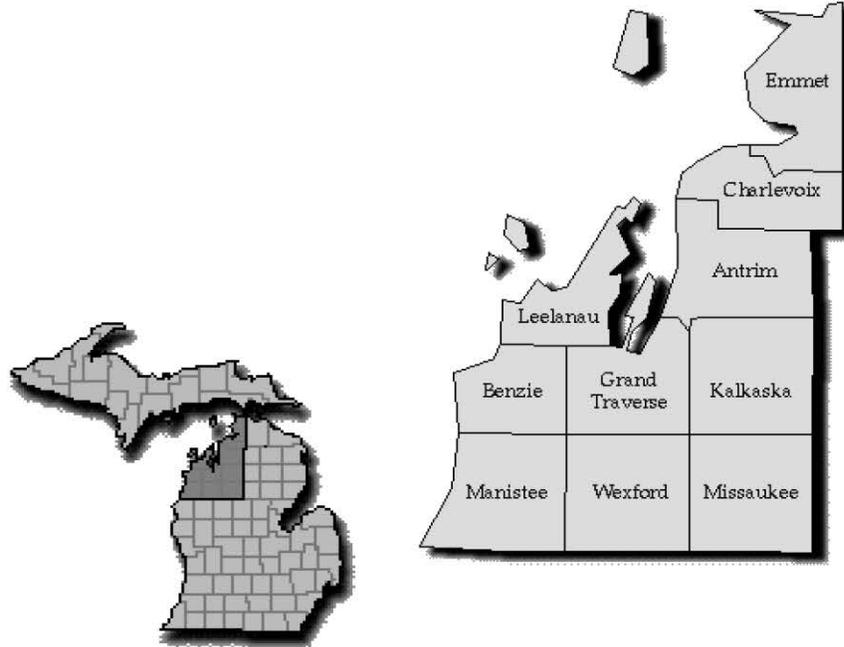


**FY 2023 ANNUAL IMPLEMENTATION PLAN**  
**AREA AGENCY ON AGING OF NORTHWEST MICHIGAN, INC. 10**



---

**Planning and Service Area**

Antrim, Benzie, Charlevoix, Emmet,  
Grand Traverse, Kalkaska, Leelanau,  
Manistee, Missaukee, Wexford

**Area Agency on Aging of Northwest  
Michigan, Inc.**

1609 Park Drive, P.O. Box 5946  
Traverse City, MI 49696-5946  
231-947-8920 (phone)  
800-442-1713 (toll-free)  
231-947-6401 (fax)  
Heidi Gustine, Executive Director  
[www.aaanm.org](http://www.aaanm.org)

**Field Representative Cindy Albrecht**  
[albrechtc@michigan.gov](mailto:albrechtc@michigan.gov)  
517-284-0162

---

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

**FY2023-2025 Multi Year Plan**

**FY 2023 Annual Implementation Plan**

**Area Agency On Aging of Northwest MI, Inc.**

**FY 2023**

**Table of Contents**

Executive Summary	3
County/Local Unit of Government Review	10
Public Hearings	11
Regional Service Definitions	13
Access Services	17
Direct Service Request	20
Regional Direct Service Request	29
Program Development Objectives	31
Scope of Services	35
Planned Service Array	46
Planned Service Array Narrative	48
Strategic Planning	50
Advocacy Strategy	54
Leveraged Partnerships	55
Community Focal Points	58
Other Grants and Initiatives	64
Signatures	66

Area Agency On Aging of Northwest MI, Inc.

FY 2023

### Executive Summary

The executive summary provides a succinct description of the priorities set by the area agency for the use of Older Americans Act (OAA) and state funding during FY 2023-2025. Please include a summary of your agency that touches on each of the items listed below.

