

Multi-Year Implementation Plan
Fiscal Years 2007-2009



Annual Implementation Plan
Fiscal Year 2007

Area Agency on Aging of Northwest Michigan
Gregory E. Piaskowski, Executive Director
1609 Park Drive, PO Box 5946
Traverse City, MI 49696

(231) 947-8920

Multi-Year Implementation Plan - FY 2007 - 2009

Annual Implementation Plan FY 2007

Table of Contents

| | | |
|-------------|---|----|
| I. | Executive Summary | 4 |
| A. | Narrative | 8 |
| B. | Planned Services Summary | 9 |
| C. | Planned Services Summary Narrative..... | |
| II. | Budget and Organizational Chart | 10 |
| A. | FY 2007 Area Plan Grant Budget and Services Detail | 11 |
| B. | FY 2007 Operating Budget & Wages and Salaries Budget..... | 14 |
| C. | Organizational Chart..... | 16 |
| III. | Statement of Need | 17 |
| A. | Demographics | 18 |
| D. | Evaluation of Unmet Needs..... | 23 |
| E. | Available Resources and Partnerships..... | 26 |
| IV. | Service Delivery Plan | 28 |
| A. | Targeting..... | 29 |
| B. | Access Services | 30 |
| C. | In-Home Services | 32 |
| D. | Community Services..... | 33 |
| E. | AAA Administered Direct Services | 34 |
| V. | Program Development Objectives | 35 |
| VI. | Advocacy Strategy | 42 |
| VII. | Community Focal Points | 44 |

| | |
|--|-----------|
| VIII. Appendices | |
| A. Input Forums and Public Hearing | 51 |
| B. Membership of the Board of Directors | 56 |
| C. Membership of the Advisory Council..... | 58 |
| D. Proposal Selection Criteria | 60 |
| F. Regional Service Definitions | 63 |
| G. FY 2007 Transfers | 66 |
| H. FY 2007 Nutritionist Budget..... | 67 |
| I. Administration of Direct Services | 68 |
| | |
| IX. Assurances and Certifications | 75 |
| A. Assurances and Certifications | 76 |
| B. Assurance of Compliance with the Title VI of the Civil Rights Act of 1964..... | 78 |
| C. Assurance of Compliances with the Elliot Larsen Civil Rights Act, PA 453 of 1976 | 80 |
| | |
| X. Signature Page..... | 81 |
| | |
| Glossary of Acronyms | 83 |

I.

Executive Summary

FY 2007-2009 MULTI-YEAR PLAN and FY 2007 ANNUAL IMPLEMENTATION PLAN

EXECUTIVE SUMMARY Narrative

The Area Agency on Aging of Northwest Michigan is a private, non-profit agency designated to serve the following ten counties which compose Region 10: Antrim, Benzie, Charlevoix, Emmet, Grand Traverse, Kalkaska, Leelanau, Manistee, Missaukee and Wexford. The Mission Statement of The Area Agency on Aging of Northwest Michigan (AAANM) reads:

The Mission of the Area Agency on Aging of northwest Michigan is to serve the older adults and certain persons with disabilities ... by coordinating services that address their needs and that support their independence, dignity, and quality of life ... and strive to be an effective advocate for our community.

Within the context of this Mission Statement, AAANM has a variety of roles in providing leadership, information, expertise, services and financial resources to support older persons in the Region. Responsibilities associated with the Mission include: focus on the needs of the client, reinforcing and supporting the responsibility of the clients to direct their own destiny, monitoring, evaluating and training providers of services, and the maintenance of professional standards. This is achieved by fulfilling the mandate outlined in the Older Americans Act for Area Agencies on Aging: "...to foster the development and implementation of comprehensive and coordinated service systems." This mandate is accomplished through carrying out the four basic functions outlined for AAA's in the Older American's Act, as well as the rules promulgated in response to the Older Michiganian's Act. These are

- ◆ Planning
- ◆ Program Development
- ◆ Advocacy
- ◆ Funding Services

Planning elicits a process of assessment of needs, data collection, analysis and identification of service gaps. Program Development provides an opportunity to use the expertise and energy of Area Agency on Aging of Northwest Michigan to look at specific service needs, refinements or public-private partnerships to begin to fill the service gaps. Advocacy has many facets: to use change or modify state policy through legislative advocacy or participation in state-wide work groups, to address service gaps by similar means, and to represent the special interests of groups and/or individuals to gain advantage or access for those individuals and /or groups. The ability to fund services on a Region-wide basis should cause the development of a systems approach to service delivery.

Over its 30+ years of service, the aging network in Northwest Michigan can boast of numerous successes and accomplishments as a result of the efforts of many people who have worked or volunteered in that network. The many successes are the culmination of the collective efforts of the network. It is impossible to isolate one person, one event or one organization that has been the most influential. Some of our past efforts and more recent accomplishments include:

1. Working with providers to coordinate and provide Care Management and MI Choice Waiver services required by the clientele we serve.
2. A refocusing of the collective responsibility of the Aging Network in Northwest Michigan through continued technical assistance offered from AAANM to county aging units.
3. Developing new strategies and concepts for a Regional Outreach effort
4. Working toward a different mode of service contracting and delivery focusing shrinking resources on persons at greater risk and with greater need.
5. Greater focus of efforts to participation in state-wide groups to change Michigan's Long Term Care system, participation in Michigan Office of Services to the Aging (OSA) Task Forces for Information and Assistance (I & A) nutrition and services.
6. Initiated beginning stages of establishing collaborative and cooperative arrangements, developing concepts and implementing strategies for consideration of AAANM as a Single Point (SPE) of Entry for Long-Term Care (LTC) services.

However, we cannot rest on our past accomplishments but need to look toward the future

- > as the population continues to grow older,
- > as the number of elderly persons continues to increase, and
- > as the pressure on our long-term care systems increases.

The challenges before the Aging Network include:

- > Assuring that Community Based Care is an element of Michigan's long-term care system;
- > Assuring that Michigan's long-term care system includes options and choices of care settings for customer;
- > Developing a cadre of trained and caring in-home services workers; and, assuring that the interests of older persons are served at all levels of government.

In the development of this Three Year Plan , Area Agency on Aging of Northwest Michigan has had the highest degree of public involvement ever attempted. This in an effort to provide an opportunity for all who are involved and interested, including older persons, caregivers, service providers and the public to express their ideas, issues and views on policies and programs.

The Plan serves as a guide for Area Agency on Aging of Northwest Michigan in channeling its energy and resources. It provides a framework for attending to the identified needs while formulating alternative solutions to address those needs. Planning is essential in light of stagnant and decreasing resources and the need to channel those resources where they become most effective. Over the years, the emphasis has been placed on keeping people out of institutions and in their homes. That will continue to be the emphasis because it is the overwhelmingly expressed desire of not only older consumers but also younger persons.

There primary goal areas or areas of emphasis that this Plan will deal with:

- ◆ Long-Term Care/SPE
- ◆ Long-Term Care Education and Counseling
- ◆ Information and Assistance
- ◆ Service quality and capacity

When these four areas of emphasis are viewed from afar, a vision of the future occurs - a vision of a continuum of care for older persons and persons with disabilities emerges. A vision where the family is supported in their caregiving efforts, where those efforts are enhanced, where the family's efforts are recognized for the value that they provide, and where quality, respect and dignity are the guiding beacon for the aging network in Northwest Michigan.

In the realm of senior services and long-term care, changes have occurred rapidly and will continue to occur. The network needs to decide whether to make the commitment and take the risk in order to continue to be involved. The advent of the MI Choice Program has placed Area Agency on Aging of Northwest Michigan as a key provider in the long-term care system. AAANM, along with the network, has to continue to build capacity and quality into the system of in-home services. A systems approach to the delivery of services to aging clients needs to be continually developed and evaluated. AAANM is committed to participating in partnerships that help increase these goals. Current partnership projects include: recruitment and training of in-home services workers, Northwest Regional Transportation Alliance, pursuing designation as an SPE and developing the components of an SPE particularly I&A, LTC Counseling and Education and cooperative arrangements to fully realize the SPE concept. That is the purpose of this Plan - to build on established programs and participate in partnerships that expand options within the aging network and beyond.

Our Mission is clear: we must continue to serve a growing constituency that is demanding quality services with limited resources, a paradox at best. Planning, Advocacy, Program Development, Service Funds and the privilege of providing Care Management Services are the tools we are given.

Fiscal Year 2007 – Planned Services Summary

| Service | Percent of the Total | Method of Provision | | |
|---|----------------------|---------------------|------------------|----------------|
| | | Purchased | Contract | Direct |
| ACCESS SERVICES | 22.96% | | | |
| Care Management | 19.24% | | | X |
| Case Coordination & Support | 0.00% | | | |
| Information & Assistance | 3.00% | | X | X |
| Outreach | | | | |
| Transportation | 0.73% | X | X | |
| IN-HOME SERVICES | 50.95% | | | |
| Homemaking | 3.55% | X | | |
| Home Delivered Meals | 26.13% | | X | X * |
| Medication Management | 1.99% | X | | |
| Personal Care | 7.15% | X | | |
| Personal Emergency Response System | 1.05% | X | | |
| Respite Care | 11.09% | X | | |
| COMMUNITY SERVICES | 22.17% | | | |
| Adult Day Care | 1.97% | X | X | |
| Congregate Meals | 17.67% | | X | X * |
| Nutrition Education | 0.00% | | | |
| Disease Prevention/Health Promotion | 0.09% | | X | |
| Health Screening | 0.00% | | X | |
| Legal Assistance | 0.82% | | X | |
| Long Term Care Ombudsman/Advocacy | 0.94% | | X | |
| Senior Center Staffing | 0.29% | | X | |
| Programs for Prevention of Elder Abuse, Neglect, & Exploitation | 0.22% | | X | |
| Caregiver Education, Support, & Training | 0.18% | | X | |
| Kinship Respite Care | | | | |
| Program Development | 2.18% | | | |
| REGION-SPECIFIC | 1.75% | | | |
| Caregiver Supplemental Services | 0.18% | X | | |
| Grandparent Support | 0.29% | X | | |
| Private Duty Nursing | 1.28% | X | | |
| | | | | |
| TOTAL PERCENT | 100.00% | 27.66% | 50.53% | 21.81% |
| TOTAL FUNDING | 2,805,108 | 775,946 | 1,417,452 | 611,710 |

* Regional Dietitian on staff at AAANM - expenses detailed on Appendix H

Planned Services Summary Narrative

1. A significant increase in the budgeted amount of purchased services is planned for the FY 2007 –2009 planning cycle, while the same time frame will see a significant decrease in the amount budgeted for Contracted Services. All Homemaker, Personal Care and Respite services will be purchased by AAANM, beginning in FY 2007. The number of clients and units that will be reported for these services will also be affected by this change.

II.

Budget & Organizational Chart

AREA PLAN GRANT BUDGET

Agency: Area Agency on Aging of NW MI

Budget Period: 10/01/06 to 09/30/07

PSA: 10

Date: 7/06/06

Rev. No.: 2 Page 1 of 3

| SERVICES SUMMARY | | | |
|-----------------------------------|---------------------|--------------------|------------------|
| FUND SOURCE | SUPPORTIVE SERVICES | NUTRITION SERVICES | TOTAL |
| 1. Federal Title III-B Services | 382,858 | | 382,858 |
| 2. Fed Title III-C1 (Congregate) | | 374,542 | 374,542 |
| 3. State Congregate Nutrition | | 15,686 | 15,686 |
| 4. Federal Title III-C2 (HDM) | | 188,021 | 188,021 |
| 5. State Home Delivered Meals | | 393,228 | 393,228 |
| 8. Fed Title III-D (Prev. Health) | 25,962 | | 25,962 |
| 9. Federal Title III-E (NFCSP) | 162,152 | | 162,152 |
| 10. Federal Title-A | - | | - |
| 10 Federal TitleVII-EAP | 6,243 | | 6,243 |
| 11. State Access | 33,355 | | 33,355 |
| 12. State In-Home | 109,916 | | 109,916 |
| 13. State Alternative Care | 132,091 | | 132,091 |
| 14. State Care Management | 505,579 | | 505,579 |
| 15. State Ombudsman | 22,088 | | 22,088 |
| 16. State Senior Center Staff | - | | - |
| 17. Local Match | | | |
| a. Cash | 1,178,981 | 361,761 | 1,540,742 |
| b. In-Kind | 99,925 | 180,763 | 280,688 |
| 18. State Respite Care (Escheat) | 58,763 | | 58,763 |
| 19. State Tobacco Respite Care | 151,295 | | 151,295 |
| 20. USDA | | 256,946 | 256,946 |
| 21. Program Income | 308,787 | 518,482 | 827,269 |
| TOTAL: | 3,177,995 | 2,289,429 | 5,467,424 |

| ADMINISTRATION | | | | |
|--------------------------------------|----------------|---------------|---------------|----------------|
| Revenues | | Local Cash | Local In-Kind | Total |
| Federal Administration | 125,948 | 39,000 | 21,827 | 186,775 |
| State Administration | 21,502 | | | 21,502 |
| State Tobacco Respite Administration | 13,616 | | | 13,616 |
| Interest Income | 14,000 | | | 14,000 |
| Total: | 175,066 | 39,000 | 21,827 | 235,893 |

| Expenditures | | |
|----------------------|------|----------------|
| | FTEs | |
| 1. Salaries/Wages | 2.75 | 125,299 |
| 2. Fringe Benefits | | 46,637 |
| 3. Office Operations | | 63,957 |
| Total: | | 235,893 |

| Cash Match Detail | | In-Kind Match Detail | |
|-------------------|---------------|----------------------|---------------|
| Source | Amount | Source | Amount |
| County Funds | 39,000 | Board Expenses | 21,827 |
| | | | |
| | | | |
| | | | |
| Total: | 39,000 | Total: | 21,827 |

I certify that I am authorized to sign on behalf of the Area Agency on Aging. This budget represents necessary costs for implementation of the Area Plan. Adequate documentation and records will be maintained to support required program expenditures.

Authorized signature on Area Agency on Aging of Northwest Michigan Signature Page. See MYP page 82.

FY 2007 AREA AGENCY GRANT FUNDS - SUPPORT SERVICES DETAIL

Agency: **AREA AGENCY ON AGING OF NORTHWEST MICHIGAN**
 PSA: 10

Budget Period: 10/01/06
 Date: 07/06/06

to 09/30/07
 Rev. No.: 4

Rev. 7/06/06
 page 2 of 3

| SERVICE CATEGORY | Title III-B | Title III-D | Title III - E | Title VII | State Access | State In-Home | St. Alt. Care | State Care Mgmt | State NHO | St. Respite (Escheat) | Tobacco Respite | Medicaid Match | Program Income | Cash Match | In-Kind Match | TOTAL |
|--------------------------|-------------|-------------|---------------|-----------|--------------|---------------|---------------|-----------------|-----------|-----------------------|-----------------|----------------|----------------|------------|---------------|-----------|
| 1. Access | | | | | | | | | | | | | | | | |
| a. Care Management | 675 | | | | 33,355 | | | 505,579 | | | | 45,000 | | | 68,000 | 652,609 |
| d. Information & Assist | 65,065 | | 19,000 | | | | | | | | | | 1,800 | 264,094 | 244 | 350,203 |
| f. Transportation | 3,000 | | | | | | | | | | 17,500 | | 6,792 | 40,122 | 3,000 | 70,414 |
| 2. In-Home | | | | | | | | | | | | | | | | |
| d. Homemaking | 21,220 | | | | | 33,102 | 45,320 | | | | | | 78,050 | 366,417 | 1,278 | 545,387 |
| f. Medication Mgt | | 6,740 | | | | | | | | | | | | | 520 | 7,260 |
| g. Personal Care | 129,693 | | | | | 33,066 | 86,771 | | | | | | 43,950 | 152,591 | 7,778 | 453,849 |
| h. PERS | 4,617 | 16,832 | | | | 7,898 | | | | | | | | | 1,450 | 30,797 |
| i. Respite Care | 62,364 | | 124,931 | | | | | | | 58,763 | 64,937 | | 22,800 | 94,490 | 1,388 | 429,673 |
| 3. Legal Assistance | 22,900 | | | | | | | | | | | | | | 2,544 | 25,444 |
| 4. Community Services | | | | | | | | | | | | | | | | |
| a. Adult Day Care | | | | | | | | | | | 55,242 | | 154,857 | 218,619 | 4,060 | 432,778 |
| c. Disease Prevent | | 2,390 | | | | | | | | | | | | | | 2,390 |
| g. LTC Ombudsman | 4,288 | | | | | | | | 22,088 | | | 17,216 | | | 2,928 | 46,520 |
| i. Sr Ctr Staffing | 8,000 | | | | | | | | | | | | | 31,332 | 4,415 | 43,747 |
| k. Elder Abuse Prevnt | | | | 6,243 | | | | | | | | | | 700 | | 6,943 |
| q. Caregiver E,S,T | | | 5,120 | | | | | | | | | | | | 525 | 5,645 |
| 5. Program Develop | 61,036 | | | | | | | | | | | | | 4,855 | | 65,891 |
| 6. Region Specific | | | | | | | | | | | | | | | | |
| a. Caregiver Supp Serv | | | 5,000 | | | | | | | | | | 260 | 5,761 | 1,520 | 12,541 |
| b. Grandparent Supp | | | 8,101 | | | | | | | | | | 278 | | 275 | 8,654 |
| c. PRIVATE DUTY POS | | | | | | 35,850 | | | | | | | | | | 35,850 |
| SUPPRT SERV TOTAL | 382,858 | 25,962 | 162,152 | 6,243 | 33,355 | 109,916 | 132,091 | 505,579 | 22,088 | 58,763 | 137,679 | 62,216 | 308,787 | 1,178,981 | 99,925 | 3,226,595 |

