MEALS on WHEELS SOUTH TEXAS

Welcome to Meals on Wheels South Texas

Meals on Wheels South Texas is a non-profit 501(c)(3) organization providing services that support independent living for seniors within Victoria. Since 1979, we have been providing congregate meals, health screenings, and recreational activities at our Connection Café, home-delivered meals for homebound seniors, and transportation to the Connection Café. Our homebound clients also have the opportunity to participate in our various programs, such as the Paw Bites & Paw Express Program, Togetherness Program, Crafts Program and Library 2 Go Program.

Connection Café is a fresh take on the senior center model, supporting active and energized social lives for all participants. Visit us Monday through Friday, 9:30 AM to 11:30 AM. We serve meals at 11 AM. Enter through the bright green door (you can't miss it!) For clients who wish to receive home-delivered meals, they will receive 5 frozen meals weekly. Transportation services are available to the café.

All of our services are provided free of charge for eligible clients, but we welcome your donations to help share in the costs of providing them. The suggested contribution is $3.00 per meal for clients who meet state eligibility guidelines. Donations can be given to your meal delivery driver, brought to our office, or paid online at mowstx.org under the Pay for Meals link. For clients not meeting eligibility guidelines for subsidized services, private pay service is available, prepaid in advance.

Enclosed you will find all the information you need to become a Meals on Wheels South Texas client. Please review and fill out the forms provided. If you have any questions, call the office at (361) 576-2189 Option 2. Our office hours are Monday through Friday 8 AM to 2 PM.

We look forward to serving you!

Sincerely,
Jenny Herrera
Intake Coordinator
intake@mowstx.org
www.mowstx.org

¡Bienvenido a Meals on Wheels South Texas!

Meals on Wheels South Texas es una organización sin fines de lucro 501 (c) (3) que brinda servicios que apoyan la vida independiente de las personas mayores en Victoria. Desde 1979, hemos brindado proporcionando comidas congregadas, exámenes de salud y actividades recreativas en nuestro Connection Café, comidas a domicilio para personas mayores confinadas en sus hogares y transporte al Connection Café. Nuestros clientes confinados en casa también tienen la oportunidad de participar en nuestros diversos programas, como el Programa Paw Bites & Paw Express, el Programa togetherness el Programa de Manualidades y el Programa Library 2 Go.

Connection Café es una nueva versión del modelo de centro para personas mayores, apoyando vidas sociales activas y energizadas para todos los participantes. Visítenos de lunes a viernes, de 9:30 AM a 11:30 AM. Servimos comidas a las 11 AM. Entra por la puerta verde brillante (¡no te la puedes perder!) Para los clientes que deseen recibir comidas a domicilio, recibirán 5 comidas congeladas semanalmente. Los servicios de transporte están disponibles para la cafetería.

Todos nuestros servicios se brindan sin cargo para los clientes elegibles, pero agradecemos sus donaciones para ayudar a compartir los costos de brindarlos. La contribución sugerida es de $ 3.00 por comida para los clientes que cumplen con las pautas estatales de elegibilidad. Las donaciones se pueden entregar a su conductor de entrega de comidas, llevarlas a nuestra oficina o pagar en línea en mowstx.org bajo el enlace Pagar por comidas. Para los clientes que no cumplan con las pautas de elegibilidad para los servicios subsidiados, el servicio de pago privado está disponible, prepago por adelantado.

Adjunto encontrará toda la información que necesita para convertirse en cliente de Meals on Wheels. Revise y complete los formularios proporcionados. Si tiene alguna pregunta, llame a la oficina al (361) 576-2189 opción 2 Nuestro horario de atención es de lunes a viernes de 8 AM a 2 PM.

¡Esperamos poder servirle!

Sinceramente,
Jenny Herrera
Intake and Assessment Coordinator
intake@mowstx.org
www.mowstx.org

Frequently Asked Questions

Who is eligible for Home Delivered Meals?

Adults, age 60 and older, who are primarily homebound, unable to easily cook for themselves, lack consistent daytime assistance from another person, are available to accept meals during the delivery time frame, and meet eligibility criteria established by the Texas Health and Human Services Commission.

For clients that do not meet eligibility criteria for Homebound Meals, Have other options, Private service is available and must be prepaid in advance or you can come to the Connection Café for activities and Lunch.

Are meals free?

There is no charge for clients meeting HHSC eligibility criteria, provided adequate funding is available, but clients are invited to make a voluntary contribution towards the monthly cost of providing services.

I want to make a contribution, but how?

