anticipated that grants may be made to agencies that do not qualify for a 90% federal share under Title III since provision of transportation services is quite different from many of the other activities carried out by area agencies on aging and the most efficient method of delivering the service may be to operate without regard to area agency boundaries and under a direct grant from the State.

Section 309(d) authorizes and directs the Commissioner to request the technical assistance and cooperation of the Department of Transportation and other departments and agencies of the Federal government as may be appropriate for the proper and effective administration of supportive transportation services. The Committee expects the Department of Transportation to cooperate fully with the Administration on Aging in the discharge of its transportation responsibilities both from the standpoint of providing technical assistance and also, whenever possible, pooling its resources with the resources authorized under this Title in the interest of achieving the objectives of the Title.

The committee is pleased to note that the Administration on Aging has been making progress in its efforts to enlist the funds and technical knowledge of the Department of Transportation in meeting the transportation needs of the elderly.

Memorandum for: State Agencies Administering Plans Under Title III and Title VII of the Older Americans Act of 1965, As Amended.

Subject: Department of Transportation/Administration on Aging Working Agreement.

DoT and AoA have been working to develop joint program objectives for FY 1974 and FY 1975 to help assure older people that transportation, and particularly the transportation necessary to take advantage of needed services, is more readily available. Inadequate transportation has been identified as one of the major problems confronting older Americans. Many older people, due to limited financial resources or physical disabilities, are either unable to use or limited in their use of transportation, including private vehicles and mass transit systems. The purpose of the DoT/AoA joint effort is to assure maximum coordination and mutual support between the programs of the two agencies on behalf of the older population of the nation. As part of this overall effort, the Department of Transportation and its Urban Mass Transportation Administration have established the following joint objectives with AoA in the field and public and specialized urban transportation systems:

General Objective: To increase the mobility of senior citizens by improving their access to public and specialized transportation systems in urban areas.

UMTA Objective: To coordinate mass transportation services for the elderly and handicapped with existing transportation services and, where they exist, with local transit systems; as a special effort, to make capital grants and loans to private non-profit corporations and associations for the specific purpose of assisting them in meeting the special needs of elderly and handicapped persons for whom urban mass transportation services otherwise provided are unavailable, insufficient, or inappropriate.

AoA Objective: To utilize Title III and Title VII funds to support transportation services for the elderly as part of a coordinated comprehensive services delivery system. The State Agencies will identify other sources of funding for transportation, advise on planning and implementation of a project, and coordinate efforts with other agencies and organizations that are involved in planning, operating, and supporting transportation projects. Revenue sharing funds should also be sought in behalf of the elderly and handicapped.

The UMTA resources described under Public Law 93–87, Title III—Section 16(b) of the Urban Mass Transportation Act of 1964 must be used for capital costs. The expenditure of Title III and VII OAA funds should be limited to paying for the costs of operation.

Several UMTA resources, not identified just for the elderly, can be used appropriately to develop transportation systems: the capital grant program (Section 3) makes grants or loans to States and local public bodies and agencies to assist in the acquisition of suitable vehicles and facilities; the demonstration program (Section 6) provides financial assistance for individual projects to employ or test new services, methods or techniques; and the planning assistance program (Section 9) makes grants to States and local public bodies and agencies to study needs and suggest appropriate solutions.

(At this time there is no ongoing program within the DoT providing funds for public transportation in rural areas. However, under Section 147 of the Federal-Aid Highway Act of 1973 effective July 1, 1974, money has been requested from the Congress for FY '75 to carry out demonstration projects for public mass transportation in rural areas.)

These joint objectives support the mutual goals of DoT and AoA, and should help ensure cooperation and coordination at all levels between UMTA and AoA programs and projects.

Inquiries to: Regional Program Directors on Aging, Urban Mass Transportation Administration Representatives.

BENJAMIN O. DAVIS, JR.,
Assistant Secretary for Environment, Safety, and Consumer Affairs.

ARTHUR S. FLEMMING,
Commissioner on Aging.

FRANK HERRINGER,
Administrator, Urban Mass, Transportation Administration.

It is clear that no comprehensive long term solutions for transportation problems of older persons can be effected by an agency such as the Administration on Aging that is concerned with delivering a wide variety of services to the aging. Ultimately, the primary responsibility must lie with the Department of Transportation. The committee does not intend for Sec. 309 to detract from this responsibility in any way.

Retired Senior Volunteer Program Local-Share Schedule

In amending Section 201(a) of P.L. 93–113, the Domestic Volunteer Service Act of 1973, it is the intent of the Committee to establish reasonable guidelines for the Retired Senior Volunteer Program (R.S.V.P.) local-share requirements for grants and contracts by permitting substantial but not excessive increases in the local-share percentage from year to year but not more, ultimately, than a 40-percent share in any one year.

In a recent (December 7, 1973) national evaluation of R.S.V.P. prepared at the ACTION Agency's request by E. F. Shelly & Co., it was reported that:

> . . . the Retired Senior Volunteer Program is successfully meeting its basic objectives. Senior Volunteers are provided with a recognized role in the community and a meaningful life in retirement through specific Volunteer Service to fill their own needs and the needs of the community. An indication of this is the growth of the program and the enthusiasm of the participants.

R.S.V.P. is the largest volunteer program under the ACTION Agency with approximately 601 programs and 85,000 volunteers (over age 60). The program is now basically entering its 2nd and 3rd year of operation since the time that substantial funding was provided for it. For FY 1974 $15 million has been appropriated for the program, and $16 million is requested for FY 1975.

The Committee feels that the ACTION Agency has established administrative guidelines for funding R.S.V.P. programs that are excessively stringent and self-defeating. Although the law does not require an annual increase in local funding for R.S.V.P. projects, the basic R.S.V.P. funding policy has been to provide 90-percent Federal funding in the first year, with decreasing proportions of Federal funding in subsequent years. Considerable flexibility was provided for in terms of the amount of the increase from one year to the next. The minimum local share was supposed to be 20 percent for the 2d year with 10 percentage point increase increments thereafter.

On January 1, 1974, the ACTION Agency issued a new policy that requires R.S.V.P. projects to be funded at increasing local levels up to 65 percent in the fifth year and full local funding for the sixth year and thereafter. This policy was adopted without any substantial survey of R.S.V.P. program directors or sponsors or, indeed, of the Agency's own R.S.V.P. programmers. There was no data to support the assumption that local programs could raise as much as 35-percent support in the third year, let alone 50 percent in the fourth year, 65 percent in the fifth year, or 100 percent in the sixth year.