1. A brief history of the area agency and respective PSA that provides a context for the MYP/AIP. It is appropriate to include the area agency's vision and/or mission statements and a brief description of the PSA. Include information on the service population, agency strengths, challenges, opportunities, and primary focus for the upcoming three-year period.
2. A description of planned special projects and partnerships.
3. A description of specific management initiatives the area agency plans to undertake to achieve increased efficiency in service delivery, including any relevant certifications or accreditations the area agency has received or is pursuing.
4. Address the agency's response to the COVID-19 pandemic emergency, including a description of the challenges and continuing needs due to this emergency.
5. Any significant new priorities, plans or objectives set by the area agency for the use of OAA and state funding during the MYP. If there are no new activities or changes, note that in your response.
6. A description of the area agency's assessment of the needs of their service population. See *Operating Standard for AAAs C-2, 4.*

**History:** *The Area Agency on Aging of Northwest Michigan (AAANM) is a private, nonprofit agency designated as an Area Agency on Aging in 1974 by the Bureau of Aging, Community Living, and Supports (ACLS Bureau), formerly, Aging and Adult Services Agency (AASA) and Michigan Office of Services to the Aging (OSA), respectively. As part of the aging services network, AAANM works regionally to promote the development of a comprehensive, coordinated, and cost-effective system of home and community based long-term care that is responsive to the needs and preferences of older adults and their family caregivers.*

**Mission:** *The mission of AAANM is to serve and advocate for older persons, adults with disabilities and caregivers by supporting their independence, dignity, and quality of life.*

**Description of PSA:** *AAANM covers a planning and service area (PSA) of ten counties located in northwest lower Michigan: Antrim, Benzie, Charlevoix, Emmet, Grand Traverse, Kalkaska, Leelanau, Manistee, Missaukee, and Wexford counties (Region 10).*

**Service Population:**

*The Environmental Systems Research Institute (ESRI) determined that 315,339 individuals resided in the Region 10 service area in FY 2021 and projected this will increase 2% to 322,647 persons by FY 2026. The*

**Area Agency On Aging of Northwest MI, Inc.**

**FY 2023**

*60+ population is projected to increase 10% during this period, from 100,585 to 110,832 and from 32% of the total population to 34% of the total population. One in three individuals in the Region 10 service area are 60+ years of age.*

*The net increase in the 60+ population from FY2022 to FY2025 is expected to be 10,247. While this growth is expected to occur throughout the 10-county region, the greatest growth in the 60+ population is projected within Grand Traverse (+3,727), then Wexford (+972) and Benzie (+748) counties.*

**Strengths, Challenges, Opportunities and Primary Focus for the Upcoming Three-Year Period**

*AAANM has four internal strategic priorities that are used for decision making and prioritization. These goals were derived from on-going strategic conversations and discussions of the organization's strengths, weaknesses, opportunities, and threats.*

- 1.1. Strong culture grounded in our organizational values and mission*
- 2. Right people in right roles with right workflows, well supported and trained*
- 3. Strong quality across the organization*
- 4. Strong financial position now and in the future*

*In addition to on-going, iterative strategic conversations as a leadership team, for the MYP 2023-2025, AAANM also conducted a special SWOT session with leadership and staff who wished to participate. This SWOT is a combination of strategic conversations and the special SWOT session.*

**Strengths:** *Region 10 has a strong aging network dedicated to providing quality Long-Term Services and Supports (LTSS). The changing landscape with a focus on health and social determinants of health, as well as evolving payment models is creating new or different relationships and efforts to impact the lives of older adults in northwest Michigan. The organization has a strong commitment to technology, increasing visibility, implementing process improvements, and using data to drive decisions. Achieving National Committee for Quality Assurance (NCQA) accreditation demonstrates AAANM's commitment to quality and excellence. AAANM's greatest assets are its experienced, talented employees, and strong partnerships with county aging units and other providers/agencies that support vulnerable populations.*

**Weaknesses:** *Sufficient and sustainable funding is a continued concern for AAANM and many other organizations in northwest Michigan that are heavily dependent upon governmental payment sources and grants. Additionally, the lack of sophisticated IT systems (and interoperability with other health and community service systems) has become an evident weakness of AAANM. This impacts AAANM's ability to maximize operational efficiency and clinical care quality. Staff have identified that existing workflows need to be analyzed and adapted to successfully position AAANM to manage the rapid growth in staff and service needs. The Direct Care Workers (DCWs) shortage is making it increasingly difficult for providers to staff in-home services, creating unfilled care plans. Constant changes in program standards, rules, regulations, and priorities make it challenging to keep pace with growing service needs. The lack of understanding of who AAANM is and what we do negatively impacts the amount of service provided and collaboration that could be achieved. Finally, there are numerous areas within the region that do not have internet access and many*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