Clients can give their contributions to their meal delivery driver, by mail, or through our website (www.mowstx.org) under the "Pay for meals" link. Contributions can also be brought to our office during regular business hours.

What do meals include?

Meals are prepared fresh daily by our kitchen staff. Our menu is developed by a registered dietician and designed to meet at least 1/3 of the recommended daily nutrient intake for senior adults. For a monthly view of the menu, check out our newsletter or website (under What We Do > Daily Menu).

What other services do you provide?

Besides meals, we have the Connection Café that serves Lunch and hosts different events such as health screenings and recreational activities. We offer transportation to the Connection Café. Homebound clients with pets are eligible to join our pet assistance program. We also have a library delivery program for homebound clients and are working on a social reassurance program.

Where can I find out more information about programs and activities?

For more information about programs and activities, you can call our office at 361-576-2189. There is also more information available in our newsletter, on our website, www.mowstx.org, and on our Facebook page www. www.facebook.com/MOWSouthTexas

Our Services

Mobile Meals Program

Our Meals on Wheels service provides home-delivered, prepared meals to homebound clients, enabling them to remain healthy and independent in their own homes. Each meal is prepared daily and delivered in a microwave-safe container by a trained staff driver or volunteer between 10:30 AM to 1:30 PM Monday through Friday.

Congregate Programs

The Connection Café provides opportunities to gather with new and old friends. Lunch is served at 11 AM, Monday through Friday. The Senior Center also holds activities, such as bingo, games, movie viewings, crafts, and periodic health screenings.

Transportation Program

Curb to curb transportation service is available Monday through Friday for rides to the Connection Cafe. Reservations for transportation must be booked in advance.

Library 2 Go Program

We have partnered with the Victoria Public Library to give our homebound clients the option to receive library items. Clients must fill out a library interest survey and will receive items based on those preferences.

Paw Bites & Paw Express Program

Homebound meal delivery clients are eligible for a monthly delivery of cat or dog food based on the size and number of your pets. We are currently working towards expanding the program to include grooming and veterinary needs.

Togetherness Program

Our Togetherness Program is a service that allows our clients experiencing isolation, loneliness, and lack of social support a chance to connect with a volunteer. Clients and volunteers are able to build friendships and social connections. This program can either take place over the phone or in person based on the client and volunteer's preferences.

Craft Program

We have partnered with the Adult Program Services of the Victoria Public Library to provide a monthly craft delivery to our homebound seniors. Each month holds a different project, and all supplies are provided. (*Registration is required).*

MEALS on WHEELS SOUTH TEXAS
603 E. MURRAY, VICTORIA, TEXAS 77901
361-576-2189
FAX 361-578-8111

Area Agency on Aging of Golden Crescent

A program of the Golden Crescent Regional Planning Commission

Funding provided by the Texas Health & Human Services

TEXAS Health and Human Services

CLIENT INTAKE AND SERVICE REQUEST FORM

FORMA DE ADMISIÓN Y SOLICITUD DE SERVICIOS PARA CLIENTES

The information on this form is required by your local service provider, the Area Agency on Aging (AAA), and the Texas Health & Human Services. All information provided will be kept confidential and guarded against unofficial use. Information gathered through an intake or through an assessment may be shared to effectively plan, arrange and deliver services to meet individual client needs.

Esta solicitud contiene información que exigen el proveedor de servicios locales, la Agencia del Área para Adultos Mayores (AAA) y el Departamento de Servicios para Adultos Mayores y Personas Discapacitadas de Texas. Toda la información se mantendrá confidencial y protegida contra el uso no oficial. La información obtenida mediante el proceso de admisión o una valoración se puede divulgar para planear, organizar y prestar los servicios eficazmente para satisfacer las necesidades individuales del cliente.

CLIENT INTAKE AND SERVICE REQUEST FORM

(Items in **BOLD** must be completed)

Client Rights & Responsibilities and Release of Information have been clearly explained to the client. ☐

Date: _____ Client ID Number (office use only) _____

Last Name: _____ **MI:** _____ **First Name:** _____

Gender: Male ☐ **Female** ☐ **Birth Date:** _____ **Primary Language:** _____

Home Address: Street/Apt. #: _____

City: _____ **State:** _____ **Zip Code:** _____ **County:** _____

☐ **Check if Mailing Address is Home Address**

Mailing Address: Street/Apt. #: _____

City: _____ State: _____ Zip Code: _____ County: _____

Phone: (_____) _____ Home ☐ Cell ☐ Other ☐ (Check One)

Ethnicity (Check One):

- (1) Hispanic or Latino ☐
- (2) Not Hispanic or Latino ☐
- (3) Ethnicity Not Reported ☐