In fact, the one available study (submitted on December 7, 1973—immediately before the new schedule was announced) demonstrated the invalidity of any such assumption. This study by the E.F. Shelly Company, referred to above, gathered data from projects, sponsors, and ACTION Agency State Program Directors/Officers

from 40 R.S.V.P. programs throughout the country (chosen from 80 programs nationwide which had been in operation for at least one year by July 1, 1973). The study's data showed that two-thirds of the R.S.V.P. project directors and 10 of the 14 Program Directors/ Officers of the ACTION Agency itself said the funding schedule was not realistic; and that, of the 40 sponsors (grantees), only two felt it was definitley a realistic five-year plan, whereas the other 34 which answered felt the policy was unrealistic (12), or had strong reservations (7), or would be realistic only if there were program or project changes or if local governments *could be* sold on providing the increased support (15). (It is understood that the original draft of the Shelly Co. report was very critical of this new schedule but was toned down after the Agency reviewed that draft.)

The Special Subcommittee on Human Resources has been receiving numerous complaints from across the country about the new funding schedule since April 1 or so. Projects have been thrown into a state of confusion under the new funding policy, not knowing whether it is fair to accept new grants when they know they very likely can never meet the steeply escalating new local-share requirements.

The Subcommittee Chairman (Senator Cranston), in an effort to see if a more realistic and flexible policy could be developed, initiated numerous discussions and several meetings with the Agency. On May 17, 1974, the Agency, after having adopted the policy four and one-half months earlier, finally soufht out R.S.V.P. project sponsor opinion in a questionnaire, the results of which were due back on May 31, but which have not yet been forthcoming to the Subcommittee.

The new provision which the Committee proposes to add to Section 201(a) of Public Law 93–113 would establish guidelines for the amount by which the local share for R.S.V.P. grants and contracts could be required to be increased from one year to the next. Under the new provision, the first-year local share could be as much as 10 percent, the second year as much as 15 percent, the third year as much as 22.5 percent, the fourth year as much as 33.75 percent, and the fifth year as much as 40 percent (which is the maximum local share contribution permissible under the Committee amendment). In providing for this schedule, the Committee recognizes, in the case of ongoing programs which are already providing a 15, 20, or 30 percent local share, that the provision would *permit* increasing the local share *up to* 22.5 percent, 30 percent, and 40 percent, respectively for the following year for such programs.

The Committee strongly opposes any rigid, inflexible, arbitrary set of local-share regulations. It has designed the schedule in the Committee amendment to provide maximum but not minimum share-increase guidelines, and stresses that the Action Agency has discretion to require lesser local-share contributions than the maximum amounts permitted in the amendment.

The Committee believes the amendment provides a reasonable framework for a revised Agency policy. The Committee favors adoption of Agency guidelines, with percentage parameters to which considered exceptions may be made based on local economic variations and other needs.

Although supporting the goal of increasing local-share funding on a reasonable, phased basis, the Committee expects that firm local-share

guidelines will not be established for funding beyond the third year until after experience with third-year grant negotiations and program operation can be analyzed. The Committee is also cognizant that the maximum increases in the amendment may need to be reduced by law hereafter if adequate data indicate that the guidelines are injurious to the program. The R.S.V.P. appropriations authorization runs through FY 1976, so the program (and the amendment) would come up for review again in any case in some 18 months.

The Committee further expects the ACTION Agency to apply a liberal in-kind contribution policy in determining what is an acceptable local-share contribution. Traditionally, the Committee has believed that as part of health, education, and social services program policy, local sponsors should have substantial latitude in meeting their share from either cash or legitimate in-kind contributions.

Furthermore, no arbitrary limit should be imposed on the total *amount* of Federal funding for a project, nor on the increase in total Federal funds from one year to the next. Provision needs to be made in any funding guidelines for the expansion and growth of R.S.V.P. projects that show good results in meeting basic program objectives, and to support such growth both through increasing local contributions and, where indicated, through increasing Federal funds.

To supplement this agreement, the Urban Mass Transportation Administration of the Department of Transportation has indicated its intention to release approximately $15 million in July, 1974 to the States in order to help meet the transportation needs of the elderly and handicapped. The Committee believes that the objectives set forth in this agreement complement the priorities stipulated in Section 309, and that if carried out, these objectives will result in a more comprehensive and effective administration of Section 309. Therefore, the Committee does not intend Section 309 to nullify this, or any other pre-existing agreement regarding transportation for the elderly, that the Administration on Aging has with the Department of Transportation.

Administration Views

The following letter to the chairman from the Acting Secretary of HEW contains the views of the department on S. 2488, which is identical to Sec. 1 of H.R. 11105 except that the sums authorized to be appropriated are somewhat lower. It is our understanding that the comments of the Acting Secretary apply with equal force to Sec. 1 of the committee bill.

Department of Health, Education, and Welfare,
Washington, D.C., April 3, 1974.

Hon. Harrison A. Williams, Jr.,
Chairman, Committee on Labor and Public Welfare,
U.S. Senate, Washington, D.C.

Dear Mr. Chairman: This is in response to your request of October 1, 1973, for a report on S. 2488, a bill "To amend title VII of the Older Americans Act of 1965 relating to the nutrition program for the elderly to provide authorization of appropriations, and for other purposes."

The bill would provide for a three-year extension of the authorization for title VII of the Older Americans Act, as amended; and would authorize appropriations for such program in the sums of $150 million for fiscal year 1975; $175 million for fiscal year 1976; and $200 million for fiscal year 1977.

Title VII was passed by the Congress and signed into law by the President with the understanding, as set forth in the Senate Committee Report, that the authorization for this program "would be limited to two years (FY 1973 and FY 1974) so that the program could be evaluated at an early date with a view to the proper role of this program in any broader scheme that may be proposed hereafter." This statement was made in anticipation of Administration proposals for a more comprehensive approach to the provision of social services. Such proposals were submitted to the Congress in 1972 (the Allied Services Act, title III of the Older Americans Comprehensive Services Amendments) and in May of 1973 the President signed into law the Older Americans Comprehensive Services Amendments of 1973. As you know, title III of the Act provides for the development of comprehensive and coordinated service delivery programs at the State and sub-State levels. The title III program was authorized for the fiscal years 1973 through 1975.

The nutrition program should be fully implemented throughout the Nation by March 31, 1974, and all State and Area plans for FY 1974 should be approved by June 30, 1974. Thus, both programs will be starting up nearly at the same time. This situation will provide us with an opportunity to evaluate title VII and its relationship to the comprehensive and coordinated services delivery programs under title III (which relationship, you will recall, is specified in the law).