AREA PLAN GRANT BUDGET-NUTRITION SERVICES DETAIL

Agency: Area Agency on Aging of NW MI
 PSA: 10

Budget Period: 10/01/06 to 09/30/07
 Date: 03/24/06

Rev. Number: 0
 Rev. 0
 page 3 of 3

| SERVICE CATEGORY | Title III C-1 | Title III C-2 | State | State HDM | USDA | Program | Cash | In-Kind | TOTAL |
|--------------------------|---------------|---------------|------------|-----------|---------|---------|---------|---------|-----------|
| | | | Congregate | | | Income | Match | Match | |
| 6. Nutrition Services | | | | | | | | | |
| 1. Congregate Meals | 337,300 | | 15,686 | | 105,305 | 253,228 | 114,801 | 90,019 | 916,339 |
| 2. Home Delivered Meals | | 186,823 | | 354,168 | 151,641 | 265,254 | 246,960 | 90,744 | 1,295,590 |
| 3. Nutrition Counseling | | | | | | | | | 0 |
| 4. Nutrition Education | 37,242 | 1,198 | | 39,060 | | | | | 77,500 |
| 5. Regional | | | | | | | | | 33,887 |
| Nutrition Services Total | 374,542 | 188,021 | 15,686 | 393,228 | 256,946 | 518,482 | 361,761 | 180,763 | 2,289,429 |

AREA AGENCY ON AGING--OPERATING BUDGET

PSA: 10
Agency: AAANM

Budget Period: 10/1/2006 to 9/30/2007

3/17/2006
Rev. No.: 0 Page 1 of 2

| Operations | | Program Services/Activities | | | | | | | | | | |
|------------|---------|-----------------------------|-----|------|----------|---------|--------|------------------|----------|-----------|-----------|-------|
| Admin | Develop | CARE MANAG | & R | MAPP | NUT MANG | TITLE V | WAIVER | OTHER (IN-HOUSE) | PRIORITY | COMMUNITY | NUTRITION | TOTAL |

| REVENUES | | | | | | | | | | | | | |
|----------------------|----------------|---------------|----------------|---------------|---------------|---------------|----------------|------------------|---------------|------------------|------------------|------------------|------------------|
| Federal Grants | 125,948 | 61,036 | 675 | 11,065 | 16,051 | 38,440 | 102,919 | 2,486,216 | | 151,294 | 552,116 | 524,123 | 4,069,883 |
| State Grants | 21,502 | | 505,579 | | | 39,060 | | | | 202,034 | 411,125 | 369,854 | 1,549,154 |
| Local Cash Match | 32,753 | 4,855 | | 1,392 | | | | 18,342 | | 493,118 | 763,551 | 828,606 | 2,142,617 |
| Local In-Kind Match | 21,827 | | 68,000 | | | | 10,620 | | | 9,115 | 13,788 | 129,942 | 253,292 |
| Interest Income | 14,000 | | | | | | | | | | | | 14,000 |
| Program income/rents | | | | | | | | | 49,000 | 190,049 | 119,895 | 588,978 | 947,922 |
| TOTAL | 216,030 | 65,891 | 574,254 | 12,457 | 16,051 | 77,500 | 113,539 | 2,504,558 | 49,000 | 1,045,610 | 1,860,475 | 2,441,503 | 8,976,868 |

| EXPENDITURES | | | | | | | | | | | | | |
|-----------------------------|----------------|---------------|----------------|---------------|---------------|---------------|----------------|------------------|---------------|------------------|------------------|------------------|------------------|
| Contractual Services | | | | | | | 77,189 | | | 812,093 | 1,437,414 | 2,283,085 | 4,609,781 |
| Purchased Services | | | | | | | | 1,921,166 | | 192,941 | 368,112 | 28,476 | 2,510,695 |
| Wages and Salaries | 116,650 | 38,511 | 299,038 | 7,415 | 14,699 | 45,595 | 17,189 | 341,128 | 17,770 | 13,636 | 22,643 | | 934,274 |
| Fringe Benefits / taxes | 43,467 | 14,631 | 111,371 | 2,474 | 1,352 | 16,817 | 5,883 | 128,882 | 1,271 | 10,377 | 10,004 | | 346,529 |
| Professional Services | 5,203 | 1,827 | 13,641 | 368 | | 2,162 | 286 | 17,086 | 1,229 | 1,068 | 1,220 | | 44,090 |
| Accounting & Audit Services | | | | | | | | | | | | | 0 |
| Legal Fees | | | | | | | | | | | | | 0 |
| Occupancy | 6,504 | 2,284 | 17,726 | 460 | | 2,703 | 966 | 24,516 | 287 | 1,334 | 1,525 | | 58,305 |
| Insurance | | | | | | | | | | | | | 0 |
| Office Equipment | | | | | | | | | | | | | 0 |
| Equip./Maint. | 3,547 | 1,246 | 9,300 | 251 | | 1,474 | 288 | 11,649 | 157 | 728 | 832 | | 29,472 |
| Office Supplies | 1,537 | 540 | 4,031 | 109 | | 639 | 288 | 3,894 | 24,000 | 315 | 361 | | 35,714 |
| Printing & Publication | | | | | | | | | | | | | 0 |
| Postage | | | | | | | | | | | | | 0 |
| Communications | 6,504 | 2,284 | 17,051 | 460 | | 2,703 | 288 | 12,677 | 287 | 1,334 | 1,525 | | 45,113 |
| Travel | 8,514 | 2,990 | 22,320 | 602 | | 3,539 | 402 | 27,959 | 375 | 1,747 | 1,997 | | 70,445 |
| Conferences | | | | | | | | | | | | | 0 |
| Memberships | | | | | | | | | | | | | 0 |
| Other (Misc) | 2,277 | 1,578 | 11,776 | 318 | | 1,868 | 140 | 15,601 | 3,624 | 922 | 1,054 | | 39,158 |
| In-kind expenses | 21,827 | | 68,000 | | | | | | | 9,115 | 13,788 | 129,942 | 253,292 |
| | | | | | | | | | | | | | 0 |
| TOTAL | 216,030 | 65,891 | 574,254 | 12,457 | 16,051 | 77,500 | 113,539 | 2,504,558 | 49,000 | 1,045,610 | 1,860,475 | 2,441,503 | 8,976,868 |

AREA AGENCY ON AGING--WAGES AND SALARIES

PSA: 10
Agency: AAANM

Budget Period: 10/1/2006 to: 9/30/2007

Date of Budget 3/24/2006

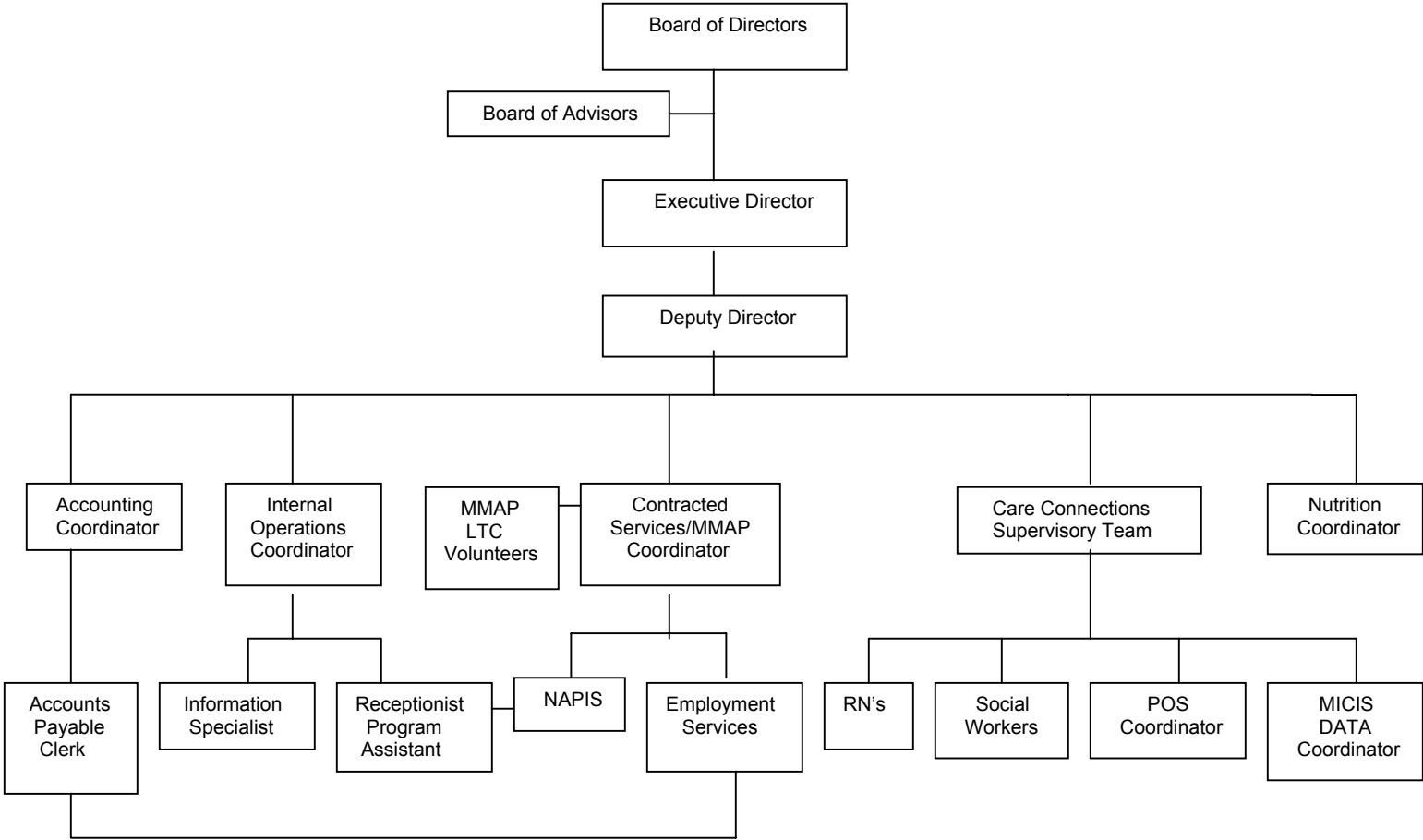
Rev. #. Page 1 of 2

| JOB CLASSIFICATION | FTEs | Operations | | CARE | I & R | MAPP | NUT | TITLE | WAIVER | OTHER | TOTAL |
|---------------------------------------|--------------|-------------------|------------------|-------------------|-----------------|------------------|------------------|------------------|-------------------|------------------|-------------------|
| | | Admin | Program Develop | MANAG | | | MANG | V | | | |
| EXECUTIVE DIRECTOR | 1 | 33,437.00 | 9,127.00 | 9,371.00 | 775.00 | 11,767.00 | 6,048.00 | | 2,000.00 | 7,475.00 | 80,000.00 |
| DEPUTY DIRECTOR | 1 | 15,707.00 | 5,958.00 | 5,416.00 | | | 8,666.00 | 5,417.00 | 10,855.00 | 2,144.00 | 54,163.00 |
| ACCOUNTING COORDINATOR | 1 | 10,920.00 | 8,299.00 | 6,552.00 | | 1,747.00 | 4,586.00 | | 10,265.00 | 1,311.00 | 43,680.00 |
| NUTRITION COORDINATOR | 1 | | | | | | 25,110.00 | | | | 25,110.00 |
| INTERNAL OPERATIONS COORD | 1 | 15,350.00 | | | | | | | 18,762.00 | | 34,112.00 |
| CONT.SERV./MMAP/ EMPLOYEMNT COORD. | 1 | 12,760.00 | 5,316.00 | 3,544.00 | 3,544.00 | | | 8,214.00 | 1,772.00 | 293.00 | 35,443.00 |
| MICIS DATA COORDINATOR | 1 | 1,542.00 | 1,851.00 | 15,115.00 | | | | | 12,339.00 | | 30,847.00 |
| RECEPTIONIST/Prog Assistant | 0.8 | 3,711.00 | 4,870.00 | 2,899.00 | 232.00 | | | | 11,480.00 | | 23,192.00 |
| INFORMATION SPECIALIST | 1 | 3,924.00 | 2,616.00 | 1,962.00 | 654.00 | | | | 3,924.00 | | 13,080.00 |
| POS COORDINATOR | 1 | 4,605.00 | | 9,578.00 | 2,210.00 | | | | 20,260.00 | 184.18 | 36,837.18 |
| ACCOUNTS PAYABLE | 0.8 | 7,109.00 | 474.00 | 1,422.00 | | 1,185.00 | 1,185.00 | | 12,322.00 | - | 23,697.00 |
| NAPIS | 0.8 | 4,091.00 | | | | | | 3,558.00 | 10,139.00 | - | 17,788.00 |
| CARE CONNECTIONS SUPERVISOR | 2 | 3,494.00 | | 42,370.00 | | | | | 41,059.00 | 437.00 | 87,360.00 |
| RN - I | 2.8 | | | 50,673.00 | | | | | 46,650.00 | 6,344.00 | 103,667.00 |
| RN - II | 1.8 | | | 30,343.00 | | | | | 28,153.00 | 4,066.00 | 62,562.00 |
| RN - III | 1.6 | | | 30,010.00 | | | | | 27,844.00 | 19,762.00 | 77,616.00 |
| SW - I | 5 | | | 89,783.00 | | | | | 83,304.00 | 12,033.00 | 185,120.00 |
| | | | | | | | | | | | - |
| | | | | | | | | | | | - |
| TOTAL | 24.60 | 116,650.00 | 38,511.00 | 299,038.00 | 7,415.00 | 14,699.00 | 45,595.00 | 17,189.00 | 341,128.00 | 54,049.18 | 934,274.18 |

Area Agency on Aging of Northwest Michigan

Organizational Chart

FY 2007



III.

Statement of Need

**Map of Region 10
Area Agency on Aging of NW Michigan**



A. Population Characteristics

| County | Total Population of All Ages | Total Population Age 60 and over | %Age 60 and Over as a % of Total Population of All Ages | Poverty Status for Age 65+ (1999) | Total Relative Caregivers |
|-----------------------|------------------------------|----------------------------------|---|-----------------------------------|---------------------------|
| Antrim | 23,110 | 5,459 | 23.62% | 258 | 136 |
| Benzie | 15,998 | 3,729 | 23.31% | 140 | 90 |
| Charlevoix | 26,090 | 5,202 | 19.92% | 222 | 127 |
| Emmet | 31,437 | 5,898 | 18.76% | 326 | 115 |
| Grand Traverse | 77,654 | 13,225 | 17.03% | 566 | 220 |
| Kalkaska | 16,571 | 3,127 | 18.87% | 161 | 110 |
| Leelanau | 21,119 | 4,827 | 22.86% | 154 | 68 |
| Manistee | 24,527 | 5,796 | 23.63% | 338 | 121 |
| Missaukee | 14,478 | 2,878 | 19.89% | 216 | 95 |
| Wexford | 30,484 | 5,692 | 18.67% | 350 | 179 |
| Regional Total | 281,468 | 55,833 | 19.84% | 2731 | 1,261 |

Note:

1. The information contained in following charts has been compiled from the U.S. Bureau of the Census, 2000 Census, unless otherwise noted.
2. Total Relative Caregivers, information compiled from Census 2000, Grandparents as Caregivers, grandparents living in household with one or more own grandchildren under 18 years where the grandparent is responsible for the grandchildren.