Race (Check all that apply):

- (1) White – Non-Hispanic ☐
- (2) White – Hispanic ☐
- (3) American Indian/Alaska Native ☐
- (4) Asian ☐
- (5) Black or African American ☐
- (6) Native Hawaiian or Pacific Islander ☐
- (7) Persons Reporting Some Other Race ☐
- (8) Race Not Reported ☐

MEALS ON WHEELS SOUTH TEXAS
603 E. MURRAY, VICTORIA, TEXAS 77901
361-576-2189 FAX 361-578-8111

CLIENT INTAKE AND SERVICE REQUEST FORM, PAGE 2

Does client live alone? Yes ☐ No ☐

Client living in poverty (Low Income)? Yes ☐ No ☐

Service(s) Requested: Congregate, Meals, Transportation

Are you enrolled in? ☐ Medicare ☐ Medicaid ☐ Extra Help for Medicare Prescription Drug Plan

☐ QMB & SLMB Would You Like More Information About these Programs? _____

To be completed by AAA/provider staff:

Print name of AAA/provider staff completing Intake: _____

Nutrition Services: If participant is "other Older Americans Act(OAA) or Nutrition Service Incentive Program (NSIP) eligible participant under 60 years of age", check which of the following applies:

(1) Spouse is eligible and participates in congregate or home delivered meal program. ☐
(2) Serves as volunteer at the nutrition site in accordance with OAA standards. ☐
(3) Disabled/resides in the housing facility and wants to participate in the congregate meal program provided at the site. ☐
(4) Disabled and lives with a 60+ person who is eligible for congregate or home delivered meal program. ☐

Optional-Referred By_____

Referral Contact Information: _____**Phone** _____**email**

Additional Notes Regarding Referral:

Funded by Texas Health & Human Services
Golden Crescent Revision with Required Fields only, Revision approval HelpDesk8-22-17, OAAA Revision Date: 2/10/15

Area Agency on Aging of Golden Crescent

Client Rights & Responsibilities for Older Americans Act Programs

The Area Agency on Aging of Golden Crescent welcomes you as a participant in programs for older individuals and family caregivers in our region. This program is mandated by the Older Americans Act of 1965, as amended, and provides access and assistance and other supportive services. The programs and services are administered by the Area Agency on Aging with funding provided through the Texas Department of Aging and Disability Services, client contributions and local funding.

Programs and services are designed for individuals age 60 or older and/or their family members and other caregivers. Our goal is to assist older individuals in leading independent, meaningful and dignified lives in their own homes and communities as long as possible through the provision of limited support services. Information will not be released to anyone, or any agency without your informed consent, with the exception of records subpoenaed by a court of law.

Client rights and responsibilities:

1. You have the right to be treated with respect and consideration. You have the right to have your property treated with respect.
2. You may not be denied services on the basis of race, religion, color, national origin, sex, disability, marital status, or inability and/or unwillingness to contribute.
3. You have the right to make a complaint/grievance or recommend changes to policy or service, without restraint, interference, coercion, discrimination or reprisal. To make a complaint or grievance contact the Area Agency on Aging. Contact information is identified below:

Service Provider Information:	Area Agency on Aging Information
Meals on Wheels South Texas 603 E Murray Victoria, Texas 77901 361-576-2189 Office 361-578-8111 Fax office@mowstx.org	Cheree Biggs, AAA Manager Golden Crescent AAA 1908 N. Laurent, Suite 600 Victoria, TX 77901 361-578-1587, ex 201 1-800-252-9240 chereeb@gcrpc.org Michael Ada, GCRPC Executive Director Golden Crescent Regional Planning Commission 1908 N. Laurent, Suite 600 Victoria, TX 77901 361-578-1587, ex 204 michaela@gcrpc.org

4. You have the right to participate in the development of a care plan to address unmet needs. ☐ N/A
5. You have the right to be informed in writing of available services and the applicable charges if the services are not covered or are unavailable by Medicare, Medicaid, health insurance, or Older Americans Act funding. ☐ N/A
6. You have the right to make an independent choice of service providers from the list furnished by the Area Agency on Aging where multiple service providers are available and change service providers when desired. ☐ N/A
7. You have the right to be informed of any change in service(s). ☐ N/A
8. You have the right to make a voluntary, confidential, contribution for services received through the Area Agency on Aging. Services will not be denied if an eligible participant is unable or chooses not to make a contribution. All contributions will be kept confidential and will be utilized to expand or enhance the service(s) for which they were provided.
9. You have the responsibility to inform the Area Agency on Aging or its service provider(s) of your intent to withdraw from the program or any known periods of absenteeism when services will not be utilized. ☐ N/A
10. You have the responsibility to provide the Area Agency on Aging or its services provider(s) with complete and accurate information.