The Department transmitted on February 13, 1974, a proposal, introduced in the Senate as S. 3100, to extend the title VII program for one year, instead of three, as provided under S. 2488, in order that the Administration on Aging may gather strong quantifiable data on the effectiveness of the title VII program and of the programmatic relationships between title III and title VII. A one-year extension of the title VII program will synchronize the authorization periods of the two programs, which will rationalize the administration of the programs at the Federal and State levels.

We therefore recommend that S. 2488 not be favorably considered.

Since title VII is in its first year of operation, and because no data are now available to estimate the resources required to implement it satisfactorily, we feel there is no basis on which to arrive at authorization figures. We therefore proposed in our February 13 transmittal that "such sums as may be necessary" be authorized for the program. As operational experience and research findings yield quantifiable data on the resources required for the program we can then be in a position to make specific appropriation requests based on such data and our success in achieving the objectives of the program.

We are advised by the Office of Management and Budget that there is no objection to the presentation of this report and that enactment of S. 3100 would be consistent with the Administration's objectives.

Sincerely,

(S) FRANK C. CARLUCCI.
Acting Secretary.

The following letter to Senator Beall from Dr. Arthur S. Flemming, Commissioner on Aging, comments on the committee amendment contained in Sec. 2 of the bill with respect to delegation of the Commissioner's functions. No comments were received from the Department of HEW or from the ACTION agency with respect to the other committee amendments.

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE,
OFFICE OF THE SECRETARY
Washington, D.C., June 4, 1974.

Hon. J. GLENN BEALL, Jr.
U.S. Senate, Washington, D.C.

DEAR SENATOR BEALL: I am happy to share with you my views on the proposal to delegate authority to act for Titles III and VII of the Older Americans Act to the Regional Directors, as you requested in your recent letter.

After my confirmation by the Senate last June as Commissioner on Aging, one of the first issues I confronted was the proper relationship between the Administration on Aging and the Regional Offices of the Department of Health, Education, and Welfare. I reviewed the past history of the Agency, during which authority had been delegated to the Social and Rehabilitation Service Regional Commissioners, and concluded that one of the best ways to further one of the major objectives of the amendments to the Older Americans Act; namely, to better coordinate services and programs for older persons, would be to delegate certain authorities to act to Regional Directors within policy guidelines established by the Commissioner and subject to post audit by the Commissioner.

Based on my previous experience in the Department, it became clear to me that the Regional Director, as the Secretary's personal representative in each Region, was the only person who possessed the influence and authority to really affect coordination between HEW programs. Moreover, as HEW's top person in the Region, the Regional Director has the status to deal more effectively than any other Regional official with other Federal Departments and Agencies in the Region, and with the Governors and State governments. It seemed to me that if the Regional Directors were held accountable for the conduct of the aging programs in the regions it would elevate the status of aging programs in the regions and would strengthen in a significant manner the operations of the Regional Program Directors for Aging and their staffs.

Therefore, in August, I initiated discussions with persons in the Department about the possibility of my delegating authority to act for Titles III and VII to the Regional Directors. As you know, the result of these discussions was the submission by the Secretary on October 31, 1973 of a proposal to delegate authority to act for Titles III and VII to the Regional Directors.

I might add that as I became reacquainted with the Department and its personnel, I became increasingly impressed with the quality of the Regional Directors, and with their interest and involvement in the field of aging. They have been very helpful to me in a number of instances during the past year, and it is my belief that if I am allowed to delegate authority to act to them, they will provide us with effective leadership.

As I stated in my testimony before your Subcommittee recently however, I do not plan to delegate any of my *responsibilities* for the conduct of Titles III and VII. It is my firm conviction that when an official in the executive branch delegates authority to act—pursuant to policies, regulations, and guidelines issued by that person, and subject to post audit and revocation—he does not and cannot divest himself of responsibility which has been given him under the law. This philosophy is incorporated in the Secretary's March 26 letter to the Congress proposing delegations of authority to act for Titles III and VII to the Regional Directors.

If I am permitted to make these delegations it would be possible to review the whole matter when the next Congress considers the extension of the Older Americans Act, as amended. At that time I could provide the Congress with testimony based on experience.

Very sincerely and cordially yours,

ARTHUR S. FLEMMING,
Commissioner on Aging.

The Administration on Aging has provided the following statement with respect to its plans for implementation of Title VII in the coming year.

During FY 1975, the Administration on Aging plans to place emphasis on the following objectives related to implementation of the nutrition program:

1. *To develop an action program designed, in accordance with the policy set forth in Title VII, to make use of resources such as the Food and Nutrition Service of the Department of Agriculture and the Social Service titles of the Social Security Act, in order to broaden the base of the Title VII program.*

(*a*) Arthur Flemming, Commissioner on Aging, has established an Interdepartmental Task Force on Nutrition within the framework of the Cabinet-level Committee on Aging—a group which will be able to assist in developing an action program designed to contribute to the achievement of this objective.

(*b*) Guidelines are also being developed for the State Agencies on Aging designed to help them take the lead in coordinating the Title VII projects with other Federal and State resources that can be utilized in such a manner as to help meet the nutritional needs of older persons.

2. *To accelerate the development of the supporting services provided for in the budgets of the Title VII projects.*

(*a*) The States were authorized to use 20 percent of their allocations for this purpose.

(*b*) Once the serving of meals has started, no time will be lost in instituting the services called for in the project plans which were submitted to and approved by the State Agencies on Aging.

(*c*) Major emphasis will be placed on the initiation or strengthening of outreach programs.

(*d*) The Administration on Aging and the Department of Transportation have developed a joint agreement that will help to provide the transportation required by some persons if they are to participate in programs such as the Title VII program.

(*e*) The Administration on Aging will continue to pursue vigorously with the Federal Energy Administration the objective

of making sure that the transportation needs of participants in nutrition projects, and the transportation needs of volunteers serving the projects are recognized in working out policies for the use of gasoline.

3. *To develop an action program designed to coordinate with the nutrition projects resources in such areas as recreation, education, and health and welfare counseling, and referral services.*

In some instances, the expenditure of comparatively small sums of money under either Title III or Title VII can result in building bridges between the older person participating in nutrition projects and other services. In other instances, these bridges can be built without the expenditure of additional funds. For example, the State of Washington has developed an agreement with the Regional Medical Program in which the Regional Medical Program will perform on-site health screenings of Title VII participants, with no charge to the participant or the project.