B. Race / Ethnicity age 60 and Over

| County | Black or African American | American Indian and Alaska Native | Asian | Native Hawaiian and Other Pacific Islander | Some Other Race | Two or More Races | Hispanic or Latino * | Total Minority | White | Total Race/ Ethnicity Population |
|-----------------------|---------------------------|-----------------------------------|-------|--|-----------------|-------------------|----------------------|----------------|--------|----------------------------------|
| Antrim | 4 | 15 | 5 | 1 | 4 | 28 | 21 | 57 | 5,402 | 5,459 |
| Benzie | 4 | 19 | 2 | 0 | 4 | 18 | 19 | 47 | 3,682 | 3,729 |
| Charlevoix | 4 | 53 | 1 | 0 | 1 | 19 | 12 | 78 | 5,124 | 5,202 |
| Emmet | 9 | 112 | 7 | 1 | 0 | 26 | 20 | 155 | 5,743 | 5,898 |
| Grand Traverse | 8 | 50 | 19 | 3 | 9 | 45 | 50 | 134 | 13,091 | 13,225 |
| Kalkaska | 5 | 11 | 5 | 0 | 0 | 13 | 10 | 34 | 3,093 | 3,127 |
| Leelanau | 1 | 57 | 4 | 0 | 6 | 15 | 16 | 83 | 4,744 | 4,827 |
| Manistee | 10 | 29 | 4 | 2 | 6 | 18 | 29 | 69 | 5,727 | 5,796 |
| Missaukee | 4 | 8 | 2 | 0 | 1 | 19 | 10 | 34 | 2,844 | 2,878 |
| Wexford | 3 | 14 | 6 | 0 | 3 | 26 | 17 | 52 | 5,640 | 5,692 |
| Regional Total | 52 | 368 | 55 | 7 | 34 | 227 | 204 | 743 | 55,090 | 55,833 |

* The Hispanic or Latino figures are included in the total of the various races / ethnicities listed above and therefore are not included as part of the Total Minority figures.

C. Race / Ethnicity Below Poverty – age 65 and over

| County | Black or African American | American Indian and Alaska Native | Asian | Native Hawaiian and Other Pacific Islander | Some Other Race | Two or More Races | Hispanic or Latino | Total Minority | White | Total Race/ Ethnicity Population |
|-----------------------|---------------------------|-----------------------------------|-------|--|-----------------|-------------------|--------------------|----------------|-------|----------------------------------|
| Antrim | 0 | 0 | 0 | 0 | 0 | 2 | 2 | 4 | 256 | 260 |
| Benzie | 0 | 0 | 0 | 0 | 2 | 0 | 4 | 6 | 138 | 144 |
| Charlevoix | 0 | 7 | 0 | 0 | 0 | 0 | 9 | 16 | 215 | 231 |
| Emmet | 0 | 8 | 0 | 0 | 0 | 0 | 8 | 16 | 318 | 334 |
| Grand Traverse | 0 | 6 | 0 | 0 | 0 | 5 | 1 | 12 | 555 | 567 |
| Kalkaska | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 1 | 153 | 154 |
| Leelanau | 0 | 9 | 0 | 0 | 0 | 3 | 0 | 12 | 149 | 161 |
| Manistee | 0 | 0 | 0 | 0 | 0 | 2 | 0 | 2 | 336 | 338 |
| Missaukee | 0 | 0 | 2 | 0 | 0 | 2 | 0 | 4 | 212 | 216 |
| Wexford | 0 | 0 | 0 | 0 | 0 | 1 | 2 | 3 | 349 | 352 |
| Regional Total | 0 | 31 | 2 | 0 | 2 | 15 | 26 | 76 | 2,681 | 2,757 |

D. Population Changes from Census 1990 to Census 2000

| Regional Demographics | Census 1990 | Census 2000 | Difference | Comments |
|--|-------------|-------------|------------|---|
| Total Population of all Ages | 230,962 | 281,468 | 50,506 | Total population in Region 10 increased by 50,506 individuals. |
| Residents age 60 and over | 44,664 | 55,833 | 11,169 | Residents age 60 and over increased by 11,169 individuals. |
| % of Age 60 and Over as a % of Total Population of All Ages | 19.34 % | 19.84 % | 2.5% | The percentage of persons age 60 and over as a percent of the total population of all ages increased by 2.5%. |
| Total Minority Age 60 and Over | 401 | 743 | 342 | Total minority persons age 60 and over increased by 546 individuals. |
| Total White Age 60 and Over | 44,263 | 55,090 | 10,827 | Total white persons age 60 and over increased by 10,827 individuals. |
| Minority Below Poverty Age 65 and Over | 89 * | 76 | NA | Minority persons below poverty age 65 and over decreased by 13 individuals. |
| White Below Poverty Age 65 and Over | 4,566 * | 2,681 | NA | White persons age 65 and over decreased by 1,885 individuals. |

* 1990 Census poverty figures are for Age 60 and Over. Source: U.S. Bureau of the Census, 1990 Census and 2000 Census

NOTE ON DEMOGRAPHIC CHANGES SINCE 2000 Census: Based on Census Projections through 2004 published by the NW Michigan Council of Governments: The senior population in Region 10 is projected to grow by an average of 7.58% per county in the four years between 2000 and 2004. Eight of the 10 counties in Region 10 are projected to be in the top 1/3 of Michigan counties in overall population growth between 2000 and 2005. Five of the 10 counties are expected to increase senior population by 9% or more over these 4 years.

UNMET NEEDS AND PRIORITY SETTING

Historic Perspective

When the history of the Area Agency on Aging of Northwest Michigan (AAANM) is written, the evolution of service delivery system in the Region will be the topic that shows greatest change with the greatest impact. The change from a social/recreation model to a health/social model will be evident. Today, with a greater emphasis on Home and Community Based Services, participation in the MI Choice program and changes in Michigan's Long Term Care system, there is a redefining of service delivery, the aging services network and the mechanisms by which clients access the service systems. The changes began in 1998, continue today, and will continue over the next decade.

These changes have been embraced with varying levels of enthusiasm, participation and support by providers but are a necessary direction for the network. Led by the Department of Community Health (DCH) and the Michigan Office of Services to the aging (OSA) and employing the principles of "Person Centered Planning," the focus has to be on the "customers" and not on the agencies and organizations.

Determining Unmet Needs

Need identification is a continuous process at AAANM. The various methods employed consistently, and in particular for this Multi-Year Plan (MYP) include:

1. A continuous dialogue between the Board of Directors (BOD), Board of Advisors (BOA), staff and providers,
2. Plan input sessions held in Wexford and Grand Traverse Counties,
3. Ongoing monitoring and assessment of service delivery and care management systems. This provides the opportunity to determine client needs in the environment of the client's home setting. It also allows ongoing monitoring of service quality. This has been a very good means of identifying service gaps and associated problems,
4. Participation in various local and Regional committees, agencies and groups, including Regional and local conferences and a continuing review of the Regional media,
5. An "Unmet Needs Survey" was conducted beginning in October of 2005 and continuing into the spring of 2006. The survey was distributed to various constituent groups and results were tabulated and was used in determining unmet needs.

The Advocacy, Program Development and Funding objectives all flow from these efforts. It is also true that the unmet needs have not significantly changed from the last planning cycle, pointing to AAANM's recognition of the real needs and the inability of the existing systems to fully address those needs. Clearly the most significant change affecting AAANM's activities over the past six years has been the decline in the economy of the state and nation. Decreasing revenue streams have burdened our system of services and providers.

Unmet Needs, Problems and Priorities

The following list is a list of the Region's unmet needs and priorities. They are numbered for reference purposes, but not depicted in priority order:

1. The current economy poses special problems for health care and health care-related services and programs in general, this in light of the increasing cost of health care delivery.
2. The recruitment and retention of in-home service workers is a problem related to the delivery of quality in-home services. The cost associated with the ongoing effort of recruitment, orientation and training of these workers increases the cost of doing business.
3. Transportation for the elderly is another high needs area. Local transit systems are developing and looking at new services. These systems work hard at serving the elderly, but the transportation funding stream does not allow for the special needs of the at-risk, homebound elderly and disabled.
4. Housing and affordable housing options continue to be a major issue throughout the Region.
5. The need continues for service dollars to assist those elderly and disabled that do not qualify for Medicaid and may or may not be medically eligible for nursing home care. The H.O.M.E. program is an initiative developed by Michigan's Area Agencies on Aging as a method of delaying and/or preventing a person's reliance on Medicaid for home and community based services, as well as nursing home care. This program is woefully under funded.
6. The high cost of prescription drugs, preventative medical tests and long term care.
7. The growing importance of respite care, including adult day care, and the difficulty associated with the provision, funding and marketing of these services.
8. The importance of communication and marketing in light of shifts in the focus of aging services, with greater orientation to and emphasis on health care related services.
9. The need of continuing emphasis on employment issues associated with an aging population. The need for ongoing training and skills upgrade is essential to individuals maintaining skill and competence and being competitive in today's job markets.
10. A continued concentration of service dollars on in-home services, especially personal care, homemaker and home delivered meals, and evaluating the opportunity to provide other home-based services options.
11. Support for wellness, lifestyle and fitness programs as a method of health promotion and disease prevention.

12. Support increased funding for volunteer efforts aimed at assisting seniors and for senior volunteer service programs. Volunteer programs are vital to meeting senior needs and to maintaining meaningful opportunities for seniors in the Region.
13. The need for implementing changes to Michigan's Long Term Care (LTC) system by implementing the Single Point of Entry (SPE) concept in the Region.

Note: Appendix A, on pages 51-55 detail the input received on unmet needs and contains copies of the Legal Notices for the Public Input and Public Hearing sessions.

Resources and Partnerships

The following is a partial list of the resources and partners in the Region. This list, though comprehensive but not exhaustive, is the first line of resources generally called upon as the first response to the needs that exist in our Regional community. The resources and partners identified in the following list are called upon to assist in the Need Areas identified in the “Unmet Needs” section of this MYP. Need areas in which a particular partner, or group of partners, are called upon are identified with each group listed below.

1. AAANM has a Board of Directors, Advisory Board, staff and volunteers committed to its mission and in particular to its constituency. The federal and state dollars are significant as a financial resource for funding services. (All Need Areas)
2. All Counties in the Region have a millage devoted to Senior Services. Each of the county programs is unique in their service mix, administration and operation. Services provided by these funds are available to clients served by AAANM and AAANM regularly refers clients to these programs. Care management clients served by AAANM are benefactors of the millage funded programs. Locally these dollars either augment and/or match the funds of AAANM or fund services apart from AAANM dollars, making service opportunities more flexible than is often possible with federal and state funds because of the strings that accompany federal/state dollars. Locally voted millage funds are used to support the nutrition program, including congregate and home delivered meals and the broad spectrum of in-home services and generate approximately \$5.5 million dollars in the Region. (Need Areas 1,2,3,5,10)
3. The variety of service providers like Catholic Human Services and Munson Medical Center, nationally affiliated associations like the Alzheimer’s Association, health care providers and locally organized groups like the Community Services Network and Centers for Independent Living (CIL) are elements of a loosely organized alliance with many common interests. (Need Areas 1,2,3,5,7,8,11,13)
4. Community Focal Points and their responsibility to be identifiable points of contact and sources of information. (Need Areas 6,7,8,11,12,13)
5. State Associations and agencies are critical as a resource for advocacy efforts. AAANM through its State Association and the links it provides are of great value. (All Need Areas)
6. The Administration on Aging and the Assistant Secretary for Aging have a strong commitment to AoA’s proactive role in long term care. This commitment will serve the network as both a resource and an opportunity for a national partner in AAANM’s efforts to secure a more formidable role in long term care. (Need Areas 1,2,6,13)

AAANM has been cautious in developing partnerships with private businesses so as not to appear to be in competition with local providers. AAANM has encouraged the county aging units to partner with other organizations. AAANM is interested in any partnership arrangement that would meet its Mission and benefit its constituency. AAANM will be flexible and will evaluate each opportunity that is presented.

AAANM is still committed to assuming leadership in exploring the possibility of establishing a foundation fund to benefit constituents in Region 10 as a means to expand available resources.

IV.

Service Delivery Plan

Service Delivery Plan Targeting

Agency: Area Agency on Aging of Northwest Michigan - Region 10

| Baseline Data | | | African American | Native American | Asian / Pacific Islander | Hispanic | Low Income Minority | Low Income |
|---|--|---------|------------------|-----------------|--------------------------|----------|---------------------|------------|
| <u>Source:</u> Year-end report for FY 2005 | | | | | | | | |
| Indicate the number served by group and the percentage of that group's 60+ population that the number represents. | | | | | | | | |
| Supportive Services | | Number | 1 | 13 | 9 | 1 | 3 | 350 |
| | | Percent | 1.92% | 3.53% | 14.52% | 0.00% | 3.95% | 12.69% |
| Congregate Nutrition | | Number | 4 | 45 | 22 | 6 | 36 | 907 |
| | | Percent | 7.69% | 12.23% | 35.48% | 2.94% | 47.37% | 32.90% |
| Home Delivered Meals | | Number | 1 | 25 | 11 | 2 | 14 | 486 |
| | | Percent | 1.92% | 6.79% | 17.74% | 0.98% | 18.42% | 17.63% |

Desired Outcome (s) - outline by year, for each year of the MYP

- 2007 Increase overall participation by Native Americans in Supportive Services by 2% over 2005 levels
- 2008 Increase overall participation by Native Americans in Supportive Services by 6% over 2005 levels
- 2009 Increase overall participation by Native Americans in Supportive Services by 10% over 2005 levels
- 2007-2009 - Maintain at least current levels of participation by Minority groups in meal programs

Action: - outline by year for each year of the MYP

- 2007-2009 - Continued attention to work with the 3 Native American Bands in Region 10
- 2007 - Continue to strengthen ties to local Department of Human Service (DHS) Offices
- 2007 – AAANM Nutritionist will contact the 3 Native American Bands to look for joint opportunities for programming and / or training

Service Delivery Plan

Access

Agency: Area Agency on Aging of Northwest Michigan

Fiscal Year 2007 – 2009

Information and Referral (Assistance)

AAANM has provided a minimum established level of Information & Assistance (I & A) funding for each county in Region 10 since FY'97. Currently, \$6,000.00 is uniformly available to a provider in each County, with the expectation that this level of funding supports an equitable amount of Information and Assistance around the Region. In addition, the AAANM Caregiver Focal Point, Catholic Human Services (CHS), has been funded for a minimum of \$19,000.00 per year to provide Region-wide I & A services through the National Family Caregiver Support Program. AAANM will renew this concept of I & A funding for FY 2007-2009 to guarantee a base level of service in each County and, as funds allow, support the CHS I & A contracted service.

The refinement of the agency website, (www.aaanm.org) developed in FY 2000, will continue in FY 2007-2009. The site provides valuable information regarding the agency purpose and services, as well as links to other service agencies that provide Information and Referral to older adults. Funding provided to the AAANM Caregiver Focal Point, CHS, has also provided for the development of a website specifically designed for caregivers (www.caregiverNorth.org). The caregiver site is likewise linked to numerous other agencies providing I & A in Region 10 and beyond. Both AAANM and CHS have established and well-publicized 800 phone numbers.

During FY 2005, one AAANM staff person received I & A certification through the national Alliance of Information & Referral Systems (AIRS). This certification will be maintained with required testing at 2 year intervals. "I & A Minutes" have been a part of AAANM monthly contractor meetings on numerous occasions.

Beginning in FY 2007 AAANM staff will provide a more intense focus on I & A at quarterly contractor meetings. AAANM will also continue to be informed and participate, as appropriate, in the implementation of the 2-1-1 system as it evolves in Region 10.

Work initiated in FY 2006 in researching, purchasing and populating an electronic I & A data based system will continue and expand in FY 2007-09. The ultimate goal is to make this database available to all AAANM contractors in Region 10. The goal is to allow contractors to populate the system with the most current data and make the data available throughout the Region.

Other activities initiated in previous years that will continue include:

- * Distribution across the Region of a comprehensive caregiver training video series aimed at assisting family caregivers
- * Encouragement and support for the establishment of caregiver support groups
- * Continued outreach to family caregivers via local providers who focus on caregivers through conferences and public radio programming, expanding the contacts to groups not currently reached by AAANM
- * Technical assistance to Councils and Commissions on Aging related to I & A activities in an environment where resources are limited and collaboration is imperative.

SERVICE DELIVERY PLAN FOR ACCESS

Page 2

Outreach

AAANM does not fund Outreach efforts, but rather encourages contractors to seek out individuals in a variety of ways to inform them of the services that are available in their communities. Because of the primarily rural nature of Region 10, technical assistance is offered to all contractors, providing them with techniques that assist them in identifying those with the greatest needs (ie, economic and social needs, language barriers, Alzheimer's Disease and related disorders, and their caregivers). The "Rural Outreach Initiative," begun in the FY 2004-2006 planning cycle, will continue to be addressed with regard to how AAANM providers can identify and target underserved areas of their communities.