*that we serve cannot afford the service when it is available. This impacts access to services for older adults that are homebound or do not have transportation. Lack of internet access creates gaps in access to telemedicine, purchasing groceries for home delivery and socializing using social media.*

**Opportunities:** *AAANM has an opportunity to strengthen its internal operations, to diversify funding streams, and to build upon its relationships and collaborations in the community to impact older adults while preparing for changes in the delivery/payment of LTSS. There are opportunities to build AAANM's branding and reputation, reduce wait times, increase referrals, services, participants, and revenue. Additionally, there are opportunities to maximize operational efficiencies, further leverage technology, and diversify funding streams. There is also room for AAANM to use the flexibilities and new ways of doing business learned throughout the pandemic that can help expand programs, strengthen relationships with providers and increase the morale of staff experiencing burn out. Importantly, there is also opportunity to build on the skills and knowledge learned through process mapping to refine key areas and practices internally.*

**Threats:** *There are significant factors that pose substantial risk for AAANM and the aging network in northwest Michigan. The aging Baby Boomers will have a dramatic effect on the increased need for supports and services this MYP cycle. There is a chronic and increasing shortage of workers, most significantly the direct care workforce but also including nurses, social workers, and other talent necessary for the successful delivery of AAANM programs and services. The ambiguous political climate and limited direction from the State of Michigan about plans to integrate physical, behavioral, and long-term care, changes that could have irreversible impacts to AAANM's scope and presence in Region 10 is a continued threat. Keeping pace with changing program requirements, market dynamics, and organizational best practices, is consuming and pressing. Staff burnout and risk of possible turnover is a threat to AAANM. Not keeping pace with IT interoperability advances is a threat during a time when the federal and state governments are calling for integration of services and care plans.*

**Primary Focus 2023-2025:**

*AAANM has four programmatic goals for this MYP period:*

- 1.1. Continue to identify on-going community needs resulting from COVID-19 that AAANM may help address.*
- 2. Continue to evaluate and implement programming to maximize ACLS Bureau and other funding streams for greatest community benefit and reduce wait lists.*
- 3. Maintain and strengthen regional capacity to support paid and unpaid caregivers of older adults and persons with disabilities.*
- 4. Improve the accessibility of services to Michigan's communities and people of color, immigrants, and LGBTQ+ individuals.*

**A description of planned special projects and partnerships.** *As part of AAANM's efforts to evaluate and implement programming to maximize funding streams, AAANM engaged TBD Solutions to assist with Revenue Cycle Management and Utilization Management analyses of the organization. From this, multiple*

**Area Agency On Aging of Northwest MI, Inc.**

**FY 2023**

*internal efficiency priorities to modernize the organization have been identified and work is underway. The intended result is to increase capacity to serve our communities while maximizing existing revenues and position the organization to pursue new funding opportunities in the future. Specific initiative areas are described in Question 3.*

*Additionally, AAANM looks forward to ongoing participation in leadership learning sessions and learning collaboratives established by the Area Agency on Aging Association of Michigan (4AM).*

**A description of specific management initiatives the area agency plans to undertake to achieve increased efficiency in service delivery, including any relevant certifications or accreditations the area agency has received or is pursuing.**

*AAANM is undertaking specific management initiatives related to Revenue Cycle Management and Utilization Management modernization described in Question 2.*

- 1. Reduce cycle time from first contact with the agency to enrollment in the most appropriate care management program (Caregiver Respite, Case Coordination and Support, Care Management, Targeted Care Management, MI Choice Waiver).*
- 2. Reduce administrative tasks or barriers for staff through use of technology where possible.*
- 3. Ensure there are clear operating policies and procedures and productivity standards for all programmatic areas.*
- 4. Maximize the MI Choice Waiver program (currently operating at 50% capacity).*

*Additionally, in 2021, AAANM successfully achieved National Committee for Quality Assurance (NCQA) accreditation. The accreditation process was very rigorous and set the stage for the level of work and commitment to quality AAANM will continue. AAANM will use NCQA standards as our guide for the ongoing demonstration of consistent delivery of high-quality programs and services. NCQA accreditation is a 3-year cycle. Renewal is granted upon successful completion of an audit conducted by NCQA staff. AAANM plans to maintain accreditation year over year.*