4. *To continue and to strengthen training programs for participants in nutrition projects.*

(*a*) These programs have been and will continue to be designed (1) to assist in the implementation of the provisions of Title VII; and (2) to provide an understanding of the issues which confront persons working in the field of aging.

(*b*) From September 1973 through April 1974, 1,048 persons have participated in nutrition training sessions sponsored by the administration on Aging; it is estimated that an additional 252 will participate in similar programs by the end of FY 1974.

(*c*) Plans are being developed to provide in fiscal year 1975 continuing opportunities for training in the field of aging in educational institutions, such as community colleges, located in the areas where both Title III and VII projects are underway.

(*d*) Educational institutions that conducted the Title VII training programs sponsored by the Administration on Aging in 1974 will be given the necessary financial support to enable them to provide technical assistance in 1975 to the educational institutions that will be providing training in areas where Title VII projects are located.

4. *To monitor and assess, working through the State Agencies on Aging, the nutrition projects with the end in view of determining whether their programs are contributing to the major objectives set forth in Title VII.*

(a) An early emphasis on this function is important in order to identify both the strengths and weaknesses of the concepts embodied in legislation and the steps taken to implement those concepts.

(b) This function is also important in order to make clear to all concerned that the Federal Government intends to follow through on a provision such as the one incorporated in Title VII; namely, that the States shall "provide assurances that, to the extent feasible, grants will be awarded to projects operated by and serving the needs of minority, Indian, and limited English-speaking eligible individuals in proportion to their numbers in the State."

Rollcall Votes Cast

In accordance with the requirements of Section 133(b) of the Legislative Reorganization Act of 1946, as amended, the following rollcall vote was cast during committee consideration of the bill:

Motion to strike Section 2 (defeated, 12 to 4).

Yeas: Senators Javits, Dominick, Taft, and Beall.

Nays: Senators Williams, Randolph, Pell, Kennedy, Nelson, Mondale, Eagleton, Cranston, Hughes, Hathaway, Schweiker, and Stafford.

Estimated Cost

In accordance with Section 252(a) of the Legislative Reorganization Act of 1970 (PL 91–510) the cost of this legislation is $150,000,000 for Fiscal Year 1975, $200,000,000 for Fiscal Year 1976, and $250,000,000 for Fiscal Year 1977.

Changes in Existing Law

In compliance with subsection (4) of rule XXIX of the Standing Rules of the Senate, changes in existing law made by the bill, as reported, are shown as follows (existing law proposed to be omitted is enclosed in black brackets, new matter is printed in italic, existing law in which no change is proposed is shown in roman):

Older Americans Act of 1965, As Amended

* * * * * * *

TITLE II—ADMINISTRATION ON AGING

ESTABLISHMENT OF ADMINISTRATION ON AGING

Sec. 201. (a) There is established in the Office of the Secretary an Administration on Aging (hereinafter in this Act referred to as the "Administration") which shall be headed by a Commissioner on Aging (hereinafter in this Act referred to as the "Commissioner"). Except for title VI and as otherwise specifically provided by the Older Americans Comprehensive Services Amendments of 1973, the Administration shall be the principal agency for carrying out this Act. In the performance of his functions, the Commissioner shall be directly responsible to the Office of the Secretary. The Secretary shall not approve any delegation of the functions of the Commissioner to any other officer not directly responsible to the [Commissioner unless the Secretary shall first submit a plan for such delegation to the Congress. Such delegation is effective at the end of the first period of sixty calendar days of continuous session of Congress after the date on which the plan for such delegation is transmitted to it: *Provided, however,* That within thirty days of such transmittal, the Secretary shall consult with the Committee on Labor and Public Welfare of the Senate and the Committee on Education and Labor of the House of Representatives respecting such proposed delegation. For the purpose of this section, continuity of session is broken only by an adjournment of Congress sine die, and the days on which either House is not in session because of an adjournment of more than three days to a day certain are excluded in the computation of the thirty-day and sixty-day periods. Under provisions contained in a reorganization plan, a provision of the plan may be effective] *Commissioner.*

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TITLE III—GRANTS FOR STATE AND COMMUNITY PROGRAMS ON AGING

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TRANSPORTATION PROJECTS

Sec. 309. (a) There are authorized to be appropriated $35,000,000 for the fiscal year ending June 30, 1975, to carry out the purposes of this

section. From sums appropriated under this section, the Commissioner is authorized to make grants to each State having a state plan approved under section 305 for the purpose of paying up to 75 per centum of the costs of meeting the transportation needs of older persons, with special emphasis on providing supportive transportation in connection with nutrition projects operated pursuant to title VII of this Act. Sums appropriated under this section shall be alloted to the States in accordance with the allotment formula contained in section 303.

(b) The allotment to a State under this section shall remain available until December 31, 1975, for grants and contracts to area agencies on aging, organized under section 305(b), or to other public or non-profit private agencies that the state agency determines have the capacity to meet the transportation needs of older persons and to provide supportive transportation services in connection with nutrition projects operated under title VII. In making grants and contracts under this section, state agencies shall give priority to applicants proposing to serve areas in which there is no public transportation or in which existing public transportation is inadequate to meet the special needs of older persons.

(c) Within 90 days following the enactment of legislation appropriating funds as authorized by this section, the Commissioner shall issue final regulations for implementation of the program herein authorized.

(d) The Commissioner is authorized and directed to request the technical assistance and cooperation of the Secretary of Transportation and such other departments and agencies of the Federal Government as may be appropriate for the proper and effective administration of this section.

Domestic Volunteer Service Act of 1973

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TITLE II—NATIONAL OLDER AMERICAN VOLUNTEER PROGRAMS

Part A—Retired Senior Volunteer Program

GRANTS AND CONTRACTS FOR VOLUNTEER SERVICE PROJECTS

Sec. 201. (a) In order to help retired persons to avail themselves of opportunities for volunteer service in their community, the Director is authorized to make grants to State agencies (established or designated pursuant to section 304(a)(1) of the Older Americans Act of 1965, as amended (42 U.S.C. 3024(a)(1)) or grants to or contracts with other public and nonprofit private agencies and organizations to pay part or all of the costs for the development or operation, or both, of volunteer service programs under this section, if he determines, in accordance with regulations he shall prescribe, that—

(1) volunteers will not be reimbursed for other than transportation, meals, and other out-of-pocket expenses incident to the provision of services under this part;

(2) only individuals aged sixty or over will be enrolled as volunteers to provide services under this part (except for administrative purposes), and such services will be performed in the

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community where such individuals reside or in nearby communities either (A) on publicly owned and operated facilities or projects, or (B) on local projects sponsored by private nonprofit organizations (other than political parties), other than projects involving the construction, operation, or maintenance of so much of any facility used or to be used for sectarian instruction or as a place for religious worship;