Encouragement of community focal points to participate in local multipurpose collaborative units, human services coordinating bodies, speakers bureaus, local religious and service organizations and established support groups for dementia, Alzheimer's, Parkinson's Disease and others is an on-going process and will continue during FY 2007-09. Media attention, support groups and training opportunities for caregivers and older adults raising children will be a continued focus of AAANM activities.

During FY 2006, AAANM sought to strengthen ties with the three Native American tribes serving within the Region. In FY 2007, AAANM will continue to work with these the tribes to make sure that the needs of Native American elders are addressed.

Transportation

AAANM has provided funding for transportation to Adult Day Care (ADC) programs since FY 2001, this funding has made ADC more accessible in several areas. AAANM staff continuously participates in various groups that work to address the transportation needs of seniors. Currently, AAANM staff participates in the Northern Michigan Transportation Alliance (NMTA) – the most recent effort in Grand Traverse and Leelanau to provide needed medical transportation for seniors and the disabled. NMTA's focus will be expanded over the next several years to include general transportation requests, i.e., grocery shopping, employment-related rides, general shopping needs, etc. The goal is to establish an effective model and expand availability into surrounding counties.

Care Connections

AAANM operates the Care Connections program in Region 10 with service available throughout the entire Region. Care Connections includes Care Management, MIChoice Waiver, Caregiver Respite and I & A. To assure that services will continue to be readily accessible to all older persons, AAANM will continue to refine its centralized intake and promote the 800 number to the general public and to agencies throughout the Region. Clients will be prescreened for entrance into an appropriate program by using a state-mandated prescreening tool. To support the Care Connections programs, AAANM will continue to dedicate Federal and State funds for the targeted clients that are frail or disabled. Contact with local Department of Human Services (DHS) offices around the Region is pursued to assure they are aware of services that are available for low income seniors.

Service Delivery Plan In-Home Services

Agency: Area Agency on Aging of Northwest Michigan

Fiscal Year 2007 – 2009

AAANM has provided an established level of funding for in-home services in each of the 10 counties for a number of years. This funding is provided through contracts with various agencies around the Region - typically with a county Council or Commission on Aging. Over the years, all 10 of the counties in Region 10 have passed local senior millages that have allowed them to greatly expand in-home services. In most cases the funds available locally have now exceeded funds available through AAANM.

In the FY 2007-2009 planning cycle, Home Delivered Meals will continue to be provided around the Region through contracts, however, AAANM will discontinue contract funding for other in-home services (Homemaker, Personal Care and Respite Care). The funds will now be used to increase purchased services through the AAANM Care Connections Program in all 10 counties. This change in the funding mechanism was recommended by a workgroup that included contract providers and will be reviewed for effectiveness throughout FY 2007.

The Care Connections program is active in all ten counties of the Region. Purchases of Service Agreements are in place with all current AAANM in-home contractors, as well as various private and public service providers. This provides clients enrolled in the Care Connections Program a wide range of in-home service options.

AAANM has continuously provided Technical Assistance (in areas of the Region where interest was expressed) for the provision of in-home services. Technical assistance has been provided in topics related to staff recruitment, retention, training and cost containment. Administrative policies, procedures and staffing have also been addressed.

AAANM continuously monitors and evaluates service needs and gaps and assists agencies and companies in developing services to respond. In the FY 2007-2009 planning cycle, AAANM will continue to collaborate and participate in Region-wide efforts to establish an in-home worker recruitment, retention and training program by building new partnerships and expanding existing ones.

Service Delivery Plan *Community Services*

Agency: Area Agency on Aging of Northwest Michigan

Fiscal year 2007 - 2009

AAANM has provided funding for Community Services in each of the 10 counties for a number of years. The following services are funded in each county of the Region:

- ◆ Congregate Meals
- ◆ Legal Assistance, funded at 6.5 % of Title III-B funds
- ◆ Elder Abuse / Neglect / Exploitation Prevention
- ◆ Long Term Care Ombudsman
- ◆ Health Promotion / Disease Prevention
- ◆ Caregiver Education / Training and Support activities

- ◆ Adult Day Care is funded in 5 of the 10 counties.

Senior Center Staffing will continue to be funded in FY 2007 and FY 2008 for senior centers in Wexford and Leelanau counties in decreasing amounts, then phased out entirely by FY 2009. This phasing out is directly related to the loss of state funding for Senior Center Staffing.

AAANM anticipates continued development of Adult Day Care services around the Region during the FY 2007-2009 planning cycle. Support will also be available for Health Promotion and Caregiver Education activities. AAANM will continue to work with providers to secure outside funding for these activities.

Service Delivery Plan
AAANM Administered Direct Services

Agency: Area Agency on Aging of Northwest Michigan

Fiscal Year 2007 - 2009

AAANM provides a limited number of services directly. Services to be provided by the Area Agency on Aging of Northwest Michigan directly in FY 2007-2009 include the two Access services: Information and Assistance and Care Management.

It should be noted that Area Agencies on Aging are required by the Older Americans and the Older Michiganians Acts to be a visible and consistent provider of Access services, which include I & A and Care Management. The term Area Agency on Aging is consistent nationally and indicates to seniors across the nation that Access services are available in such an agency.

V.

Program Development Objectives

Initiative # 1

Single Point of Entry

Objectives:

To achieve readiness for application as a regional Single Point of Entry (SPE) for long-term care (LTC).

Outcome:

Favorably position AAANM for SPE designation under a subsequent application / RFP process by developing and implementing key elements of the SPE.

Time Line

Activities

- | | | |
|-----------|----|--|
| Ongoing | 1. | Continue development and refinement of the AAANM website, with an emphasis on the specific implementation of information focused on consumers and potential consumers as they plan for their long-term care needs or needs of a family member. |
| Ongoing | 2. | Continuous involvement and advocacy for evolving SPE legislation |
| 2007 | 3. | Convene stakeholders to develop a plan for implementation of an SPE in Region 10. |
| 2007-2009 | 4. | Involve current contractors in the implementation of a web-based I & A system. By the end of the planning cycle, have all county aging units and other providers of long-term care and associated services involved in maintaining their own data on the web-based I & A system. |
| Ongoing | 5. | Maintain involvement in the development of the 2-1-1 system as it evolves, in conjunction with the Third Level Crisis Center. |
| Ongoing | 6. | Encourage and assist I & A providers to have at least one staff member AIRS certified as an “Aging Information Specialist.” |
| Ongoing | 7. | Maintain linkages with the Michigan Department of Community Health (DCH) and the organizations selected as “pilot” SPE’s for the purpose of assuring that planning activities are in concert with policy directions and procedural and operating parameters by DCH. |

Initiative 2: Assuring Access to Basic Needs (Housing, Transportation)

Housing, transportation and nutrition have been identified as (3) significant wrap-around basic needs of area seniors. They are frequently dependent on each other when meeting the needs of our area seniors. The AAANM is actively involved in addressing the development and expansion of these access services with initiatives involving many local and Regional organizations and agencies.

Objectives:

Housing

1. New affordable homes will be made available in the 5-county/Grand Traverse, Leelanau, Benzie, Kalkaska, Antrim area in conjunction with the Housing Task Force; Leelanau REACH-Affordable Housing Initiative; Grand Traverse Region-Advocacy for Affordable Housing, in determining geographic location and structural development of affordable housing.
2. Expand the Tuesday Toolman Program to serve 10% more clients

Transportation – Complete a report on the accomplishments of NMTA in improving elder-friendly transportation services.

Outcomes:

Housing:

1. There will be more affordable housing choices in Leelanau & Grand Traverse Counties for seniors
2. An affordable housing Resource Guide for seniors will be developed
3. More seniors will have access to the Tuesday Toolman program to extend the time for aging in place successfully.

Transportation:

1. Seniors will have improved access to the NMTA transportation system.

TIME LINE

ACTIVITY

- | | |
|------|---|
| 2007 | 1. Affordable Housing. AAANM will continue its participation in the (3) affordable housing initiatives listed above. Most of the effort at this time is in the area of identifying communities which need affordable housing development to take place. Development of an affordable housing resource guide will be implemented for Leelanau and Grand Traverse counties. AAANM will continue its involvement with the Tuesday Toolman program administered by the NW Michigan United Way's RSVP program |
| 2007 | 2. Transportation. AAANM will participate with the further development of the (3) county transportation initiatives through NW Michigan Transportation Alliance (NMTA) to further enhance access to transportation for area seniors. This group is currently in the developmental stages. |

TIME LINE

ACTIVITY

- 2008 3. **Affordable Housing.** Appropriate homes will be made available in the Leelanau, Grand Traverse area for those individuals who fit the affordable housing” income definitions. The homes will be obtained through the county-developed donation process, or through efforts utilizing state and federal community development funding, i.e., CDBG and MSHDA/Farm Home resources; and other resources where available. These homes will be developed with “need” foremost in mind, and hopefully will positively address the needs of the senior population either directly, or indirectly by providing housing opportunities for potential family caregivers. Continued participation in Tuesday Toolman, which will allow the AAANM to address repairs necessary for someone to live at home safely. It is hoped that the Tuesday Toolman efforts can continue its efforts beyond the borders of Grand Traverse County. Repairs have taken place in several surrounding counties, but additional resources are needed to continue this effort.
- 4 **Transportation.** Expansion of the NMTA program will allow for the transporting of seniors for more personal related trips, i.e., grocery shopping, misc. appointments not related to health rides. Referrals for these rides will be scheduled through the same process as the health rides are currently scheduled, through the BATA dispatch. If BATA is unable to provide the ride through its regular bus activities, then the NMTA volunteer system will be contacted. There are (3) established programs objectives involving the NMTA initiative. They are: (1) Health and health related rides, (2) Work related rides, (3) Quality of life related rides. There is a NMTA “ride share” web site being planned to assist those individuals who need rides to work, or who are available to provide rides to others for various reasons. Information will be provided to area senior groups as to how to access these rides. It is hoped that the quality of life rides will be up and running before the end of 2007. However, efforts are underway to expand the volunteer numbers so that there are adequate resources available.
- 2009 5 **Affordable Housing.** Additional houses will be either built or moved from other locations to home sites in Leelanau and Grand Traverse counties. Leelanau County has formed an affordable housing organization called REACH, Inc., which has just recently received its 501c(3) status, and is hoping to increase its access to state and federal funding for the construction of new family housing units in the county. The county has already built several units, with several more in the planning stages. The target market for the affordable housing units is primarily families, but there is also a focus on assisting seniors who would like to move out of their older homes due to upkeep/maintenance issues and expenses, and into multi-family units where they will have others around and available when/if necessary. Mixed housing units, representing various designs and ages of individuals is being pursued.
- 2009 6 **Transportation.** Expansion into additional counties will take place, i.e., Kalkaska, Antrim, as those counties begin participating with the NMTA organization, and resources permit. The Area Agency On Aging will be an active member of the NMTA group, and will assist in keeping part of the initiative focused on rides that are important to the senior population. It is hoped that senior centers and commission on aging offices will become pick-up and drop-off sites as the processes become more refined. It is also hoped that the local county-based transit authorities will participate more actively in the provision of services, i.e., line-items in their specific budgets focused on assisting volunteer provided rides. These budgeted dollars could assist with the reimbursement of mileage for the volunteers, and provide items such as ride coupons/tickets free of charge to those individuals who are referred by agencies or other approved organizations.

Initiative # 3 Training and Support for In-Home Service Workers and Agencies

Objectives:

1. Provide 4 trainings per year for AAANM contractor staff. Topics will include elder abuse and cultural diversity.
2. Provide 2 trainings per year for AAANM staff. Training topics will include Person Centered Planning, elder abuse and cultural diversity.
3. Provide at least 1 training opportunity to AAANM aging network partners on disease prevention;
4. A community Competency Evaluated Nursing Assistant and Home Health Aide training (CENA/HHA) will be co-developed with Community Services Network (CSN) through the Regional Skills Alliance grant.

Outcome:

1. Better quality services to consumers.
2. Improved direct care worker performance and retention rates.

Time Line

Activities

| | | |
|---------|----|---|
| Ongoing | 1. | At least one AAANM staff member will serve as a member of the Community Services Network planning group for in-home services training. |
| 2007 | 2. | AAANM will provide training in Elder Abuse and Cultural Diversity to I & A contractors during regularly scheduled meetings. |
| Ongoing | 3. | AAANM staff will participate in training and internal staff discussions around the concept of Person-Centered Planning. Training in Person-Centered Planning will be offered to AAANM contractors as requested. |
| Ongoing | 4. | AAANM staff will encourage aging network partners to include information in newsletters and other appropriate publications related to disease prevention, elder abuse and dementia. |
| Ongoing | 5. | Provide on-going support for in-home service workers and agencies by informing of training opportunities and offering technical assistance as requested by aging network partners. |
| Ongoing | 6. | Participation by AAANM staff in groups that develop, promote and provide Training. |

Initiative # 4

Loneliness

Objectives:

1. Identify the scope of self-declared loneliness in the elderly population
2. Identify currently available resources that offer companionship and / or social activities
3. Identify resource gaps and develop a long-term plan to meet needs related to loneliness

Outcome:

1. Development of a survey for assessing needs associated with loneliness and the resources and opportunities available for meeting the need.
2. Increase the awareness in the local communities of opportunities and activities that are available for companionship and /or social outlets for the senior population.

Time Line

Activities

- | | | |
|------|----|---|
| 2007 | 1. | Work with the AAANM Board of Advisors (BOA) to define loneliness in the elderly and develop a survey for purpose of identifying community resources, gaps in available resources, opportunities / recommendations for filling gaps. |
| 2008 | 2. | Conduct the developed survey. Community resources surveyed could include churches, Councils and Commissions on Aging, Senior Centers Parish Nurse programs, Centers for Independent Living (CILs), RSVP, Friendly Visitor programs, service Organizations, home delivered meal providers and congregate meal sites. |
| | 3. | Work with the BOA to evaluate the results of the survey and compile the results and recommendations. |
| | 4. | Assist the local community in disseminating information on the resources available through discussion at the quarterly contractor meetings. |

Initiative # 5

Medicare / Medicaid Assistance Program

Objectives:

1. Coordinate the Medicare / Medicaid Assistance Program (MMAP) under the direction of a paid, Coordinator level, staff member;
2. Identify additional funding sources for MMAP;
3. Enhance recruitment and training of MMAP volunteers around Region 10 by increasing fully trained MMAP volunteers by 10%

Outcome:

1. Formalized integration of MMAP into the overall service delivery provided by AAANM;
2. Provide adequate funding to assure continuance of a paid Coordinator Position;
3. Increased ability of MMAP program to provide comprehensive Medicare / Medicaid services to the citizens of Region 10;
4. Position AAANM as a provider of comprehensive Medicare / Medicaid assistance in preparation for pursuit of SPE designation.

Time Line

Activities

| | | |
|---------|----|---|
| 2007 | 1. | AAANM paid staff member begins coordination of MMAP program. New coordinator will work closely with current AAANM Volunteer coordinators and state MMAP personnel to determine how best to serve MMAP clients in Region 10. |
| 2007 | 2. | Enhance and extend recruitment and training efforts for the MMAP program. |
| 2007 | 3. | Work to investigate, and fully document, the amount of Local In-Kind generated by the MMAP program. |
| 2007 | 4. | Investigate additional sources to fund Coordinator position. Options may include: advocacy at the state level for a base level of funding for MMAP coordination; investigation of opportunities to tap into regional funds through the 10 counties, local and pharmaceutical foundations, among others. |
| 2008-09 | 5. | Ongoing integration of MMAP into the AAANM efforts to be designated as an SPE through the Michigan Department of Community Health. |
| | 6. | Continue efforts initiated in FY 2007. |

VI.

Advocacy Strategy

ADVOCACY STRATEGY

Of the four functional areas within the scope of responsibility of Area Agency on Aging of Northwest Michigan (AAANM), Advocacy has the potential for being the longest lived and farthest reaching. Advocacy can be categorized into the following levels, individual, group and legislative. In each level, the intent is to intercede on behalf of an individual or a group to represent their interest and needs. Within this framework of Advocacy the predominant effort of AAANM is in regard to Legislative Advocacy. Admittedly this is a difficult process and one that encompasses the qualities of tenacity, tact, the ability to educate and a passion for the “cause.” AAANM, through its BOD, BOA and staff have been and will continue to be dedicated and committed to this responsibility. One of the frustrations associated with any Advocacy effort are inattentive, non-responsive and uninformed decision makers. Part of Advocacy then is a strong element of education.

