

Progress Center begins meals for the convalescent

By A.M. Sheehan
Editor

NORWAY — Anyone who has had surgery — even something as simple as a Cesarean section — will understand that moving around, lifting pots and baking dishes, can be a struggle. Especially if you are older.

People who live alone, are older or are the head of household and have others dependent on them, now have help.

Liz Blaquiere, of Norway, The Progress Center's community kitchen coordinator, and her gang of volunteers prepares "home-cooked," nutritionally balanced meals at The Progress Center for patients recovering from medical issues.

This is a brand new program offered by the center. The center's executive director, Jennifer Putnam, recalls watching Blaquiere serving a community meal last winter.

"I saw her making 'to-go' boxes and asked her what they were for. She told me she knew of people who were ill or recovering and couldn't make it to the meal so she was sending food home."

Putnam says she saw grant opportunities in that for a full-fledged program.

Almost a year later, with almost \$50,000 in grants (some of which are spread between this and other Progress Center programs), she had a formal program up and running in September. It is already at capacity.

"It only took 45 days to



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DES PLATS DU JOUR — *George Young shows a Norway patient the dishes of the day, or weekend, as he delivers them on Friday, Nov. 13.*

reach capacity," says Putnam.

Called Feel Better Food, the home-based nutrition intervention program reaches out to local rehab centers, nurse case managers and physician practices for referrals.

"This first year is the pilot," Putnam explains. "Is it successful? Are we making good line item decisions?"

Putnam notes that the mileage being racked up is far more than they anticipated but the

food costs are less.

One reason for food costs coming under expectations, is the amount of donated food, she says.

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How it works

"Someone has surgery or a stroke," explains Putnam. "They are going to be discharged and we get a referral with medical information release, dietary requirements and then we go into the home to do a patient assessment."

The program is temporary and only lasts for two to four weeks after discharge.

All meals are fully prepared, simple, comfort food that is easily digested and nutritionally complete.

But it's not that simple.

Each patient is different. Some might be lactose intolerant. Some might be diabetic. Some have strong preferences with regard to what they like and don't like.

Blaquiere takes all of this, including medical nutritional requirements, into consideration when planning her menus. No easy task considering she is making, for the most part, one menu/meal for all the patients.

Meals are delivered on Tuesdays and Fridays. Tuesday deliveries include a meal a day for three days. Friday deliveries are for four days worth of meals.

Sometimes that means more than one meal for a given day.

Further, if an adult patient has a spouse who cannot provide meals or children, enough food is prepared for the entire family.

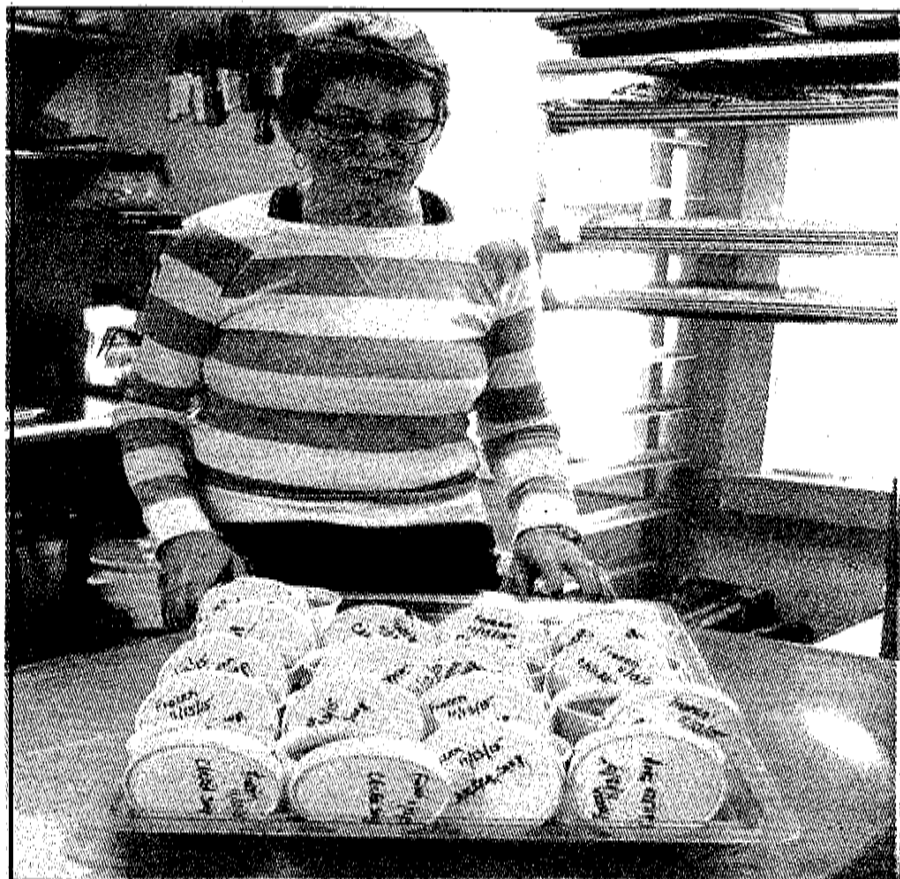
Once the program time is nearing its end, Blaquiere sits down with the patient to discuss alternate arrangements such as Meals on Wheels.