(3) the program includes such short-term training as may be necessary to make the most effective use of the skills and talents of participating volunteers and individuals, and provide for the payment of the reasonable expenses of such volunteers while undergoing such training; and

(4) the program is being established and will be carried out with the advice of persons competent in the field of service involved, and of persons with interest in and knowledge of the needs of older persons. *In no event shall the required proportion of the local contribution (including in-kind contributions) for any new grant or contract be more than 10 per centum, nor shall the proportion of such contribution for any renewal of any existing grant or contract be increased by more than 50 per centum over the proportion of such contribution required in the preceding such grant or contract, nor shall any such required contribution in any case be more than 40 per centum of the total cost of any such grant or contract.*

(b) The Director shall not award any grant or contract under this part for a project in any State to any agency or organization unless, if such State has a State agency established or designated pursuant to section 304(a)(1) of the Older Americans Act of 1965, as amended (42 U.S.C. 3024(a)(1)), such agency itself is the recipient of the award or such agency has been afforded at least sixty days in which to review the project application and make recommendations thereon.

Supplemental Views of Messrs. Beall, Javits, Dominick, and Taft

We heartily support, with one reservation, H.R. 11105, legislation to extend the nutrition program for the Elderly (Title VII of the Older Americans Act of 1965, as amended). This bill was ordered reported by the Subcommittee on Aging on May 30, 1974 and by the full Labor and Public Welfare Committee on June 5, 1974.

The point on which we have a serious reservation is Section 2 of H.R. 11105, as reported. The background for this provision has its roots in the early history of the Older Americans Act. Shortly after the Administration on Aging was established in the mid-1960's, it was placed in Social and Rehabilitation Services at the Department of Health, Education, and Welfare. This produced a number of problems. First of all, the Commissioner on Aging, who is appointed by the President and confirmed by the Senate, answered to the Administrator of S.R.S. who is appointed by the Secretary without congressional confirmation. Second, a number of functions of the Administration on Aging were delegated to S.R.S. and thus effectively removed from the control of the Commissioner on Aging. Congress remedied this situation in 1973 by legislatively removing A.O.A. from S.R.S. and placing it within the Office of the Secretary. Public Law 93–29 went on to state that "The Secretary shall not approve any delegation of the functions of the Commissioner to any other officer not directly responsible to the Commissioner unless the Secretary shall first submit a plan for such delegation to Congress. Such delegation is effective at the end of the first period of 60 calendar days of continuous session of Congress after the date on which the plan for such delegation is transmitted to it: *Provided, however,* That within 30 days of such transmittal, the Secretary shall consult with the Committee on Labor and Public Welfare of the Senate and the Committee on Education and Labor of the House of Representatives respecting such proposed delegation."

On March 26, 1974, Secretary Weinberger, in a letter to the President of the Senate and to the Speaker of the House of Representatives, proposed that certain functions of the Commissioner on Aging be delegated to the H.E.W. Regional Directors. The text of the Secretary's letter is as follows:

THE SECRETARY OF HEALTH,
EDUCATION, AND WELFARE,
Washington, D.C., March 26, 1974.

Hon. GERALD R. FORD,
President of the Senate,
Washington, D.C.

DEAR MR. PRESIDENT: In accordance with section 201 of the Older Americans Act of 1965, I am submitting to the Congress the following plan for delegation, with my concurrence, of certain authorities to act by the Commissioner on Aging to officers of the Department of Health, Education, and Welfare not directly responsible to him. These

authorities will be exercised pursuant to policies, regulations, and guidelines, promulgated by the Commissioner and subject to post-audit by him. This plan will not be implemented until the period of time required by the statute has elapsed.

The Commissioner will delegate to the Regional Directors authority to act in connection with the administration in the regions of programs under Title III (Grants for State and Community Programs on Aging), and Title VII (Nutrition Program for the Elderly) of the Act.

The Commissioner on Aging will retain responsibility for and authority over the Title III and Title VII programs. He will be able to revoke his delegations of authority to act whenever he decides to do so. He will have the responsibility of considering appeals from actions taken by Regional Directors. As indicated, policies, regulations and guidelines will be issued by the Commissioner, and will govern the manner in which Regional Directors will operate under the delegations of authority to act.

This delegation is designed to strengthen the position of the program for the elderly in the Regional Offices of the Department. Both the Commissioner, Arthur S. Flemming, and I would like to see the Regional Directors play a leading role in working with the States in the field of aging. The strength and authority of the Regional Directors can best be brought to bear in the interests of the elderly of the country if the Regional Directors have specific authorities to act under the newly expanded programs of assistance to States and localities under the Older Americans Act. Further, specific authorities to act in the area of aging will permit them to coordinate the aging program with other Department programs which serve the elderly and other vulnerable groups in our society.

Under this plan the Regional Directors will have authority to re-delegate their authority to act to the Assistant Regional Director for Human Development and the Regional Program Director for Aging. The Regional Directors, however, will be held accountable for the manner in which these authorities are exercised.

On October 31, 1973, we submitted a letter to Senator James Eastland, Acting President Pro Tempore, dealing with the subject matter of this letter. We believe that the 60-day period provided for in the law for consideration by the Congress of such a submission began anew on January 21, 1974, when the second session of the 93rd Congress convened. We have no objection, however, in this case to restating our views in this letter and to having a further 60-day period begin to run with the receipt of this letter. In that regard, this letter will confirm recent consultations held with the Select Subcommittee on Education of the House of Representatives Committee on Education and Labor.

Sincerely,

CASPAR W. WEINBERGER, *Secretary.*

During the May 23, 1974 hearings the Honorable Stanley Thomas, Assistant Secretary for Human Development, and Commissioner Flemming testified before the Subcommittee on Aging relative to this delegation proposal. Shortly after the hearing, Senator Beall, the Ranking Minority Member of the Subcommittee on Aging, wrote to Dr. Flemming requesting a clarification of this proposed delegation of authority. In a letter to Senator Beall, dated June 4, 1974 Commissioner Flemming expressed his views as follows:

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE,
OFFICE OF THE SECRETARY,
Washington, D.C., June 4, 1974.

Hon. J. GLENN BEALL, Jr.
U.S. Senate, Washington, D.C.

DEAR SENATOR BEALL: I am happy to share with you my views on the proposal to delegate authority to act for Titles III and VII of the Older Americans Act to the Regional Directors, as you requested in your recent letter.