**Address the agency's response to the COVID-19 pandemic emergency, including a description of the challenges and continuing needs due to this emergency.**

*AAANM's response to the COVID-19 pandemic emergency was multi-faceted. In 2020, AAANM quickly mobilized an incident command structure using the Leadership team as primary points of contact for if/when emergency situations arose. We determined how to leverage technology for constant contact and communication exchange in real-time.*

*AAANM pivoted to a completely remote workforce, launched emergency management efforts to support older adults and partner agencies in the region, acquired and distributed Personal Protective Equipment (PPE), launched friendly reassurance, initiated new programs, distributed CARES Act and Families First Coronavirus Relief Act (FFCRA) funding, assisted with coordinating the vaccination of older adults in the region, and built many new partnerships to serve the needs of our region.*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

*The pandemic provided a new opportunity for the aging network to expand nutrition services to older adults, and to build new partnerships. Being flexible and resourceful was key to these many successes. Traditional congregate and home delivered meal programs adapted quickly to continue serving meals, allowing older adults to shelter in place. Increased flexibilities made this possible.*

*County Aging Units and senior nutrition programs also quickly implemented processes to receive and distribute a variety of food boxes. Through this experience, we learned our strengths, and how working together in new ways helps everyone be stronger together, for a common goal of serving those in need!*

*AAANM has seen a 30% increase in call volume of older adults and caregivers requesting information and assistance or options counseling. These calls are more acute and complex than the organization has previously experienced and at times, are crisis in nature (new territory for AAANM). Like many organizations, AAANM and our participants are impacted by the ongoing direct care workforce shortage that has been exacerbated by the pandemic. Program participant service plans are often incomplete from the shortage of workers that providers are experiencing. AAANM has also felt the impact of the workforce shortage; trying to secure nurse/social work and other qualified staff to fill vacancies has been difficult.*

*AAANM continues to evaluate the impact of COVID-19 and will maintain the Access service definition for Disaster Advocacy and Outreach in anticipation of future COVID-19 waves or other emergencies. Maintaining this definition will allow AAANM the flexibility to shift funding to disaster support if needed, whether it be for COVID-19 or other unanticipated disasters. Additionally, AAANM received American Rescue Act (ARP) funding. Some of the nutrition funding has been awarded to nutrition providers to assist with rising food and transportation costs. The remainder of the ARP funding will be distributed in FY23-24.*

***Any significant new priorities, plans or objectives set by the area agency for the use of OAA and state funding during the MYP. If there are no new activities or changes, note that in your response.***

*Please see responses to Questions 2 and 3. No significant new priorities, plans or objectives are set forth but rather a refocus on modernizing the organization.*

***Description of the area agency's assessment of the needs of their service population. See Operating Standard for AAAs C-2, 4.***

*As part of the MYP development process, AAANM evaluated demographic trends and gathered input about the preferences, characteristics, and needs of older adults, caregivers, and disabled persons. This information was used to identify funding priorities and program development objectives for the FY2023-2025 MYP.*

*For the FY2023-2025 MYP AAANM used a multi-source approach for its needs assessment:*

*1. Demographic analysis of population projections and forecasts from 2021 to 2026 sourced from ESRI. See Appendix 1: Region 10 Population Trend by Age Category*

**Area Agency On Aging of Northwest MI, Inc.**

**FY 2023**

- 2. Review and validation of needs assessments completed for the MYP 2015-2019 and MYP 2020-2022. Most of the themes identified have remained the same, if not intensified. See Appendix 2: Regional Needs Previously Identified for a comprehensive list.*
  
- 3. A review of community needs assessment data findings from 1) MI Thrive – a 10+ county regional needs assessment conducted by the Public Health Alliance and local health systems; 2) community needs assessment data (n=417 older adults) gathered by the Northwest Michigan Community Action Agency (NMCAA); and 3) community needs assessment data (n = 77 older adults) gathered by the Grand Traverse Band of Ottawa and Chippewa Indians.*
  
- 4. A compilation of focus groups and interviews (n = 85) conducted by Avenue ISR. Focus group and interview participants included local Commissions and Councils on Aging, AAANM staff, and local human services leaders.*
  