Members of the AAANM Board of Directors (BOD) and Board of Advisors (BOA) will continue to be involved in the Michigan Senior Advocates Council (MSAC). MSAC studies issues in depth, interacts with legislators and relays information on to others in the Region for the purpose of information, feedback and action. Board and staff have communicated with legislators on issues and staff have represented the interests of individuals before other agencies and to the state. The BOA and BOD are asked to review, comment and support positions that affect the elders as a group. Generally, staff assumes the responsibility for representing the interests of individuals.

The following topics will set the Advocacy Agenda for the next three years:

- ◆ Increased funding for services and support of MI Choice and in-home services
- ◆ Affordable Senior Housing
- ◆ Regular communication with Legislators
- ◆ Assuring a role for Michigan’s Aging Network in Michigan’s evolving long-term care system, particularly LTC Single Points of Entry (SPE’s).
- ◆ Continued representation of the interests of the elderly in other service networks.
- ◆ Coordination, cooperation and collaboration of activities with other provider and service networks.
- ◆ Encourage policies that maintain and increase opportunities for meaningful activity including employment and volunteer opportunities.

The BOD, BOA Advocacy partners and staff are continuously monitoring changes in policy development and actions that could affect the elder constituency. In this partnership no occasion for action will be overlooked.

VII.

Community Focal Points

Definition and Rationale for Selection

An evaluation of the OSA Operating Standards and the past rationale used by the Area Agency for the designation of Community Focal Points show the validity of such designations yet today. The Area Agency on Aging of Northwest Michigan places heavy reliance on its contract agencies, particularly the county aging units, as the primary “gatekeepers” for seniors seeking services from the Region 10 aging network.

Seven counties in the Region, Kalkaska, Benzie, Grand Traverse, Manistee, Missaukee, Emmet and Wexford, have a centralized community that lends itself well to the designation of a centralized community focal point. The remaining three counties - Charlevoix, Antrim and Leelanau - are divided by large bodies of water with the result that there is no obvious “county center.” These counties may lend themselves to the designation of more than one focal point.

AAANM has been a focal point for access to a broad spectrum of services – Care Management, in-home services, employment, various counseling programs, information and assistance, and the list goes on. AAANM is part of a national network of Area Agencies on Aging serving the elderly across the county. This national network uses a nation-wide, toll free information and assistance number that designates the AAA’s as a primary point of contact. AAANM has been included on the list of focal points for our Region.

In the designation of focal points, the following criteria is generally employed. The criteria is not applicable to all the focal points, each will be evaluated on it’s own merit.

1. A formal, contractual relationship with AAANM.
2. The availability of Information and Assistance Services.
3. The availability of a senior center or nutrition site that is open 5 days per week.
4. The accessibility, availability or co-location of a broad spectrum of services.
4. Generally, county boundaries will be the limit of the responsibilities of the agency designated the “Community Focal Point.” The Area Agency on Aging of Northwest Michigan and Catholic Human Services will be focal points for all ten counties.
5. The visibility of the agency in the community (county or Region)

The responsibility of the Board of Directors in designating the Community Focal Points has been to approve the criteria stated above and the physical locations of the designated sites as part of the process of developing, reviewing and approving the Multi-Year and Annual Plans.

Since we are using county boundaries by definition, the data depicted in Section II A Demographics is applicable.

Community Focal Points

All focal points serve only the county in which they are located, with the exception of AAANM and Catholic Human Services which serve the entire 10 county area.

| COUNTY NAME Organization Name <i>Contact Person</i> | Address, Phone, Email | Services Supported by AAANM funds | |
|---|---|---|---|
| <p style="text-align: center;">ANTRIM</p> <p style="text-align: center;">Antrim County Commission on Aging <i>Carol Mitchell</i></p> <p>60+ population = 5,459 23.6% of County Population</p> | <p>Phone: 231-533-8703</p> <p>Email: accoa@antrimcounty.org</p> <p>308 E. Cayuga, PO Box 614 Bellaire, MI 49615</p> | <p>Access</p> <p>In-Home</p> <p>Community</p> <p>Purchased Services</p> | <p>Information & Assistance</p> <p>Home-Delivered Meals</p> <p>Congregate Meals</p> <p>Homemaker, Personal Care Respite Care, Home Delivered Meals</p> |
| <p style="text-align: center;">BENZIE</p> <p style="text-align: center;">Benzie County Council On Aging <i>Linda Davis</i></p> <p>60+ population = 3,729 23.3% of County Population</p> | <p>Phone: 231-325-4851</p> <p>Email: bccoa@benzie.com</p> <p>10542 Main Street, PO Box 337 Honor, MI 49640</p> | <p>Access</p> <p>In-Home</p> <p>Community</p> <p>Purchased Services</p> | <p>Information & Assistance</p> <p>Home-Delivered Meals</p> <p>Congregate Meals</p> <p>Home Delivered Meals</p> |
| <p style="text-align: center;">CHARLEVOIX</p> <p style="text-align: center;">Charlevoix County Commission on Aging <i>Susan Bergmann</i></p> <p>60+ population = 5,202 19.9% of County Population</p> | <p>Phone: 231-237-0103</p> <p>Email: bergmanns@charlevoixcounty.org</p> <p>207 Antrim Street Charlevoix, MI 49702</p> | <p>Access</p> <p>In-Home</p> <p>Community</p> <p>Purchased Services</p> | <p>Information & Assistance</p> <p>Home-Delivered Meals</p> <p>Congregate Meals Adult Day Care</p> <p>Adult Day Care, Homemaker, Personal Care Respite Care, Home Delivered Meals</p> |
| <p style="text-align: center;">EMMET</p> <p style="text-align: center;">Friendship Centers of Emmet County <i>Sue Berkau</i></p> <p>60+ population = 5,898 18.8% of County Population</p> | <p>Phone: 231-347-3211</p> <p>Email: sue@emmetcoa.org</p> <p>1322 Anderson Rd. Petoskey, MI 49770</p> | <p>Access</p> <p>In-Home</p> <p>Community</p> <p>Purchased Services</p> | <p>Information & Assistance</p> <p>Home-Delivered Meals</p> <p>Congregate Meals</p> <p>Homemaker, Personal Care Respite Care, Home Delivered Meals, Private Duty Nursing, Chore Service, Transportation</p> |

| COUNTY NAME Organization Name <i>Contact Person</i> | Address, Phone, Email | Services Supported by AAANM funds | |
|---|--|---|--|
| GRAND TRAVERSE Traverse City Senior Center <i>Lori Wells</i> 60+ population = 13,225 17% of County Population | Phone: 231-922-4911 Email: lwells@tcseniorcenter.com 801 E. Front Street Traverse City, MI 49686 | Access | Information & Assistance |
| Grand Traverse County Commission On Aging <i>Georgia Durga</i> | Phone: 231-922-4768 Email: gtcoa@co.grandtraverse.mi.us 520 W. Front Street, Suite B Traverse City, MI 49684 | Purchased Services | Homemaker, Personal Care, Respite Care, Private Duty Nursing, Chore Service |
| KALKASKA Kalkaska County Commission on Aging <i>Carrol Cort</i> 60+ population = 3,127 18.9% of County Population | Phone: 231-258-5030 Email: growell@chartermi.net 419 S. Coral Street, PO Box 28 Kalkaska, MI 49646 | Access In-Home Community Purchased Services | Information & Assistance Home Delivered Meals Congregate Meals Home Delivered Meals |
| LEELANAU Leelanau County Commission on Aging <i>Rosie Steffens</i> 60+ population = 4,827 22.9% of County Population | Phone: 231-256-7590 Email: rsteffens@co.leelanau.mi.us 7401 E. Duck Lake Road Lake Leelanau, MI 49653 | Access Purchased Services | Information & Assistance Homemaker |
| MANISTEE Manistee County Commission on Aging <i>Sandra Kittlaus</i> 60+ population = 5,796 23.6% of County Population | Phone: 231-723-6461 Email: senoirs@manistee.com 457 River St. Manistee, MI 49660 | | |

| COUNTY NAME Organization Name <i>Contact Person</i> | Address, Phone, Email | Services Supported by AAANM funds | |
|--|---|--|---|
| MISSAUKEE Missaukee County Commission on Aging <i>Pam Niebrzydowski</i> 60+ population = 2,878 19.9% of County Population | Phone: 231-839-7839 Email: missaukecoa@yahoo.com 105 S. Canal Street, Box 217 Lake City, MI 49651 | Access Purchased Services | Information & Assistance Homemaker, Personal Care, Respite Care, Private Duty Nursing, Chore Service, Training, Transportation |
| WEXFORD Wexford County Council on Aging <i>Bonnie Forbes</i> 60+ Population = 5,692 18.7% of County Population | Phone: 231-775-0133 Email: forbesbonnie@yahoo.com 117 West Cass Street Cadillac, MI 49601 | Access Community Purchased Services | Information & Assistance Adult Day Care Adult Day Transportation Adult Day Care, Homemaker, Personal Care, Respite Care, Private Duty Nursing, Chore Service, Transportation, Environmental Modification |
| Manton Area Retirees <i>Eleanor Sosenko</i> | Phone: 231-824-6961 Email: mantonsc@speed2u.net 302 W. Main Street, PO Box 306 Manton, MI 19663 | Community | Senior Center Staffing Health Promotion |
| REGION 10 Area Agency on Aging of Northwest Michigan <i>Gregory Piaskowski</i> <i>Dee Wilkinson</i> <i>Darcia Brewer</i> <i>Sue Graybill</i> Counties Served: Antrim, Benzie, Charlevoix, Emmet, Grand Traverse, Kalkaska, Leelanau, Manistee, Missaukee, Wexford | Phone: 800-442-1713 231-947-8920 Email: wilkinsond@aaanm.org 1609 Park Drive, PO Box 5946 Traverse City, MI 49696 | Access Community | Information & Assistance Care Management Medicare/Medicaid Assistance (MMAP) Senior Employment |

| COUNTY NAME Organization Name <i>Contact Person</i> | Address, Phone, Email | Services Supported by AAANM funds | |
|--|--|---|---|
| REGION 10 (continued) Catholic Human Services <i>Dave Martin</i> <i>Theresa Kerry</i> <i>Douglas Durand</i> | Phone: 800-658-8554 231-929-7070 Website: www.caregiverNorth.org 3210-B Racquet Club Drive Traverse City, MI 49684 | Access Community Purchased Services | Information & Assistance for Caregivers Elder Abuse Prevention Respite Care, Senior Companion, Counseling, Transportation |

Effectiveness of Focal Points

Establishing visibility in a community is key to the effectiveness of a Community Focal Point. The Community Focal Points identified by AAANM each have an established visibility in their communities over a period of years. All are a part of an extensive community network of service providers who regularly meet and communicate regarding the needs of the people they serve. Most have newsletters, flyers and brochures that reach a large number of constituents in the area in which they are located. Because many of them are identified as Councils and Commissions on aging, senior residents naturally look to them as sources of information and assistance in meeting their needs.

Catholic Human Services and AAANM both have a long history of service provision and networking around the Region. Through participation in many human service collaborating bodies in the Region and beyond, both agencies have established ties and visibility around the Region.

In FY 2006, AAANM reviewed and updated the criteria used to identify Community Focal Points, with the help of a workgroup. In addition, AAANM initiated a self-assessment process for Community Focal Points. A self-assessment tool has been developed by AAANM and reviewed by the aging network partners. The self assessment tool will be distributed to Focal Points later in FY 2006 and results evaluated further to help determine future directions. These efforts will continue into FY 2007 and beyond.

VIII.

Appendices

APPENDIX A

Input Sessions and Public Hearings

Agency: Area Agency on Aging of Northwest Michigan (AAANM)
Fiscal Year: Multi-Year Plan 2007 - 2009

| <i>DATE</i> | <i>LOCATION</i> | <i>TIME</i> | <i>Barrier Free (Y or N)</i> | <i>Number of Attendees</i> |
|----------------------------------|--|-------------|----------------------------------|--------------------------------|
| March 2, 2006 Input Session | Area Agency on Aging of Northwest Michigan Grand Traverse County | 11:00 a.m. | Yes | 21 |
| March 16, 2006 Input Session | Manton Senior Center Wexford County | 11:00 a.m. | Yes | 36 |
| April 20, 2006 Public Hearing | Area Agency on Aging of Northwest Michigan Grand Traverse County | 11:00 a.m. | Yes | 21 |
| May 4, 2006 Public Hearing | The Gathering Place Senior Center Benzie County | 11:00 a.m. | Yes | 15 |

NARRATIVE: Details of the effort to collect information from the public are outlined on page 23, in the “Unmet Needs and Priority Setting” section of this MYP. The following page summarizes the concerns that were raised both through written and oral comments in all of the venues detailed on page 23.

Area Agency on Aging of Northwest Michigan
Multi -Year Plan Fiscal Years 2007 - 2009
Unmet Needs Survey SUMMARY

| Defined Issue | Public Written | Staff & Service Providers | BOD BOA | Public Input Sessions |
|--|---------------------------|--|--------------------|--------------------------------------|
| Transportation – for shopping & appointments | 4 | 7 | ✓ | ✓ |
| Loneliness & Isolation (by individuals and being away from family) | 6 | 2 | ✓ | ✓ |
| Lack of reliable, honest, affordable in-home care | 3 | 3 | ✓ | |
| Difficulties with shopping | 3 | 0 | | |
| Lack of appropriate medical care (no physician available or doctors refusing Medicaid) | 2 | 3 | | |
| Lack of affordable dental care Lack of affordable eye care | 2 2 | 1 0 | ✓ | |
| Cost of utilities | 2 | 3 | ✓ | |
| Cost of medication, or insurance (maybe resulting in inappropriate self medication with drugs or liquor) | 1 | 6 | | |
| Limited public resources to meet basic needs Limited (fixed) personal resources to meet basic needs | 0 | 3 1 | | |
| More information is needed about available help The system for obtaining help is confusing (includes Medicare and Medicaid, property taxes, township issues) | 5 0 | 0 4 | ✓ | ✓ |
| Difficulty with grocery shopping and meal prep | 2 | 0 | | |
| OTHER: (usually identified by only 1 person) Caregiver exhaustion Maintaining mobility Lack of resources for home modifications Lack of alternative (affordable) housing Emergency planning needs in a county for elders Help for tax preparation Not enough handicapped parking places Education on healthy lifestyles, the cost of retirement Physician interaction with elders and family Limited income issues: cost of care, needing to work OTHER: (usually identified by only 1 person) Pride – limits asking for / accepting help Growing old in a youth oriented society, respect for elderly No Social Security in the future Lack of an advocate (support system) for the elderly “Denial” by family members about aging relatives\ | | ✓ ✓ ✓ ✓ ✓ ✓ ✓ | ✓ | |

| Defined Issue | Public Written | Staff & Service Providers | BOD BOA | Public Input Sessions |
|--|----------------|--------------------------------|---------|-----------------------|
| Preparing to care for elderly family members Stability of pensions / financial protection Nursing home reform / environment New Nutrition Standards requiring more expense, but no further cost reimbursement Keeping an active mind | | ✓ ✓ ✓ ✓ ✓ ✓ | | ✓ ✓ |

Note:

Columns with numbers reflect the number of times the same issue was mentioned in a written comment. Columns with ✓ indicate that the same issue was mentioned once (or more than once) at input sessions held during meetings of the AAANM Board of Directors, AAANM Board of Advisors and the AAANM staff.

**BOD – AAANM Board of Directors
 BOA – AAANM Board of Advisors**

February 14, 2006

Contact: Gregory Piaskowski
Executive Director

Phone: (231) 947-8920

FOR IMMEDIATE RELEASE

AREA AGENCY ON AGING OF NORTHWEST MICHIGAN

PUBLIC INPUT SESSIONS

Area Agency on Aging of Northwest Michigan (AAANM) will conduct two Public Input Sessions on the Multi-Year Plan (fiscal years 2007-2009) for aging programs and services. The 10-county area served by AAANM consists of Antrim, Benzie, Charlevoix, Emmet, Grand Traverse, Kalkaska, Leelanau, Manistee, Missaukee and Wexford Counties.

The Multi-Year Plan serves as a guide for the development and funding of aging services. Services include but are not limited to, information and assistance, homemaking, personal care, respite care, elder abuse prevention, legal assistance, long term care ombudsman, congregate and home delivered meals, disease prevention/health promotion, adult day care and transportation. AAANM is soliciting input, comments and suggestions from the general public that may assist in the development of the Multi-Year Plan.