After my confirmation by the Senate last June as Commissioner on Aging, one of the first issues I confronted was the proper relationship between the Administration on Aging and the Regional Offices of the Department of Health, Education, and Welfare. I reviewed the past history of the Agency, during which authority had been delegated to the Social and Rehabilitation Service Regional Commissioners, and concluded that one of the best ways to further one of the major objectives of the amendments to the Older Americans Act; namely, to better coordinate services and programs for older persons, would be to delegate certain authorities to act to Regional Directors within policy guidelines established by the Commissioner and subject to post audit by the Commissioner.

Based on my previous experience in the Department, it became clear to me that the Regional Director, as the Secretary's peronsal representative in each Region, was the only person who possessed the influence and authority to really affect coordination between HEW programs. Moreover, as HEW's top person in the Region, the Regional Director has the status to deal more effectively than any other Regional official with other Federal Departments and Agencies in the Region, and with the Governors and State governments. It seemed to me that if the Regional Directors were held accountable for the conduct of the aging programs in the regions it would elevate the status of aging programs in the regions and would strengthen in a significant manner the operations of the Regional Program Directors for Aging and their staffs.

Therefore, in August, I initiated discussions with persons in the Department about the possibility of my delegating authority to act for Titles III and VII to the Regional Directors. As you know, the result of these discussions was the submission by the Secretary on October 31, 1973 of a proposal to delegate authority to act for Titles III and VII to the Regional Directors.

I might add that as I became reacquainted with the Department and its personnel, I became increasingly impressed with the quality of the Regional Directors, and with their interest and involvement in the field of aging. They have been very helpful to me in a number of instances during the past year, and it is my belief that if I am allowed to delegate authority to act to them, they will provide us with effective leadership.

As I stated in my testimony before your Subcommittee recently however, I do not plan to delegate any of my *responsibilities* for the conduct of Titles III and VII. It is my firm conviction that when an official in the executive branch delegates authority to act—pursuant to policies, regulations, and guidelines issued by that person, and subject to post audit and revocation—he does not and cannot divest himself of responsibility which has been given him under the law.

This philosophy is incorporated in the Secretary's March 26 letter to the Congress proposing delegations of authority to act for Titles III and VII to the Regional Directors.

If I am permitted to make these delegations it would be possible to review the whole matter when the next Congress considers the extension of the Older Americans Act, as amended. At that time I could provide the Congress with testimony based on experience.

Very sincerely and cordially yours,

ARTHUR S. FLEMING,
Commissioner on Aging.

We believe that Dr. Flemming is an able and outstanding public servant who has fully been responsive to and cooperative with the Congress. As a former Secretary of Health, Education, and Welfare, he is in a good position to perceive both the administrative problems and the administrative opportunities from more than one vantage point. We believe that Dr. Flemming has sincerely proposed an administrative arrangement which he believes will best serve the interest of our Nation's 20 million senior citizens. We would add that his conduct relative to this matter has been in complete compliance with Title II, Section 201 of the Older Americans Act which was enacted only one year ago. It is worth noting that the 60 day notification period expired on Monday, June 10th and the Commissioner would have been in full compliance with existing law had he implemented the delegation at that time. It is even possible that, allowing the delegation to take effect, would have made it more difficult for the Congress to stand the A.O.A. Administrative structure on its head by enacting "ex post facto" legislation such as this. It is to Dr. Flemming's credit that he has once again delayed the implementation of this delegation until the congressional deliberations on H.R. 11105 are complete.

We would like to make several additional points as to why we feel Commissioner Flemming's approach to administering the Older American Programs should be given a chance to operate before the Congress intervenes:

1. The delegated authority "will be exercised pursuant to policies, regulations, and guidelines, promulgated by the Commissioner and subject to post-audit by him."
2. The Commissioner retains "responsibility" for the Title III and VII programs.
3. The Commissioner may revoke the delegation "whenever he decided to do so."
4. The Commissioner is responsible for resolving appeals from decisions made by the Regional Directors.
5. The Regional Directors (not the Regional Program Directors for Aging) sit on the Regional Federal Council (which coordinates various Federal programs on the Regional level) and deal directly with Governors and other high State officials.
6. The Regional Director can coordinate H.E.W. programs for the elderly with the other Office of Human Development programs for the disadvantaged.
7. The Older Americans Act of 1965 comes before the Congress next year for extension. We were perfectly willing to do battle with the administration over the issue of placing A.O.A. within Social and

Rehabilitation Services as well as the establishment of the National Institute on Aging. We would be equally willing to overturn this delegation next year *if it does not work*.

8. This delegation is unique in the ongoing efforts to decentralize the programs of the Department of Health, Education, and Welfare. Since there is no precedent for a delegation of this nature, the Congress is seeking to prejudge the success or failure of this administrative technique. We believe that it is innately unfair to prevent Dr. Flemming from having reasonable latitude in administering the Older Americans programs, within the limits set by existing laws. If the proposed delegation does not improve the effectiveness and quality of the social and nutritional services we deliver to our Nation's senior citizens *then* it would be appropriate for us to overturn the procedure.

The choice is clear, we can enact a noncontroversial extension of the Title VII programs thus insuring prompt congressional action and Presidential approval prior to the June 30th expiration of the existing program authority. Or we can "tie the hands" of Dr. Flemming, thus making it more difficult for A.O.A. to achieve the objectives mandated in the Older Americans Comprehensive Services Amendments of 1973.

J. Glenn Beall, Jr.,
Jacob K. Javits,
Peter H. Dominick,
Robert Taft, Jr.

Public Law 93-351
93rd Congress, H. R. 11105
July 12, 1974

An Act

88 STAT. 357

To amend title VII of the Older Americans Act relating to the nutrition program for the elderly to provide authorization of appropriations, and for other purposes.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, That the first sentence of section 708 of the Older Americans Act is amended by striking out the word "and" before "$150,000,000" and by inserting before the period a comma and the following: "$150,000,000 for the fiscal year ending June 30, 1975, $200,000,000 for the fiscal year ending June 30, 1976, and $250,000,000 for the fiscal year ending June 30, 1977".

Older Americans Act of 1965, amendments. 86 Stat. 94. 42 USC 3045g.

SEC. 2. (a) Section 201(a) of the Older Americans Act (42 U.S.C. 3011) is amended by striking out everything in such section that follows the word "Commissioner" the second time it appears in the fourth sentence of such section and inserting in lieu thereof a period.

87 Stat. 30.

(b) Any delegation of the functions of the Commissioner on Aging in effect on the date of enactment of this Act, issued pursuant to section 201(a) of such Act, shall be modified by the Commissioner to comply with the provisions of the amendment made by this section.