- 5. A survey of LGBTQI individuals (n = 15) living in northwest Michigan and subsequently a focus group of 4 LGBTQI participants.*

*Research questions addressed:*

- 1. What major themes have changed since the last MYP, particularly in light of the COVID-19 pandemic?*
- 2. What are the greatest unmet needs among the 60+ population, particularly those that are minorities, low socio-economic status, are caregivers, or have cognitive impairments?*
- 3. What are the greatest benefits of AAANM's programs and services?*
- 4. What are the greatest challenges or opportunities?*

**Major Community Needs Identified / Intensified**

*Using primary and secondary data gathered, four major themes presented as priority issues for the 60+ population in northwest Michigan:*

- 1. There is increased demand for information, referral, and resource navigation. Older adults and caregivers are turning to the aging network for assistance navigating many systems including MDHHS, Social Security, Medicare, supportive housing options and local community resources. The expansion of systems to online portals and applications has left many older adults behind and unable to access needed support. In addition to other aging focal point organizations, AAANM has experienced this phenomenon with Information and Assistance / Options Counseling calls being up 30% per month compared to pre-pandemic levels, and the complexity and severity of calls has also significantly increased. Calls are more broad spectrum and can be crisis in nature.*
  
- 2. There is increased need for access to in-home services. Informal caregivers are burnt out, increasing the demand for care, while simultaneously there is a reduction in care available due to the direct care workforce crisis. In AAANM's experience, the shortage pertains not just to direct care workers, but also a shortage of providers in the network – also largely due to the workforce shortage. It is noteworthy that within the last year in the AAANM provider network, two in-home providers sold/transferred ownership, one closed completely and three others significantly reduced operations due to lack of staffing. Additionally, two Adult Foster Care*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

*homes and one Assisted Living Facility have closed.*

*3. Mental health (prevalence, lack of access) was expressed as a crisis issue across most need assessments and within the focus groups/interviews. Social isolation and caregiver fatigue, intensified by the COVID-19 pandemic, has exacerbated the mental health crisis. In addition, focus groups and interviews articulated burnout and compassion fatigue in the human services industry.*

*4. Social determinants of health were identified as intensified needs at large and within the 60+ population, including access to housing, food and transportation. Inflation is a compounding factor.*

*a. Housing is a multi-faceted issue. Lack of affordable workforce housing is putting negative pressure on the social services workforce. Lack of capacity in skilled nursing and long-term care facilities is pushing some older adults back into private residences, where there is a severe lack of affordable options. This may be contributing to a rise in homelessness among older adults in the region. Even those with homes sometimes are dealing with an aging housing stock with needs for repairs and weatherization.*

*b. Food insecurity remains a widespread need among older adults, although a number of creative and collaborative programs have been implemented to meet this need. Of particular success has been the fresh produce boxes sponsored by the ACLS Bureau.*

*c. Transportation issues have become even more acute as public transit services have scaled back operations due to workforce shortages.*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

**County/Local Unit of Government Review**

Area Agencies on Aging must send a letter, with delivery and signature confirmation, requesting approval of the final MYP/AIP by no later than June 24, 2022, to the chairperson of each County Board of Commissioners within the Planning and Service Area (PSA), requesting their approval by July 12, 2022. For a PSA comprised of a single county or portion of the county, approval of the MYP/AIP is to be requested from each local unit of government within the PSA. If the area agency does not receive a response from the county or local unit of government by July 14, 2022, the MYP/AIP is deemed passively approved. The area agency must notify their Bureau of Aging and Community Living Supports (ACLS Bureau) field representative by July 18, 2022, whether their counties or local units of government formally approved, passively approved, or disapproved the MYP/AIP. The area agency may use electronic communication, including email and website-based documents, as an option for acquiring local government review and approval of the MYP/AIP. To employ this option, the area agency must:

Send a letter through the US Mail with delivery and signature confirmation or an email requiring a response confirming receipt to the chief elected official of each appropriate local government advising them of the availability of the final draft MYP/AIP on the area agency's website. Instructions for how to view and print the document must be included. Offer to provide a printed copy of the MYP/AIP via US Mail or an electronic copy via email, if requested. Be available to discuss the MYP/AIP with local government officials, if requested. Request email notification from the local unit of government of their approval of the MYP/AIP, or their related concerns. Please describe the efforts, including the use of electronic communication, made to distribute the MYP/AIP and to gain support from the appropriate county and/or local units of government.