I hold harmless this Area Agency on Aging program, its parent organization, funders, and the sponsoring state agencies for any liability arising out of the services provided in accordance with program guidelines.

_____ _____

Client Signature Date

Form#AIAAA_CR&R3.0 Funded by the Texas Department of Aging and Disability Services
July 2, 2007

Agencia del Área para Adultos Mayores de Golden Crescent

Derechos y responsabilidades del cliente de programas bajo la Ley para Americanos de Edad Avanzada

La Agencia del Área para Adultos Mayores (AAA) de Golden Crescent le da la bienvenida a usted como participante de los programas para personas mayores y cuidadores de la familia de nuestra región. Este programa se hace por mandato de la Ley para Americanos de Edad Avanzada de 1965, con sus enmiendas, y ofrece acceso, asistencia y otros servicios de apoyo. La Agencia del Área para Adultos Mayores administra estos programas y servicios con fondos del Departamento de Servicios para Adultos Mayores y Personas Discapacitadas de Texas, de contribuciones de clientes y fondos locales.

Los programas y los servicios se han diseñado para las personas de 60 años en adelante, para los miembros de sus familias y otros cuidadores. Nuestra meta es ayudar a los adultos mayores a llevar vidas independientes, con significado y con dignidad en sus propias casas y comunidades por cuanto tiempo sea posible, por medio de la prestación de servicios de apoyo limitados. Su información no se divulgará a nadie ni a ningún departamento sin su consentimiento informado, con la excepción de los expedientes que la corte ordene.

Derechos y responsabilidades del cliente:

1. Tiene el derecho de ser tratado con respeto y consideración. Tiene el derecho de que se trate su propiedad con respecto.
2. Tiene el derecho de que no le nieguen los servicios debido a su raza, religión, color, origen nacional, sexo, discapacidad, estado civil o debido a que no puede o no está dispuesto a contribuir.
3. Tiene el derecho de presentar una queja o agravio o recomendar cambios a las normas o servicios, sin sufrir restricciones, interferencias, coacción, discriminación o represalias. Para presentar una queja o un agravio, comuníquese con la Agencia del Área para Adultos Mayores. La información de contacto se da a continuación:

Información del Proveedor de Servicios:	Información de la Agencia del Área para Adultos Mayores
Meals on Wheels South Texas 603 E Murray Victoria, Texas 77901 361-576-2189 Office 361-578-8111 Fax office@mowstx.org	Cheree Biggs, AAA Manager Golden Crescent AAA 1908 N. Laurent, Suite 600 Victoria, TX 77901 361-578-1587, ex 201 1-800-252-9240 cindyco@gcrpc.org Michael Ada, GCRPC Executive Director Golden Crescent Regional Planning Commission 1908 N. Laurent, Suite 600 Victoria, TX 77901 361-578-1587,ex 204 michaela@gcrpc.org

4. Tiene el derecho de participar en la formulación de un plan de atención para atender las necesidades que no han sido satisfechas. ☐ No aplica
5. Tiene el derecho de que le informen por escrito sobre los servicios disponibles y los cargos pertinentes si los servicios no están cubiertos o no están disponibles por medio de Medicare, Medicaid, seguro médico o fondos de la Ley para Americanos de Edad Avanzada. ☐ No aplica
6. Tiene derecho a escoger independientemente al proveedor de servicios de la lista provista por la Agencia del Área para Adultos Mayores donde hay disponibles varios proveedores de servicios, y a cambiar de proveedor de servicios cuando lo desee. ☐ No aplica
7. Tiene el derecho de que le informen de cualquier cambio en los servicios. ☐ No aplica
8. Tiene el derecho de hacer una contribución voluntaria y confidencial por los servicios que haya recibido por medio de la Agencia del Área para Adultos Mayores. Los servicios no se negarán si un participante que llena los requisitos no puede o no quiere hacer una contribución. Todas las contribuciones se mantendrán de manera confidencial y se usarán para extender o mejorar los servicios para los cuales se donaron.
9. Tiene la responsabilidad de informar a la Agencia del Área para Adultos Mayores o a su proveedor de servicios de su intención de retirarse del programa o de cualquier periodo de ausencia durante el cual no se utilizarán los servicios. ☐ No aplica
10. Tiene la responsabilidad de proporcionar a la Agencia del Área para Adultos Mayores o a sus proveedores de servicios información completa y exacta.