The Public Input Sessions are scheduled for Thursday, March 2, 2006, 11:00 a.m. at the Area Agency on Aging of Northwest Michigan, 1609 Park Drive, Traverse City, Michigan and Thursday, March 16, 2006, 11:00 a.m. at the Manton Senior Center, 302 West Main, Manton, Michigan.

For a copy of the current Area Plan or for further information on these activities, call (231) 947-8920 or (800) 442-1713.

March 10, 2006

Contact: Gregory Piaskowski
Executive Director

Phone: (231) 947-8920

LEGAL NOTICE

AREA AGENCY ON AGING OF NORTHWEST MICHIGAN

PUBLIC HEARINGS

The Area Agency on Aging of Northwest Michigan (AAANM) will conduct two Public Hearings on the Multi-Year Plan (MYP) for aging programs and services for Fiscal Years 2007-2009. The MYP serves as a guide for the development and funding of services for seniors in the 10 county area served by AAANM, which consists of Antrim, Benzie, Charlevoix, Emmet, Grand Traverse, Kalkaska, Leelanau, Manistee, Missaukee and Wexford Counties. AAANM is soliciting input, comments and suggestions from the general public that may assist in the development of the Multi-Year Plan.

Services that may be funded include but are not limited to, information and assistance, homemaking, personal care, respite care, family caregiver support services, elder abuse prevention, legal assistance, long term care ombudsman, congregate and home delivered meals, disease prevention/health promotion, adult day care, and transportation.

The Public Hearings are scheduled for Thursday, April 20, 2006, 11:00 a.m. at the Area Agency on Aging of Northwest Michigan, 1609 Park Drive, Traverse City, Michigan and Thursday, May 4, 2006, 11:00 a.m. at "The Gathering Place", 10579 Main Street, Honor, Michigan.

Please contact AAANM with questions regarding the MYP or to obtain a copy of the "DRAFT" MYP. The "DRAFT" MYP will be available for review on or after April 5, 2006 by contacting AAANM at (231) 947-8920 or (800) 442-1713.

APPENDIX B
BOARD OF DIRECTORS MEMBERSHIP
Fiscal Year: 2006

Area Agency: Area Agency on Aging of Northwest Michigan, Region 10

| | DEMOGRAPHICS | | | | | | |
|------------------|----------------------|------------------|-----------------------------|-----------------|------------------------------|--------|-------------|
| | Asian/Pacific Island | African American | Native American/ Alaskan | Hispanic Origin | Persons with Disabilities | Female | otal |
| Total Membership | 0 | 0 | 0 | 0 | 0 | 1 | 1 |
| Age 60 or Over | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

| NAME of BOARD MEMBER | GEOGRAPHIC AREA | AFFILIATION | CHECK THOSE THAT ARE APPROPRIATE | | |
|----------------------|-----------------|---------------------|----------------------------------|-----------|-------------------|
| | | | Elected Official | Appointed | Community Rep. |
| Les Atchison | Emmet County | Member at Large | X | | |
| David Banks | Leelanau County | Member at Large | | | X |
| Lester Barnes | Wexford County | Member at Large | | | X |
| Eugene Baughan | Grand Traverse | Member at Large | | | X |
| Kathy Fenstermacher | Manistee County | County Commissioner | X | | |
| Dr. James Grost | Grand Traverse | Member at Large | | | X |
| David Howelman | Antrim County | County Commissioner | X | | |
| Ray Kadlec | Benzie County | Member at Large | | | X |
| Tom Kelly | Benzie County | County Commissioner | X | | |

| NAME of BOARD MEMBER | GEOGRAPHIC AREA | AFFILIATION | CHECK THOSE THAT ARE APPROPRIATE | | |
|----------------------|-------------------|---------------------|----------------------------------|-----------|----------------|
| | | | Elected Official | Appointed | Community Rep. |
| Victor Patrick | Charlevoix County | County Commissioner | X | | |
| Don Schuiteman | Antrim County | Member at Large | | | X |
| Dr. Neill Varner | Leelanau County | County Appointee | | X | |
| Dan Waller | Missaukee County | County Commissioner | X | | |
| | Kalkaska County | Position Vacant | | | |

APPENDIX C
ADVISORY COUNCIL MEMBERSHIP
Fiscal Year: 2006

Area Agency: Area Agency on Aging of Northwest Michigan, Region 10

| | DEMOGRAPHICS | | | | | | total |
|------------------|----------------------|------------------|-----------------------------|-----------------|------------------------------|--------|--------------|
| | Asian/Pacific Island | African American | Native American/ Alaskan | Hispanic Origin | Persons with Disabilities | Female | |
| Total Membership | 0 | 1 | 0 | 0 | 0 | 7 | 8 |
| Age 60 or Over | 0 | 0 | 0 | 0 | 0 | 7 | 7 |

| NAME of ADVISORY COUNCIL MEMBER | GEOGRAPHIC AREA | AFFILIATION |
|---------------------------------|-----------------------|---------------------------|
| Bruce Anderson | Benzie County | Community Representative |
| Richard Burke | Manistee County | Community Representative |
| Randie Clawson | Grand Traverse County | Community Representative |
| Lou Fantini | Emmet County | Community Representative |
| Bonnie Forbes | Benzie County | Council on Aging Director |
| Don Halvorsen | Missaukee County | Community Representative |
| Ray Mills | Antrim County | Community Representative |
| Lee Nowak | Leelanau County | Community Representative |
| Charles Robinson | Wexford County | Community Representative |
| James Pascoe | Antrim County | Community Representative |

| NAME of ADVISORY COUNCIL MEMBER | GEOGRAPHIC AREA | AFFILIATION |
|---------------------------------|-----------------------|--------------------------|
| Pam Niebrzydowski | Missaukee | COA Director |
| Louanne Rogers | Leelanau County | County Appointee |
| Mike Sheehan | Leelanau County | State Advisory Council |
| Beatrice Sherman | Kalkaska County | Community Representative |
| Nancy Shoop | Wexford County | Community Representative |
| Jerry Simowski | Antrim County | Community Representative |
| Dr. Foster Thompson | Benzie County | Community Representative |
| Jane Vitkus | Grand Traverse County | Community Representative |

Appendix D

PROPOSAL REVIEW CRITERIA

AREA AGENCY ON AGING OF NORTHWEST MICHIGAN CONTRACTING / RFP POLICIES AND PROCEDURES

| | | |
|--|--------------------------|-------------------|
| Policy Name: PROPOSAL REVIEW COMMITTEE AND REVIEW PROCESS | | Number: 20.005 |
| Effective Date: 3/21/1986 | Last Reviewed: 3/22/2006 | Last Revised: |
| Signature of Approval: | | |
| Title of Signatory: Executive Director | | |

This Policy Supercedes All Others

The following is an outline of the criteria used by the AAANM Proposal Review Committee (PRC) in the review and evaluation process of Applicant proposals in order to make final recommendations to the AAANM Board of Directors for full approval, approval with contingencies, or full denial of awards.

A. Minimum Requirements

1. Applicant must be a legally organized public, private, non-profit, unit of government, or for-profit business.
2. Completed application must be submitted to AAANM by the deadline date.
3. Application must include authorization signatures and all required attachments.
4. Services for which funding is requested are only those under the approved AAANM Multi-Year Plan (MYP) or Area Implementation Plan (AIP).

B. Organizational Responsibility

Applicant must have:

1. An established purpose.
2. A process for establishing administrative decisions, goals and priorities.
3. A system for monitoring the achievement of management, service and administrative goals.
4. Clear expectations of board members; offering them appropriate training opportunities.
5. Clear strategies for managing services.
6. Methods in place to monitor revenues, expenses and service demands to assure provision of contracted services throughout the entire fiscal year.
7. Adequate physical facilities.

C. Fiscal Management

(A fiscal assessment may be conducted by AAANM prior to awarding a contract)

Applicant must have:

1. The capacity to manage and control financial resources, i.e. accounting systems, cost controls, fiscal procedures, qualifications of the bookkeeper, and conformance to **AAANM Fiscal Management Policy Number 20.0XX**. Copies of the latest available Audit and Annual Report must be submitted as attachments.
2. Procedures for making financial decisions.
3. A written cost allocation plan.
4. The ability to meet AAANM deadlines for reporting.
5. A procedure for soliciting client contributions.
6. Sufficient financial resources, including appropriate local match and program income.
7. The capacity to provide matching cash and/or in-kind resources at a minimum of 10% of the combined local, State and/or Federal total (Net Cost). Additional Cash Match is encouraged for all services. Sources of local match must be itemized on the summary budget for each proposed service.

Applicant shall make every effort to maintain the previous year's match of local and other resources (if applicable). In-kind can be used only if it is a component of the service required by the Standards, i.e., nurse supervision.

8. Consideration will be given to Applicants who demonstrate methods to cut program costs, improve effectiveness or otherwise expand the use of available resources.

D. Program Impact/Performance

(A programmatic assessment may be conducted by AAANM prior to awarding a contract)

1. Services must contribute to the achievement of AAANM goals and objectives outlined in the Multi-Year Plan (MYP) and Area Implementation Plan (AIP).
2. Applicant must have a clearly defined target population to be served by each service objective. A plan to target frail, at-risk, low income, minority, and handicapped older persons will be required. AAANM will assess the rigor of efforts to serve these priority populations.
3. The previous involvement of the Applicant in the provision of service to the elderly in the geographic area will be evaluated. For Applicants proposing to continue existing AAANM contract services, service levels must be maintained to the extent possible.
4. An effective method of utilizing consumer input in making policy and operation decisions must be demonstrated.

E. *Program Design*

- 1.** Applicant must have a clear description of the proposed activities, services and methods to deliver the services. The description should explain how the various parts of the program fit together with existing community resources and other agencies.
- 2.** Applicant must have established methods for coordinating with other agencies and groups, which may:
 - (a)** Facilitate a greater utilization of the proposed services by the elderly.
 - (b)** Lessen the likelihood of service duplication.
 - (c)** Open channels of communication and cooperation between providers.
- 3.** Preference will be given to Applicants who have developed successful, cooperative working relationships between themselves and other agencies for mutual service support.
- 4.** Applicant must demonstrate ability to comply with the service definitions and the applicable standards.
- 5.** Applicant must have realistic and measurable service objectives in terms of the number of persons to be served and units of service to be provided during the project period. Consideration will be given to the number of elderly to be served and the units of service to be provided in relation to the level of funds requested for the service, the Applicant unit cost for each service proposed, and the amount of other resources developed for each service. The service objectives should incorporate a method for targeting the frail, at-risk, low income, minority, and handicapped older persons for service provision.
- 6.** Applicant must have the capacity to fulfill the stated service objectives reviewed on the basis of:
 - (a)** Appropriate skilled staff to provide service
 - (b)** Adequate training for staff and volunteers
 - (c)** Ability to provide services directly to clients, as opposed to developing subcontracts for services
 - (d)** Consideration given to client input for each proposed service
 - (e)** Formal written agreements for all facilities utilized

Appendix F

Regional Service Definitions

Private Duty Nursing

Service Definition: Individualized, home based services purchased by AAANM Care Connections. Services must be provided by licensed nurses (R.N. or L.P.N.) within the scope of Michigan State law. Examples of treatments include: foot care, medication management, ventilator care, wound care, observation and training of primary caregivers, and other treatments consistent with physician’s orders.

Unit of Service: **For POS purposes: 1 unit of service is equal to .25 hours**

Eligible Clients: Eligibility will be determined by AAANM Care Connections staff.

Minimum Standards:

1. All Private Duty Nursing (PDN) services must be provided under the supervision of an R.N. All staff providing PDN services or R.N. supervision must maintain current Michigan licensure.
2. The provider’s supervisory R.N. will:
 - A. Assist with the implementation and continuing evaluation of the nursing component of the Care Connections service plan;
 - B. Ensure that the PDN staff observe, record and report to Care Connections care managers regarding client symptoms, reactions and changes including his/her general physical and mental condition, as well as signs and symptoms which may be indicative of significant changes in the clients’ status;
 - C. Train, instruct and supervise all PDN activities as requested by Care Connections staff.
4. Each provider must have written procedures for communication with physicians, within the scope of HIPAA, in regard to clients needs or concerns.
6. All Private Duty Nursing staff must participate in at least **two (2) in-service trainings for a minimum of eight (8) hours during a given fiscal year**. Documentation of training attended by each employee must be retained by the provider in the employee file or in a “training file.” Professional CEU’s can be counted to meet this requirement.

| | |
|--|------|
| Signature, Authorized Area Agency Official | Date |
| Authorized signature on Area Agency on Aging of Northwest Michigan Signature Page. See MYP page 82. | |
| Approved <input type="checkbox"/> Denied <input type="checkbox"/> | |
| Signature, OSA Director | Date |

Grandparent / Other Older Relative Caregiver Support

Service Definition: A service program designed to provide for goods and services in an effort to support grandparents and other older relative caregivers (over 60 years of age) in caring for a child/ren under the age of 18 years, either as a guardian or informally.

Unit of Service: One good or service purchased or an hour of related service provision, as appropriate.

Minimum Standards:

1. In an effort to address the intent of the National Family Caregiver Support Program, providers of Grandparent / Other Older Relative Caregiver Support **must**, at a minimum:
 - A. Utilize a standard intake procedure / interview to determine and document:
 - that the older relative caregiver is eligible for service (over the age of 60 years and a caregiver for a child/ren under the age of 18 years);
 - the perceived need of the caregiver / child;
 - a plan for addressing the determined need. This plan should include a method of prioritizing need, should more than one need are presented.
 - B. A **written procedure** must be in place for determining the appropriateness of expenditures. At a minimum, the procedure should require administrative approval of expenditures in excess of \$300 / occurrence.
 - C. The provider must be prepared to provide:
 1. Referral(s) to other resources, as appropriate;
 2. Referral and/or voucher prepared for service need(s) identified;
 3. Timely verification of service delivery;
 4. Follow-up for service satisfaction and determination of interest in “grandparents as caregivers” support group.
 - D. The program will address needs in the following general categories:
 1. Basic Needs: child care/respice (both routine and emergency)
 2. Health/Prevention / Wellness
 3. Education
 4. Transportation
2. NAPIS Caregiver forms will be completed for grandparents / relatives over the age of 60 receiving services related to caregiving through the National Family Caregiver Support Program.

| | |
|--|------|
| Signature, Authorized Area Agency Official | Date |
| Authorized signature on Area Agency on Aging of Northwest Michigan Signature Page. See MYP page 82. | |
| Approved <input type="checkbox"/> Denied <input type="checkbox"/> | |
| Signature, OSA Director | Date |

Supplemental Services

Service Definition: A service program utilized to provide for goods and services in an effort to support individual or family needs that cannot be met through traditional funding sources or existing community programs.

Unit of Service: One good or service purchased or an hour of related service provision.

Minimum Standards:

1. All goods and services offered must adhere to the established intent, focus and goals of the National Family Caregiver Support Program (NFCSP):
 - A. Assist family members who are struggling to care for their older loved ones that are ill or have disabilities;
 - B. Priority must be given to older individuals in the greatest social and economic need and those caring for someone with mental retardation and / or developmental disabilities;
 - C. The care recipient must be unable to perform at least 2 activities of daily living or have a cognitive or other impairment.

2. Each provider is strongly encouraged to facilitate creative ways to meet the unique needs of each family and individual.

3. A **written procedure** must be in place for determining the appropriateness of expenditures. At a minimum, the procedure should require administrative approval for expenditures in excess of \$300 / occurrence.

4. Priority for meeting client needs should be given to:
 - A. Basic Needs: Food, Shelter, Clothing, Safety
 - B. Preventative Health / Wellness / Medical Needs
 - C. Transportation

5. NAPIS Caregiver forms will be completed for clients over the age of 60 receiving services related to caregiving through the National Family Caregiver Support Program

| | |
|--|------|
| Signature, Authorized Area Agency Official | Date |
| Authorized signature on Area Agency on Aging of Northwest Michigan Signature Page. See MYP page 82. | |
| Approved <input type="checkbox"/> Denied <input type="checkbox"/> | |
| Signature, OSA Director | Date |

**APPENDIX G
REQUEST TO TRANSFER FUNDS (if applicable)**

Fiscal Year 2007

Agency: _____ **Area Agency on Aging of NW Michigan – Region 10**

- 1) The area agency on aging requests approval to transfer \$ _____ from Title III-B Supportive Services to Title III-C Nutrition Services. The agency assures that this action will not result in a reduction in support for in-home services and senior center staffing. The rationale for this request is listed below.

- 2) The area agency on aging requests approval to transfer **\$33,887.00** from Title III-C1 Congregate Nutrition Services to Title III-B Supportive Services for in-home services. The rationale as to why congregate participation cannot be increased is listed below.