Commissioner, delegation of functions, modification. 42 USC 3011 note.

SEC. 3. Title III of the Older Americans Act of 1965 (42 U.S.C. 3021ff.) is amended by adding the following new section:

87 Stat. 36. 42 USC 3021.

"TRANSPORTATION PROJECTS

"SEC. 309. (a) There are authorized to be appropriated $35,000,000 for the fiscal year ending June 30, 1975, to carry out the purposes of this section. From sums appropriated under this section, the Commissioner is authorized to make grants to each State having a State plan approved under section 305 for the purpose of paying up to 75 per centum of the costs of meeting the transportation needs of older persons, with special emphasis on providing supportive transportation in connection with nutrition projects operated pursuant to title VII of this Act. Sums appropriated under this section shall be allotted to the States in accordance with the allotment formula contained in section 303.

Appropriation. 42 USC 3029. 42 USC 3025. 86 Stat. 88. 42 USC 3045.

"(b) The allotment to a State under this section shall remain available until December 31, 1975, for grants and contracts to area agencies on aging, organized under section 305(b), or to other public or nonprofit private agencies that the State agency determines have the capacity to meet the transportation needs of older persons and to provide supportive transportation services in connection with nutrition projects operated under title VII. In making grants and contracts under this section, State agencies shall give priority to applicants proposing to serve areas in which there is no public transportation or in which existing public transportation is inadequate to meet the special needs of older persons.

State allotments. 42 USC 3023. Allotments, availability. Applicants granted priority.

"(c) Within ninety days following the enactment of legislation appropriating funds as authorized by this section, the Commissioner shall issue final regulations for implementation of the program herein authorized.

Final regulations.

"(d) The Commissioner is authorized and directed to request the technical assistance and cooperation of the Secretary of Transportation and such other departments and agencies of the Federal Government as may be appropriate for the proper and effective administration of this section.".

Technical assistance.

SEC. 4. Section 201 of Public Law 93-113 (87 Stat. 401, October 1, 1973) is amended by inserting the following new subsection (b) after

42 USC 5001.

88 STAT. 358

subsection (a) and redesignating the present subsection (b) as subsection (c):

Local contributions, required proportion.

"(b) In no event shall the required proportion of the local contribution (including in-kind contributions) for a grant or contract made under this section be more than 10 per centum in the first year of assistance under this section, 20 per centum in the second such year, 30 per centum in the third such year, 40 per centum in the fourth such year, and 50 per centum in any subsequent such years: *Provided, however*, That the Director may make exceptions in cases of demonstrated need, determined (in accordance with regulations which the Director shall prescribe) on the basis of the financial capability of a particular recipient of assistance under this section, to permit a lesser local contribution proportion than any required contribution proportion established by the Director in generally applicable regulations.".

87 Stat. 56. 42 USC 3045f.

SEC. 5. Section 707 of the Older Americans Act of 1965 is amended by adding at the end thereof the following new subsections:

Level of assistance.

"(d) In donating commodities pursuant to this section, the Secretary of Agriculture shall maintain an annually programed level of assistance of not less than 10 cents per meal: *Provided*, That this amount shall be adjusted on an annual basis each fiscal year after June 30, 1975, to reflect changes in the series for food away from home of the Consumer Price Index published by the Bureau of Labor Statistics of the Department of Labor. Such adjustment shall be computed to the nearest one-fourth cent. Among the commodities delivered under this section, the Secretary shall give special emphasis to high protein foods, meat, and meat alternates. The Secretary of Agriculture, in consultation with the Commissioner, is authorized to prescribe the terms and conditions respecting the donating of commodities pursuant to this section, and, within ninety days after the date of enactment of this subsection (d), the Secretary of Agriculture shall issue regulations governing the donation of such commodities.

Food stamps, regulations.

"(e) The Secretary of Agriculture in consultation with the Commissioner shall, within ninety days after the date of enactment of this subsection, issue regulations clarifying the use of food stamps under this title.".

Approved July 12, 1974.

LEGISLATIVE HISTORY:

HOUSE REPORT No. 93-914 (Comm. on Education and Labor).
SENATE REPORT No. 93-932 (Comm. on Labor and Public Welfare).
CONGRESSIONAL RECORD, Vol. 120 (1974):
Mar. 19, considered and passed House.
June 19, considered and passed Senate, amended.
June 26, House concurred in Senate amendments with an amendment.
June 27, Senate concurred in House amendment.

spssi

THE SOCIETY FOR THE PSYCHOLOGICAL STUDY OF SOCIAL ISSUES

A Division of The American Psychological Association

Abstract of letter from Richard A. Kalish, Ph.D., Professor of Behavioral Sciences, Graduate Theological Union, 2464 Le Conte Ave., Berkeley, California in answer to a request from the SPSSI Poverty Committee for comment on pending National Health Insurance measures concerning nutrition and health programs for the aging presently before Congress. Dr. Kalish is past chairman of the Aging Committee of the Society for the Psychological Study of Social Issues (SPSSI), a Division of the American Psychological Association.

(Dr. Kalish)...A great deal has been said, especially in support of the Administrations's bill (S 2970, HR 13870) that the physician-patient relationship is better with governmental interference at a minimum. The implication is that the physician does better in relating to patients in a free market economy....I would like to make the case that this particular hypothesis requires testing before we build programs with it as a basic assumption.

Another issue is enabling elderly people to claim their rights in the case of a complex bureaucracy and the requirements of filling out complex forms. There is good research evidence that older people (a) have less formal education and, therefore, less capacity to use the English language either as readers or writers, (b) are more confused by multiple inputs, and therefore less likely to even be willing to deal with complex matters, and (c) have greater difficulty in getting around, and therefore, are less likely and less capable of returning to offices to insist that they be served....The more forms that need filling out, the more complex the bureaucratic structure, the more technical jargon that is utilized, the more intimidated the older person will be. Since there is also a small but highly consistent research literature showing that the social value of life is lower for the elderly than for other age groups, we have evidence that givers of services are less likely to take pains to help older people obtain their rights.

...In essence, the older person will benefit psychologically when procedures are simple, when visits to offices and waits in line are absolutely minimal, and when his rights are explicit and not subject to interpretation by a fatigued clerk or hostile age-ist professional.

...Although older persons often need long term care, most of their medical needs are short term, and the elderly poor are unlikely to seek medical care if the costs in money, energy, or confusion are high. Another important matter is that home health care is very important and that some opportunity for social interactions can easily have a vital effect on functional capacity and cognitive abilities.