Friday

The community kitchen at the center is bustling with volunteers. Red cooler bags, large and small, are being packed with meals for 15 patients-plus and readied for loading into the cars of the two who will deliver the meals — Blaquiere and George Young.

For the next four days, the 15 patients and whatever family members are in need, will have four full meals.

One meal is roast chicken with stuffing, squash, mashed potatoes and gravy. Another is spinach lasagna, asparagus,



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COOKING AHEAD — *Liz Blaquiere readies a tray of cooling chicken soup to go in the freezer for Thanksgiving week meals for medical patients in need of assistance.*

This doesn't stop her enthusiasm for the meals he has brought.

"I hope you have something really good, like lobster!" she jokes as he carries the cooler in.

"We have roast pork, and roast chicken and spinach lasagna and although the sticker says green beans, that's really asparagus," he laughs.

"Oh good," she says, "I like that."

George proceeds to put the food carefully in her refrigerator.

She makes her way carefully, with the help of a cane, to her chair.

"This food has been such a blessing," she says.

Her phone rings and it's a daughter calling from North Carolina to check on her. "She calls me every day," the woman says.

new people," he says, "so I was asked if I would do this program. And Liz is really good at making sure people's needs are met."

He arrives at the next patient's home, in Norway.

"Come in," she sings out, with a big smile.

Her eyes light up as George shows her the selection of meals.

"Oh my gosh, I think it's wonderful ... I gained weight [eating these meals]!"

She says the food is not as good at the rehab center where she has been since August recovering from a broken pelvis.

"I eat mine at noon time and have enough left over I can eat it again for supper."

She says it's "those little things ... they add to it," referring to the bread, yogurt and fruit selections.

whole wheat bread and butter. A third is beans and hot dogs with brown bread and a fourth is a roast pork dinner with roasted potatoes and green beans.

Also in each delivery are fresh fruit, yogurt, fruit salad, maybe a muffin and, if there are children, perhaps some sugar-free cookies. For beverages there are milk and orange juice.

Each meal is specific to each patient.

For example, if there is a patient who has trouble chewing, Blaquiere will cut the meat and vegetables into tiny pieces so they would be easy to chew. Another, Blaquiere recalls, needs the soup thickened. And then there are those with restricted diets such as low sodium, no dairy or diabetic specific.

Blaquiere takes it a step further.

"I ask each patient what they like and don't like along with any allergies or restrictions," she says.

Blaquiere will make something else for those who don't like or have restrictions if she can't come up with an overall meal that works for all the patients. If the menu is beef stew and a patient doesn't like red meat, she will make a chicken stew for that person.

Young, of Norway, arrives and begins loading his car. He confers briefly with Blaquiere about who he is delivering to.

First stop is Harrison. He is greeted at the door by a lovely woman who is very pleased to see him.

Her pleasure, however, is bittersweet as this is the last delivery he will make to her. She has recovered and the program is ending for her.

She explains she was offered the program by the hospital when it was getting ready to release her. She was in the hospital for an urinary track infection, having had kidney stone surgery.

"I figured it was a wonderful thing [the program] but I probably wouldn't like the food."

She explains she likes to cook but just wasn't up to it when she came home.

"The food ... it's wonderful! And such a nice gentleman who brings it," she says with a twinkle.

"I ate every single thing they brought," she continues. She and George agree that one time there was a question about the soup. "There was some kind of spice in the vegetable soup." They agree they think it was sage.

She tells George she almost feels like herself again and is readying for the winter.

"I stock up with plenty of food and books." A "dabbler" in painting and a hand quilter, she says she has plenty to occupy herself through the long winter.

Young says he does this because he wants to do something close to home that is fulfilling.

He has a varied background that includes once working for the post office as a substitute letter carrier, which helps him navigate roads he learned back then for his food deliveries. He worked security for MBNA/Bank of America for a number of years and for an agency in Portland doing job placement.

Five years ago, he came to the center as an employment specialist helping clients find jobs in the community.

"I'm comfortable meeting

"I think this [program] is great, I am so satisfied with this ... someone coming home from rehab doesn't have to cook until they can get on their feet."

She says the variety of meals she has received were amazing – she can't remember a repeated meal. Normally, she says, she cooks for herself and love to cook.

"I love to bake, too, but it's going to be a while before I can bake."

Young says he tries to find some commonality with each patient he delivers to. This, he says, helps them be comfortable with him.

For example, he says, the lady in Harrison is an avid reader and so is he so they have something to share with each other on delivery days.

Young says it takes about two and a half hours to complete his deliveries. He doesn't drop and go, but puts the food away if needed and stops for a minute or two to talk with the patient.

Young's next stop is at a motel where the patient is temporarily staying while a ramp is being built on the home. This cooler is twice the size of the past two. There are more mouths to feed here.

He knocks on the door but no one answers. He says he will stop by again after his other deliveries and if no one answers then, he will have Blaquiere call the patient and set up a time.

One of the perks, Young says, is getting to work with some people who know his family. But more importantly, "I get to watch patients improve over a month's time ... it's great."

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