- 3) The area agency on aging requests approval to transfer \$ _____ from Title III-C1 Congregate Nutrition to Title III-B Supportive Services for participant transportation to and from meal sites to possibly increase participation in the congregate nutrition program.

Rationale:

1. Funding levels for in-home services have not increased dramatically, while the demand continues to grow. Demand for in-home services exceeds available funds.

2. Participation in the congregate meal program has been flat or falling for some time, despite efforts by contractors and AAANM to attract participants.

3. AAANM initiated the Dining Out program in an effort to increase participation, which has helped to slow down the declining participation. In FY 2007, funding for Dining Out will be provided with funds designated for congregate nutrition.

| | |
|--|---------------------------------|
| Signature, Authorized Area Agency Official | Date |
| Authorized signature on Area Agency on Aging of Northwest Michigan Signature Page. See MYP page 82. | |
| Approved <input type="checkbox"/> | Denied <input type="checkbox"/> |
| Signature, OSA Director | Date |

APPENDIX H
NUTRITIONIST SERVICES BUDGET – FY 2007

AREA AGENCY ON AGING OF NORTHWEST MICHIGAN

| LINE ITEM | CONGREGATE | | HOME DELIVERED | | LOCAL MATCH | TOTAL |
|-----------------|-----------------|------------|----------------|-----------------|-------------|-----------------|
| | Federal | State | Federal | State | | |
| Wages/Salaries | \$19,696 | | \$1,333 | \$21,081 | | \$42,110 |
| Fringe Benefits | \$9,426 | | \$638 | \$10,088 | | \$20,152 |
| Travel | \$1,988 | | \$135 | \$2,128 | | \$4,251 |
| Conferences | | | | | | \$0 |
| Occupancy | \$916 | | \$202 | \$840 | | \$1,958 |
| Equipment | \$670 | | | \$763 | | \$1,433 |
| Audit | | | | | | \$0 |
| Professional | \$1,073 | | | \$1,221 | | \$2,294 |
| Supplies | \$335 | | | \$381 | | \$716 |
| Misc | \$917 | | \$62 | \$982 | | \$1,961 |
| Communications | \$1,228 | | \$83 | \$1,314 | | \$2,625 |
| TOTAL | \$36,249 | \$0 | \$2,453 | \$38,798 | \$0 | \$77,500 |

APPENDIX J
WAIVER FOR DIRECT PROVISION OF SERVICE
Fiscal Year: 2007

Agency: Area Agency on Aging of Northwest Michigan

Service: Information and Assistance (I & A)

Amount of State and Federal Funds involved:
\$12,457.00

Geographic Area to be Served:
Region 10

Rationale for direct provision of services:

As part of the nationally recognized senior services network and as a recipient of inquiries and referrals for services through affiliation with the Administration on Aging, the National Council on Aging, Eldercare Locator, National Association of Nutrition and Aging Services Programs, as well as other widely recognized entities, the AAANM continues to focus efforts on the provision of timely, consistent and reliable information related to access, community and in-home services. As a focal point, designated by OSA for Region 10 of Michigan as the Area Agency on Aging since 1974, offering accurate information and assistance services to the community at large is, perhaps, our most important service.

It appears that the authors of the Older Americans Act conceived of a system of service delivery that is comprehensive and coordinated in nature. The responsibility for the coordination of services delivery is delegated to Area Agencies on Aging. At AAANM, a significant part of our responsibility is providing information in a professional and accessible manner, enabling elders and/or their caregivers to make informed decisions about their life choices, whether these choices be housing, financial, medical, emotional, social, nutritional, etc.

The AAANM currently has one staff member holding certification as an Information Specialist with AIRS (Alliance of Information and Referral Systems, Inc.) and has intentions for securing this level of national certification for additional staff members. There is only one other agency providing senior services in Northwest Lower Michigan with this level of staff training.

With the vast amounts of information available and considering the fluctuations in program offerings and funding available, AAANM invests itself in collaborative relationships throughout the Region. Whether through formal contracts held with local network providers of services for the aging and disabled throughout the 10 county region or through the more informal, but highly valuable, memberships and regular attendance at groups meeting on issues like housing, transportation, home repair or from active participation on local collaborative bodies (ie, Third Level Crisis Center and their 211 initiative, various Human Services Collaboratives, Grand Traverse/Leelanau Senior Support Team, Bay Area Senior Advocates, etc.), AAANM is deeply immersed in the Region and has a finger on the pulse of programs and services information in Northwest Lower Michigan. This allows routine additions and corrections to the resources housed at AAANM. Exploration into the more effective automated resource database has begun and AAANM will continue this research, with the ultimate goal of selecting a product that is staff and consumer friendly.

AAANM includes discussion related to I & A at regularly scheduled contractor meetings to heighten awareness, encourage training and share techniques in offering effective and professional I & A. AAANM continues its efforts to develop, nurture and promote training opportunities for service providers and is encouraging FY '07 I & A contract providers to pursue AIRS certification at their local level. Internally, AAANM has a Marketing TEAM! that holds as their primary focus the responsibility for preparing and distributing accurate and timely information for and about AAANM. Through production of a quarterly newsletter, quarterly contributions to Michigan Generations, maintaining a well-stocked literature display in the agency foyer and participation at senior expos and health fairs throughout the Region, AAANM is making critical information available to the public. And, continuing advancements on the agency's web page make information accessible to anyone with this technology.

Authorized signature on Area Agency on Aging of Northwest Michigan Signature Page. See MYP page 82.

Approved

Denied

Signature, OSA Director

Date

DIRECT PROVISION OF SERVICES WORK PLAN

Area Agency on Aging:

Area Agency on Aging of NW Michigan

Project Period

Service to be Provided:

Information and Assistance (I & A)

☐ FY 2007

Goals and Activities

Planned Time Frame

Accomplishments

Goal One: I & A AIRS Certification.

Activities: Maintain I & A certification through AIRS for current staff; have at least one additional staff member prepare for and achieve I & A certification. Encourage contract provider agencies to achieve I & A Certification.

Goal Two: Training, to increase awareness of I & A services available to community and to increase skills and knowledge of staff.

Activities: Attend Michigan AIRS conferences, where feasible; offer I & A training as a regular item on the agenda of Contractors meetings.; encourage contract provider agencies to participate in MI-AIRS trainings.

Goal Three: Log I & A, including Unmet Needs.

Activities: Regularly tabulate I & A utilization and report to AAANM Boards of Directors and Advisors; follow areas of demand and unmet need and use findings in future Program Development Objectives of the Area Plan.

Goal Four: Participate in collaborative efforts to enhance the regional capacity of I & A services and assist in the implementation of 2-1-1.

Activities: Revise action outline to update the commitment and role of AAANM as a collaborator in 2-1-1. Follow development of Michigan's 2-1-1 system and work with Third Level Crisis Center to accurately populate the local/regional automated data base.

Goal Five: Explore and move toward developing an in-house data base system for management of I & A resources and tracking of I & A services utilization.

Activities: Research various I & A software products, , participate in demonstrations, conduct on-site visits with experienced users to determine most applicable/affordable method of developing AAANM automated data base. Encourage participation and input from contract provider agencies.

Goal 1: FY 2007-2009 Complete any necessary steps for AAANM staff to maintain/obtain certification. Assist contract provider agencies in application and preparation, as requested.

Goal 2: Plan to continue same process

Goal 3: On-going, with particular emphasis on findings at Annual Plan development time (second quarter of each fiscal year). Utilize logs to track Unmet Needs

Goal 4: Review and provide updated/corrected data to Third Level Crisis Center to assist in continuous data base population. Support local/regional 2-1-1 efforts financially, as funds allow. Encourage other stakeholders to support.

Goal 5: On-going investigation with product vendors and peer users to clarify AAANM needs and determine most appropriate software. Obtain funding to defray costs of software purchase and any required computer upgrade. Begin population of data base. Provide a role/responsibility for contract provider agencies in the maintenance of the data.

1. One AAANM staff member and one other COA staff member in Region 10 have attained certification. Other COA's have expressed interest and AAANM will continue to assist as requested in this pursuit.

2. In FY 2006 I & A "Camp" was held specifically for local I & A staff. The training was well attended and received. I & A "minutes" are part of the contractor monthly meeting.

3. The log developed by AAANM staff for tracking I & A requests is used by several AAANM staff members to log requests for information. An annual report is provided to the BOD and BOA.

4. AAANM has been a supporter of the 2-1-1 effort. Presentations have been made at contractor meetings to local staff. AAANM will continue to support this local effort.

5. In FY 2006, AAANM began to investigate the potential for purchasing an automated I & A database system. Efforts in this regard will continue through FY 2007-2009.

**Appendix J - Direct Service Budget
FY 2007 Annual Implementation Plan**

AAA: Area Agency on Aging of NW Michigan - Region 10

FISCAL YEAR: 2007

SERVICE: Information and Assistance

| LINE ITEM | Federal OAA Title III Funds | Other Fed Funds (non-Title III) | State Funds | Program Income | Match | | Other Resources | Total Budgeted |
|-------------------------------|--------------------------------|------------------------------------|----------------|-------------------|--------------|----------|--------------------|-------------------|
| | | | | | Cash | In-Kind | | |
| Wages/Salaries | 6,850 | | | | | | | 6,850 |
| Fringe Benefits | 3,271 | | | | | | | 3,271 |
| Travel | 749 | | | | | | | 749 |
| Training | | | | | | | | 0 |
| Supplies | 126 | | | | | | | 126 |
| Occupancy | | | | | 454 | | | 454 |
| Communications | | | | | 374 | | | 374 |
| Equipment | | | | | 166 | | | 166 |
| Other (e.g., Raw Food Costs): | 69 | | | | | | | 69 |
| Professional | | | | | 398 | | | 398 |
| | | | | | | | | 0 |
| | | | | | | | | 0 |
| Totals | 11,065 | 0 | 0 | 0 | 1,392 | 0 | 0 | 12,457 |

SERVICE AREA: Region 10

I certify that I am authorized to sign on behalf of this agency.

The budgeted amounts represent necessary and proper costs for implementing the program.

Name Authorized signature on Area Agency on Aging of Northwest Michigan Signature Page. See MYP page 82.

Date

APPENDIX J

WAIVER FOR DIRECT PROVISION OF SERVICE

Fiscal Year: 2007

Agency: Area Agency on Aging of Northwest Michigan

Service: Care Management

Amount of federal/state funds involved:

\$1,507,252.00

Geographic area to be served:

Region 10

Rationale for direct provision of services:

The Older Americans Act speaks of comprehensive and coordinated systems of care delivery. As part of a continuum of care for older adults, which begins with simple information giving and proceeds to more complex care coordination, it is a natural for AAANM to be the provider of Care Management services.

AAANM has been a provider of Care Management services since the late 1980's when the concept was piloted in Michigan. The objective of the Care Management Program is to provide an alternative to institutional care or delay pre-mature institutionalization for people over the age of 60. A nurse/social work team assists the client and their family in developing a coordinated plan of care that will allow the person to be cared for in the community. Clients may choose to receive their services from an array of in-home service providers that AAANM/Care Management contracts with. These providers must meet the OSA service standards and are monitored to ensure they are providing quality care.

The complexity of the Care Management Program means that it is much more effective to provide this service on a regional level rather than a county-by-county basis. It would be cost prohibitive for individual counties to each hire their own nurse/social work teams, establish data collections systems, negotiate provider agreements and monitor and train provider agencies. In addition, our major medical systems are regional providers, so clients are often leaving their individual counties to access their medical care. A regional Care Management Program allows for cost efficiencies in the operation of the program as well as consistency and continuity for clients as they seek services within our region.

In our role as planning and funding entity in Region 10, AAANM has access to resources that enhance our care coordination. We have knowledge of funding, access to funds and, through cooperative relationships built over years, we are able to coordinate care, which maximizes resources and minimizes confusion. AAANM possesses the experience and size to physically manage this service at the local level through our Care Management program.

**Authorized signature on Area Agency on Aging of Northwest Michigan Signature Page.
See MYP page 82.**

Approved

Disapproved

Signature, OSA Director

Date

DIRECT PROVISION OF SERVICES WORK PLAN

| | |
|---|----------------------------------|
| Area Agency on Aging: Area Agency on Aging of Northwest Michigan | Project Period |
| Service to be Provided: CARE MANAGEMENT | <input type="checkbox"/> FY 2007 |

Please specify the planned goals and activities that will be undertaken to provide the service identified above. A separate work plan must be developed for each direct service provided.

| <i>Goals and Activities</i> | <i>Planned Time Frame</i> | <i>Accomplishments</i> |
|--|---------------------------|--|
| <p><u>Goal One: To assist 400 elderly clients who are at significant risk of long-term care placement by coordinating in-home services.</u></p> <p><u>Activities:</u></p> <ol style="list-style-type: none"> 1) Complete 300 client prescreens, 2) Complete 150 client assessments 3) Complete 140 initial client care plans | <i>FY 2007 ongoing</i> | <p>In FY 2006, AAANM carried in 243 Care Management clients. In the first 6 months of FY 2006, we have served an additional 82 clients for a total of 325 clients. We plan to meet our targeted goal of serving 400 clients in FY 2006.</p> <p><u>Goal 1:</u></p> <ol style="list-style-type: none"> 1. In the first 6 months of FY 2006, we have completed 191 client prescreens. 2. In the first 6 months of 2006, we have conducted 84 Care Management client assessments. 3. In the first 6 months of FY 2006, we have developed 82 initial care plans. |
| <p><u>Goal Two: To provide care management services to 400 elderly clients through nurse / social worker care management teams.</u></p> <p><u>Activities:</u></p> <ol style="list-style-type: none"> 1) To maintain a staff/client ratio of 24-1 for Care Management clients, 2) Continue use of Case Coordination and Support as a maintenance category within the Care Management program as a way to serve stable clients in a more cost effective manner. | <i>FY 2007 ongoing</i> | <p><u>Goal 2:</u></p> <ol style="list-style-type: none"> 1. AAANM has a current staff ration of 21-1 for Care Management clients. A percentage of each Care Manager's time is also spent on MIChoice Waiver clients. Actual staff/client ration for both programs is 34-1. 2. AAANM currently has 12 or 5% of our CM caseload in the CCS category. These clients have been assigned an RN care manager who monitors their care. |
| <p><u>Goal Three: To continue to actively measure and assure quality within the Care Management Program.</u></p> <p><u>Activities</u></p> <ol style="list-style-type: none"> 1) To have a working Quality Management Committee which oversees implementation of an annual QM plan. 2) To monitor client satisfaction annually through a client survey. 3) To have a Peer and Chart Review processes in place. 4) To monitor service providers on an ongoing, scheduled basis. | <i>FY 2007 ongoing</i> | <p><u>Goal 3:</u></p> <ol style="list-style-type: none"> 1. AAANM has an active QM committee that meets monthly. An annual QM plan guides the committee's activities. QM plan is on file for review. 2. An annual client satisfaction survey is distributed to all clients each spring. In addition, new clients are receiving a telephone QA survey. 3. Peer reviews are completed quarterly. Supervisory chart reviews are on going. 4. All contract providers are monitored annually. A minimum of 10% of all POS providers is monitored yearly. |

Appendix J

FY 2007 Care Management Program PROGRAM SUMMARY BUDGET FORM (A)

| LINE ITEM | TOTAL BUDGETED | OSA CM FUNDS | TCM FUNDS | MATCH | | OTHER RESOURCES |
|-----------------|-------------------|-----------------|---------------|----------|---------------|--------------------|
| | | | | CASH | IN-KIND | |
| Wages/Salaries | 321,020 | 299,038 | 21,982 | | | |
| Fringe Benefits | 120,181 | 111,371 | 8,810 | | | |
| Travel | 23,712 | 21,715 | 1,997 | | | |
| Training | 605 | 605 | | | | |
| Supplies | 4,392 | 4,031 | 361 | | | |
| Occupancy | 18,576 | 17,051 | 1,525 | | | |
| Communications | 18,576 | 17,051 | 1,525 | | | |
| Equipment | 10,132 | 9,300 | 832 | | | |
| Administration | 14,861 | 13,641 | 1,220 | | | |
| Other | 511,327 | 11,776 | 1,052 | | 68,000 | 34,030 |
| POS | 14,500 | | 5,696 | | | |
| | 0 | | | | | |
| Totals | 652,609 | 505,579 | 45,000 | 0 | 68,000 | 34,030 |

I certify that I am authorized to sign on behalf of this agency.
The budgeted amounts represent necessary and proper costs for implementing the program.

Name **Authorized signature on Area Agency on Aging of Northwest Michigan Signature Page. See MYP page 82.**
 Title
 Date

*Note – Equipment expenses include: computer maintenance and upgrades, server maintenance, maintenance contracts on office equipment, internet access and software.