The literature of medical sociology, plus the work on stress, indicates that the psychological reaction to physical illness and the recuperation period from such illness is a very definite correlate of the attitude and motivation of the ill person. Stress and anxiety caused by not knowing how one will live after paying medical bills are obviously not conducive to recovery.

The summation of my comments lead to the conclusion that any health bill must provide adequate coverage, must avoid the potential of impoverishing persons, must enable the recipient to perceive the coverage and care as his due, must have procedures that can be followed by a person of very modest literacy levels, and must involve immediate reimbursement...

As far as the nutrition bills are concerned, I would favor any bill that provides the greatest number of elderly persons with the most food. There is no doubt that lack of adequate diet not only reduces physical health and resistance to disease, but also affects mood and cognitive functioning. Many older persons end up in institutions when a few hot, high protein meals would nave improved their functioning. When social interactions are combined with the food, improvement is even greater. I feel that the two major concerns of older persons are income and health, and nutrition is obviously a key to health.

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June 11, 1974

Mr. James J. Murphy, Counsel
Senate Subcommittee on the Aging
Room 6222, New Senate Office Building
Washington, D.C.

Dear Jim:

As per our discussion, I am passing along some thoughts my colleagues and I have had regarding the Title VII Nutrition Program for the Elderly. I would be delighted to elaborate on some of these issues if doing so would prove helpful to you.

Based on our experience with the existing legislation and its implementation to date, we believe the following issues require attention:

1. Non-availability of transportation as a barrier to participation

2. Inadequate provision of home delivered meals

3. No incentive for the provision of special diets

4. Inadequate utilization of the private high-volume cafeteria as a meal provider

5. No control on unit costs

It seems to us that the first three items might be handled by some form of incentive grant; however, what incentive you provide grantees who are already getting 90% money is not clear. Perhaps, these could be enrichment grants awarded by the Regional Directors under delegation from the Commissioner. Awards would be based on committments to achieve specified measureable outputs; failure to comply would result in the award not being renewed.

The fourth item could be handled by authorizing the Commissioner to withhold, say up to 2% of the appropriation from the States, for three years, for purposes of conducting a series of controlled experiments using commercial cafeterias in cities in which non-profit organizations were also providing meals. Comparisons could be made concerning unit costs, consumer satisfaction, affect on capacity to provide other social services, management efficiency, etc. Since several cafeteria chains are already providing off-peak meals for the elderly at costs substantially lower than those being run up by non-profit organizations, very serious questions concerning what is being purchased under this legislation need to be examined. Is a bias against profit-making enterprises causing us to lose sight of ultimate objectives of providing services to the greatest number of older persons for the lowest costs.

One possibility here might be a national or regional contract by AoA with a frozen food firm to manufacture so many hundred thousand complete dinners of varying dietary specifications (e.g. salt-free, kosher, traditional asiatic, etc.), to be purchased via vouchers which AoA could grant to the States in lieu of cash. Such an approach would of course require statutory authority.

The fifth item is lack of control over unit costs -- has its origin in high fixed costs and low participation rates. Our sense is that no one in the country can now reasonably say what the limits on equipment, space, staff, management, transportation, other social services, etc. are for each of the finite number of settings in which meals are being provided. Such limits should be defined. When and if they are, our hunch is that mammoth under-utilization will be discovered. Utilization targets both in terms of number of participants and unit costs need to be set for each project. Barriers to utilization for each project should be analyzed and a plan for eliminating those barriers devised. National publicity efforts through the media and a mailing to SSI recipients should be coordinated with individual project utilization plans. This will all probably take front-end money. It should be provided with clear Congressional intent that this problem, peculiarly susceptible to applications of management technology, be attacked on a priority basis. As matters now stand, each project has absolutely no incentive to increase utilization or to reduce unit costs. DHEW will pay the full tab, or at least 90% of the full tab, for inefficiency.

Mr. James J. Murphy, Counsel June 11, 1974

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I'm sure you will note that all these items are related. One reason that meals are so expensive is that organizations who know nothing about food management are providing them. Another is that not enough people participate because they can't get to the sites. A consequence of high unit costs is an unwillingness to raise them further by providing special diets or home delivered meals. The challenge legislatively is not only to devise mechanisms to lower costs but to require their adoption or, at least, experimental use. While it can be argued that the antecedants of the current program, the research, or so-called research, projects should have provided these mechanisms, the reality is that they did not and the current program is suffering.

Please let us know if we can be of any help.

Sincerely,

Larry

Lawrence S. Lewin
President

WENDELL R. ANDERSON
GOVERNOR

STATE OF MINNESOTA
OFFICE OF THE GOVERNOR
ST. PAUL 55155

May 16, 1974

The Honorable Tom Eagleton
United States Senator
Chairman, Sub-Committee on Aging
Dirkson Senate Office Building
Washington, D.C.

Dear Senator Eagleton:

On behalf of the State of Minnesota I wish to add my support in favor of the Older Americans Nutrition Program which is now before your committee.

The State of Minnesota has worked hard with local sponsors as stewards and partners in the implementation of the program. We now reach 4000 older people each day with a nutritious meal, friendship and supportive services at 105 centers and sites in 66 of our 87 counties.

By design, location, and extensive outreach work, it is reaching those most in need. Those who are lonely, those with low and fixed incomes, and those who have difficulties in fixing their own meals. 75 percent of our participants are below the poverty line. We work to provide social services and supportive services, but the 20 percent limitation on funds for those services is low, and we feel that either the percent should be increased, or that more money be made available for transportation for seniors.

I have given leadership to the successful effort to get state funds for senior citizens; monies for free MTC bus fares and other experimental transportation efforts, and my Council on Aging has already spent over $500,000 of Title III money on senior citizen transportation. However, transportation and supportive services are a serious problem.

We have a good start on the program because initially we had the money to plan and staff the operation, but now no money is allowed for state administration. I strongly request for accountable, effective, and efficient administration for monitoring 100 sites, that up to 7 percent be provided for administration. Without it quality, effectiveness, and efficiency are more difficult to achieve.

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Finally, I ask that the increased funding take place immediately. We are scheduled to get the same funding next year as we did this year. With inflation this means a cut back in meals and programs. To prevent OMB from impounding in the guise of Administration forward funding, I ask that Congress instruct the Administration to spend at least 125 percent of what was spent in the last 12 months, starting July 1st, as was spent in this fiscal year. Unless positive action is taken by Congress, there will be a drop-off in program and fewer older people served, because of inflation.

Sincerely

Wendell R. Anderson

Wendell R. Anderson

WRA:sm