Libero de toda responsabilidad a este programa de la Agencia del Área para Adultos Mayores, su organización matriz, los donadores, y a los departamentos estatales patrocinadores de cualquier responsabilidad que surja de los servicios proporcionados de acuerdo con las pautas del programa.

_____ _____

Firma del cliente Fecha

Forma#AIAAA_CR&R_S3.0
de Texas
2 de julio de 2007

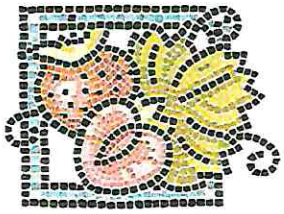
Financiada por el Departamento de Servicios para Adultos Mayores y Personas Discapacitadas

Provider/Center: Meals on Wheels South Texas

Client Name: _____

Client ID: _____

Date: _____



The Warning Signs of poor nutritional health are often overlooked. Use this checklist to find out if you are at nutritional risk.

DETERMINE YOUR NUTRITIONAL HEALTH

Read the statements below. Circle the number in the yes column for those that apply to you. Add the circled numbers to get your total nutritional risk score. Reassessment Required Annually.

• **Consumer signature means they received Nutrition Education, developed & approved by the AAA Registered dietitian, in accordance with DADS P/I # 313**	YES
I have an illness or condition that made me change the kind and/or amount of food I eat.	2
I eat fewer than two meals a day.	3
I eat few fruits or vegetables, or milk products.	2
I have three or more drinks of beer, liquor or wine almost every day.	2
I have tooth or mouth problems that make it hard for me to eat.	2
I don't always have enough money to buy the food I need.	4
I eat alone most of the time.	1
I take three or more different prescribed or over-the-counter drugs a day.	1
Without wanting to, I have lost or gained ten pounds in the last six month.	2
I am not always physically able to shop, cook and/or feed myself.	2
CLIENT SIGNATURE: **TOTAL**	

Nutritional Health Score

0 – 2	Good
3 – 5	Moderate Nutritional Risk
6 or More	High Nutritional Risk

Refer to the Determine Your Nutritional Health Handout to learn more about the warning signs of poor nutritional health.

The Nutrition Screening Initiative • 1010 Wisconsin Avenue, NW • Suite 800 • Washington, DC 20007
The Nutrition Screening Initiative is funded in part by a grant from Ross Products Division of Abbott Laboratories, Inc.
Form #AIAAA_NRA1.0
Edition Date: 9/15/2004

MEALS on WHEELS SOUTH TEXAS

Additional Information:

Last Name: _____ First Name: _____ MI: _____

Email: _____

Marital Status: □ Single □ Married □ Partner □ Separated □Divorced □Widowed

Are you a Veteran? □ Yes □ No Spouse of a Veteran? □ Yes □ No

Church Preference: _____ Religion: _____

Emergency Contacts:

Last Name: _____ First Name: _____ MI: _____

Phone Number: _____ □ Cell □ Home □ Work

Address: _____

Email Address: _____ Lives with Client? □ Yes □ No

Relationship to Client? □ Spouse □ Child □Sibling □Friend □ Other: _____

Last Name: _____ First Name: _____ MI: _____

Phone Number: _____ □ Cell □ Home □ Work

Address: _____

Email Address: _____ Lives with Client? □ Yes □ No

Relationship to Client? □ Spouse □ Child □Sibling □Friend □ Other: _____

Additional Services:

Would you be interested in additional information or participating in any of these additional services provided by Meals on Wheels Victoria? (Check all that apply).

□ Craft Program □ Not Interested □ Pet Assistance Program □ Not Interested

□ Library Delivery □ Not Interested □ Social Reassurance Program □ Not Interested

MEALS on WHEELS SOUTH TEXAS

Name: _____ Date: _____

Technology Survey

- Do you have a smartphone? □ Yes □ No
- Are you able to receive and reply to text messages? □ Yes □ No
- Do you have a computer or tablet? □ Yes □ No
- Do you know how to use apps such as FaceTime, Zoom or Skype? □ Yes □ No

  If so, which ones? _____
- Would you be interested in participating in virtual programs? □ Yes □ No
- Do you use Facebook? □ Yes □ No
- Do you have internet access/Wi-Fi at home? □ Yes □ No
- Do you use the internet at the public library, college library, or other public computer lab? □ Yes □ No
- Do you have anyone to help you with technology questions? □ Yes □ No
- Would you like to expand your knowledge with technology? □ Yes □ No

COMMENTS: _____

_____

_____