No major equipment purchases are planned for FY 2007.

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

Appendix J

FY 2007 Care Management Program

SCHEDULE OF MATCH & OTHER RESOURCES BUDGET FORM (B) MATCH

| SOURCE OF FUNDS | VALUE | |
|--|-------|----------|
| | Cash | In-Kind |
| LOCAL PROVIDERS | | \$68,000 |
| Note: Local Match is provided by family caregivers who provide care. | | |
| TOTAL | | \$68,000 |

OTHER RESOURCES

| SOURCE OF FUNDS | VALUE | |
|----------------------------|-------------------|---------|
| | Cash | In-Kind |
| State Access Title IIIB | \$33,355 \$675 | |
| | | |
| Total | \$34,030 | |

IX.

Assurances & Certifications

FY 2007 – 2009 Multi-Year Plan

ASSURANCES & CERTIFICATIONS Fiscal Year 2007

The undersigned agency, designated by the Michigan Commission on Services to the Aging to act as the Area Agency on Aging within a given planning and service area, agrees to the following:

1. That the FY 2007-2009 Multi-Year Plan includes an Annual Implementation Plan covering the period October 1, 2006 through September 30, 2007.
2. To administer its Annual Implementation Plan in accordance with the Older Americans Act (OAA), the Older Michiganians Act (OMA), federal and state rules, and policies of the Michigan Commission on Services to the Aging (CSA) as set forth in publications and policy directives issued by the Michigan Office of Services to the Aging (OSA).
3. To make revisions necessitated by changes in any of the documents listed in point two in accordance with directives from the Michigan Office of Services to the Aging.
4. That any proposed revisions to the Annual Implementation Plan initiated by the Area Agency on Aging will be made in accordance with procedures established by the Michigan Office of Services to the Aging.
5. That funds received from the Michigan Office of Services to the Aging will only be used to administer and fund programs outlined in the Annual Implementation Plan approved by the Michigan Commission on Services to the Aging.
6. That the Area Agency on Aging will undertake the duties and perform the project responsibilities described in the Annual Implementation Plan in a manner that provides service to older persons in a consistent manner over the entire length of the Annual Implementation Plan and to all parts of the planning and service area.
7. That program development funds will be used to expand and enhance services in accordance with the initiatives and activities set forth in the approved Area Implementation Plan.
8. That all services provided under the Annual Implementation Plan are in agreement with approved service definitions and are in compliance with applicable minimum standards for program operations as approved by the Michigan Commission on Services to the Aging and issued by the Michigan Office of Services to the Aging, including Care Management.
9. That the Area Agency on Aging will comply with all conditions and terms contained in the Statement of Grant Award issued by the Michigan Office of Services to the Aging.
10. That the Area Agency on Aging may appeal actions taken by the Commission on Services to the Aging with regard to the Annual Implementation Plan, or related matters, in accordance with procedures issued by the Michigan Office of Services to the Aging in compliance with the requirements of the Older Michiganians Act and Administrative Rules.

11. That the AAA will coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to individuals with severe disabilities, and with agencies that develop or provide services for individuals with disabilities.
12. That the AAA has in place a grievance procedure for eligible individuals who are dissatisfied with or denied services.
13. That the AAA will send copies of the Annual Implementation Plan to all local units of government seeking approval as instructed in the Plan Instructions.
14. That the Area Agency on Aging Governing Board and Advisory Council have reviewed and endorsed the Annual Implementation Plan.

The undersigned hereby submit the FY 2007 Annual Implementation Plan that describes the initiatives and activities which will be undertaken on behalf of older persons within the planning and service area. We assure that these documents and subsequent Annual Implementation Plans represent a formal commitment to carry out administrative and programmatic responsibilities and to utilize federal and state funds as described.

Area Agency on Aging of Northwest Michigan

Name of Area Agency on Aging

Signature:

Authorized signature on Area Agency on Aging of Northwest Michigan Signature Page. See MYP page 82. _____

Chairperson, Board of Directors _____

Date

Ray Kadlec

Typed Name

Signature:

Authorized signature on Area Agency on Aging of Northwest Michigan Signature Page. See MYP page 82.

Director

Area Agency on Aging

Date

Gregory E. Piaskowski

Typed Name

ASSURANCE OF COMPLIANCE
with
TITLE VI of the CIVIL RIGHTS ACT of 1964
Fiscal Year 2007

ASSURANCE OF COMPLIANCE WITH TITLE VI OF THE CIVIL RIGHTS ACT OF 1964, SECTION 504 OF THE REHABILITATION ACT OF 1973, TITLE IX OF THE EDUCATION AMENDMENTS OF 1972, AND THE AGE DISCRIMINATION ACT OF 1975

The Applicant provides this assurance in consideration of and for the purpose of obtaining Federal grants, loans, contracts, property, discounts or other Federal financial assistance from the Department of Health and Human Services.

THE APPLICANT HEREBY AGREES THAT IT WILL COMPLY WITH:

1. Title VI of the Civil Rights Act of 1964 (Pub. L. 88-352), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 80), to the end that, in accordance with Title VI of that Act and the Regulation, no person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.
2. Section 504 of the Rehabilitation Act of 1973 (Pub. L. 93-112), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 84), to the end that, in accordance with Section 504 of that Act and the Regulation, no otherwise qualified handicapped individual in the United States shall, solely by reason of his handicap, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.
3. Title IX of the Educational Amendments of 1972 (Pub. L. 92-318), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 86), to the end that, in accordance with Title IX and the Regulation, no person in the United States shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any education program or activity for which the Applicant receives Federal financial assistance from the Department.
4. The Age Discrimination Act of 1975 (Pub. L. 94-135), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 91), to the end that, in accordance with the Act and the Regulation, no person in the United States shall, on the basis of age, be denied the benefits of, be excluded from participation in, or be subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.

The Applicant agrees that compliance with this assurance constitutes a condition of continued receipt of Federal financial assistance, and that it is binding upon the Applicant, its successors, transferees and assignees for the period during which such assistance is provided. If any real property or structure thereon is provided or improved with the aid of Federal financial assistance extended to the Applicant by the Department, this assurance shall obligate the Applicant, or in the case of any transfer of such property, any transferee, for the period during which the real property or structure is used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits. If any personal property is so provided, this assurance shall obligate the Applicant for the period during which it retains ownership or possession of the property. The Applicant further recognizes and agrees that the United States shall have the right to seek judicial enforcement of this assurance.

The person whose signature appears below is authorized to sign this assurance, and commit the Applicant to the above provisions.

Authorized signature on Area Agency on Aging of Northwest Michigan Signature Page. See MYP page 82.

Signature:

Name of Authorized Official

Date

Title of Authorized Official

Name of Recipient Agency

Street Address

City/State/Zip

**ASSURANCE OF COMPLIANCE
with the
ELLIOT LARSEN CIVIL RIGHTS ACT
Fiscal Year 2007**

ASSURANCE OF COMPLIANCE WITH THE ELLIOT LARSEN CIVIL RIGHTS ACT, PA 453 OF 1976 AND THE PERSONS WITH DISABILITIES CIVIL RIGHTS ACT, PA 220 OF 1976.

The Applicant provides this assurance in consideration of and for the purpose of obtaining State of Michigan and Federal grants, loans, contracts, property, discounts or other State and Federal financial assistance from the Michigan Office of Services to the Aging.

THE APPLICANT HEREBY AGREES THAT IT WILL COMPLY WITH:

Non-Discrimination: In the performance of any grant, contract, or purchase order resulting herefrom, the Contractor agrees not to discriminate against any employee or applicant for employment or service delivery and access, with respect to their hire, tenure, terms, conditions or privileges of employment, programs and services provided or any matter directly or indirectly related to employment, because of race, color, religion, national origin, ancestry, age, sex, height, weight, marital status, physical or mental disability unrelated to the individual's ability to perform the duties of the particular job or position. The Contractor further agrees that every subcontract entered into for the performance of any grant, contract, or purchase order resulting herefrom will contain a provision requiring non-discrimination in employment, service delivery and access, as herein specified binding upon each subcontractor. This covenant is required pursuant to the Elliot Larsen Civil Rights Act, 1976 PA 453, as amended, MCL 37.2201 et seq, and the Persons with Disabilities Civil Rights Act, 1976 PA 220, as amended MCL 37.1101 et seq, and any breach thereof may be regarded as a material breach of the grant, contract, or purchase order.

The person or persons whose signature(s) appear(s) below is/are authorized to sign this assurance, and commit the Applicant to the above provisions.

Authorized signature on Area Agency on Aging of Northwest Michigan Signature Page. See MYP page 82.
Signature:

Name of Authorized Official

Date

Title of Authorized Official

Name of Applicant or Recipient Agency

Street Address

City/State/Zip

X.

Signature Page

MYP SIGNATURE PAGE
FY 2007-2009 MULTI-YEAR PLAN
FY 2007 ANNUAL IMPLEMENTATION PLAN

Agency Name: **Area Agency on Aging of Northwest Michigan**

This Multi-Year Plan (MYP) covers fiscal years 2007, 2008, and 2009 and includes the FY 2007 Annual Implementation Plan (AIP) beginning October 1, 2006 and ending September 30, 2007.

This Multi-Year Plan becomes valid upon approval by the Michigan Commission on Services to the Aging (CSA) It may be conditionally approved subject to all General and/or Special Conditions established by the Michigan Commission on Services to the Aging.

This MYP Signature Page may substitute for required signatures on documents within the MYP **if** those documents are specifically referenced on this signature page **and** those documents state on all required signature lines “(Authorized signature on [Agency Name’s] MYP Signature Page – See MYP page ___)”.

The Signatories below acknowledge that they have reviewed the entire Multi-Year Plan including all budgets, assurances, and appendices and that they commit [Agency Name] to all provisions and requirements of the Multi-Year Plan.

Signature Section:

Name of Area Agency on Aging: **Area Agency on Aging of Northwest Michigan**

| | | |
|--|---------------|--|
| _____ Signature - Chairperson, Board of Directors | _____ Date | <u>Rav Kadlec</u> Typed Name |
|--|---------------|--|

| | | |
|--|---------------|---|
| _____ Signature – Area Agency on Aging Director | _____ Date | <u>Gregory E. Piaskowski</u> Typed Name |
|--|---------------|---|

MULTI-YEAR DOCUMENTS REFERENCED BY THE SIGNATURE PAGE

Budget Documents:

- FY 2007 Area Plan Grant Budget; **pages 11-14.**
- Appendix J - FY 2007 Direct Service Budget for **Information & Assistance, page 70.**
- Appendix J - FY 2007 Direct Service Budget for **Care Management, page 73.**

Assurances:

- MYP Assurances and Certifications document; **page 77.**
- MYP Assurance of Compliance with Title VI of the Civil Rights Act of 1964; **page 79.**
- MYP Assurance of Compliance with the Elliot Larsen Civil Rights Act; **page 80.**

Appendices:

- Appendix F - Regional Service Definitions; **pages 63, 64, 65.**
- Appendix G - Request to Transfer Funds; **page 66.**
- Appendix J - Waiver for Direct Provision of Service **Information & Assistance, Page 68.**
- Appendix J - Waiver for Direct Provision of Service **Care Management, Page 71.**

Glossary of Acronyms

Area Agency on Aging of Northwest Michigan - (AAANM)

Acronyms

| | |
|-------|---|
| AAA | Area Agency on Aging |
| AAANM | Area Agency on Aging of Northwest Michigan (also known as 4AM) |
| ADC | Adult Day Care |
| ADRC | Aging and Disability Resource Center |
| ADS | Adult Day Service |
| ADL | Activities of Daily Living (bathing, bed mobility, bladder / bowel function, toileting, dressing, eating / feeding, mobility level, stair climbing, transferring, walking, wheeling) |
| AFC | Adult Foster Care |
| AIP | Annual Implementation Plan |
| AIS | Aging Information System |
| AIRS | Alliance of Information and Referral Systems |
| APS | Adult Protective Services |
| AoA | Administration on Aging (Federal) |
| | |
| BOA | AAANM Board of Advisors |
| BOD | AAANM Board of Directors |
| CBC | Citizens for Better Care |
| CENA | Competency Evaluated Nurse Assistant |
| CHS | Catholic Human Services |
| CIL | Center of Independent Living |
| CM | Care Management |
| CMH | Community Mental Health |
| CMS | Center of Medicare & Medicaid Services (formerly HCFA) |
| CNA | Certified Nurses Aide |
| COA | Commission or Council on Aging |
| CR | Caregiver Respite, (State Tobacco funds) |
| CSA | Commission on Services to the Aging (State) |
| | |
| DCH | Department of Community Health |
| DHS | Department of Human Services (state, formerly <u>F</u> amily <u>I</u> ndependence <u>A</u> gency) |
| DMB | Department of Management and Budget (state) |
| DOL | Department of Labor (state, also USDOL) |
| EAP | Elder Abuse Prevention |
| EPIC | Elder Prescription Insurance Coverage (no longer viable) |
| FGP | Foster Grandparent Program |
| FIA | Family Independence Agency (State, now known as Department of Human Services) |
| FY | Fiscal Year |

ACRONYMS-CONTINUED

Page 2

| | |
|-----------|--|
| GAO | General Accounting Office |
| HHA | Home Health Aide |
| HCBS/ED | Home & Community Based Services for the Elderly and Disabled Waiver Program (MICHOICE) |
| HDM | Home Delivered Meals |
| HMK | Homemaker service |
| HMO | Health Maintenance Organization |
| I & A / R | Information and Assistance / Referral |
| IADL | Independent Activities of Daily Living (cooking or re-heating meals, laundry, cleaning, keeping appointments shopping, taking meds, handling finances, heating home, using phone & public transportation) |
| LPN | Licensed Practical Nurse |
| LSP | Legal Services Program |
| LTC | Long Term Care |
| | |
| MAC | Michigan Association of Counties |
| MDOT | Michigan Department of Transportation |
| MIAIRS | Michigan Alliance of Information and Referral Systems |
| MICIS | MI Choice Information System |
| MI-CHOICE | Home & Community Based Services for the Elderly and Disabled Waiver Program |
| MIS | Management Information System |
| MMAP | Medicare/Medicaid Assistance Program |
| MSAC | Michigan Senior Advocates Council |
| MSG | Michigan Society of Gerontology |
| MYP | Multi-Year Plan |
| | |
| N4A | National Association of Area Agencies on Aging |
| NCOA | National Council on Aging |
| NAPIS | National Aging Programs Information System |
| NFCSP | National Family Caregiver Support Program |
| NSIP | Nutritional Services Incentive Program (formerly the USDA program) |
| OAA | Older Americans Act |
| OMB | Office of Management and Budget (Federal) |
| OSA | Office of Services to the Aging (State) |
| OTC | Over the Counter |

ACRONYMS-CONTINUED

Page 3

| | |
|--------------|--|
| PA | Public Act |
| PC | Personal Care |
| PDN | Private Duty Nursing |
| PERS | Personal Emergency Response System |
| PI | Program Income |
| POS | Purchase of Service |
| PSA | Planning and Service Area |
| PY | Program Year |
| RD | Registered Dietitian |
| | |
| RFP/ RFC | Request for Proposal / Continuation |
| RN | Registered Nurse |
| RSVP | Retired and Senior Volunteer Program |
| SAC | State Advisory Council on Services to the Aging |
| SAC | State Alternative Care - funds In-Home Services |
| SCP | Senior Companion Program |
| SCS | Senior Center Staffing |
| SCSEP | Senior Community Service Employment Program (Title V) |
| SGA | Statement of Grant Award |
| SS | Social Security |
| SSA | Social Security Administration |
| SSI | Supplemental Security Income |
| | |
| TA | Technical Assistance |
| TCM | Targeted Care Management |
| Title IIIB | Section IIIB of the Older American Act (OAA) - funds Community Services |
| Title IIIC-1 | Section IIIC, Part 1 of OAA - funds Congregate Meals |
| Title IIIC-2 | Section IIIC, Part 2 of OAA - funds Home Delivered Meals |
| Title IIID | Section D of OAA - funds Disease Prevention & Health Promotion |
| Title IIIE | Section E of OAA - funds National Family Caregiver Support Program |
| Title IIIG | Section G of OAA - funds Elder Abuse Awareness |
| Title V | Section V of the OAA - funds Senior Community Service Employment Program |
| TSR | Tobacco Settlement Respite (State), also called Caregiver Respite |
| USDA | United States Department of Agriculture (<i>now known as NSIP - see above</i>) |
| USDOL | US Department of Labor |
| VA | Veteran's Administration |

Updated March 2006