*The Region 10 planning and service area (PSA) served by the Area Agency on Aging of Northwest Michigan (AAANM) is comprised of ten counties: Antrim, Benzie, Charlevoix, Emmet, Grand Traverse, Kalkaska, Leelanau, Manistee, Missaukee, and Wexford. Annually, AAANM sends a formal written request to each of the ten County Boards of Commissioners for their review and approval of the AAANM Annual Implementation Plan and/or Multi-Year Plan. The AAANM Executive Director attends County Board of Commissioners meetings to provide an overview of AAANM, including an Annual Report, and answers questions the Commissioners may have about the agency or the Plan, as requested.*

*This MYP/AIP will be e-mailed electronically, as well as mailed via certified US mail, on June 6, 2022, requesting a response from each County Board of Commissioners by July 12, 2022. Responses AAANM receives will be communicated with the ACLS Bureau field representative for Region 10 by July 18, 2022.*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

**Public Hearings**

The area agency must employ a strategy for gaining MYP/AIP input directly from the planned service population of older adults, caregivers, and persons with disabilities, along with elected officials, partners, providers and the general public, throughout the PSA. The strategy should involve multiple methods and may include a series of input sessions, use of social media, on-line surveys, etc.

At least two public hearings on the FY 2023-2025 MYP/AIP must be held in the PSA. In-person hearings are preferred, but virtual hearings are acceptable if they follow Michigan's Open Meetings Act and the requirements of the area agency's governing authorities. The hearings must be accessible. When deciding between online and in-person meetings, consider limitations to internet access and other accessibility issues with the relevant populations in your region. In person, e-mail, and written testimony must also be accepted for at least thirty days beginning when the summary of the MYP/AIP is made available.

The area agency must post a notice of the public hearing(s) in a manner that can reasonably be expected to inform the public about the hearing(s). Acceptable posting methods include but are not limited to: paid notice in at least one newspaper or newsletter with broad circulation throughout the PSA, as well as news sources geared toward communities of color, people who are lesbian, gay, bisexual, transgender queer or other (LGBTQ+), immigrant communities and/or other underrepresented groups; presentation on the area agency's website, along with communication via email and social media referring to the notice; press releases and public service announcements; and a mailed notice to area agency partners, service provider agencies, Native American organizations, older adult organizations and local units of government. See *Operating Standards for Area Agencies on Aging*, Section B-2 #3. The public hearing notice should be available at least thirty days before the scheduled hearing. This notice must indicate the availability of a summary of the MYP/AIP at least fourteen days prior to the hearing, and information on how to obtain the summary. All components of the MYP/AIP should be available for the public hearings.

Complete the chart below regarding your public hearing(s). Include the date, time, number of attendees and the location and accessibility of each public hearing. Please scan any written testimony (including emails received) as a PDF and upload on this tab.

A narrative description of the hearings and the public input strategy is also required. Please describe the strategy/approach employed to encourage public attendance and testimony on the MYP/AIP. Tell us the strategy used specifically to inform communities of color, LGBTQ+, immigrant communities and/or other underrepresented groups. Describe all methods used to gain public input and the resultant impact on the MYP/AIP. Indicate whether the meeting(s) complied with the Michigan Open Meetings Act.

Date	Location	Time	Barrier Free?	No. of Attendees
04/07/2022	Virtual	11:15 AM	Yes	18

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

04/11/2022	Kalkaska County Commission	12:15 PM	Yes	50
------------	----------------------------	----------	-----	----

*AAANM conducted two public hearings, one on 4/7/2022 and a second on 4/11/2022. There were 18 attendees at the 4/7 public hearing and 50 attendees at the 4/11 public hearing. The public hearings were promoted via Facebook, AAANM website, press releases and local Commissions/Councils on Aging. Both hearings compiled with the Michigan Open Meetings Act.*

*AAANM also sent notice of the MYP Public Hearing Input sessions directly to the Little Traverse Bay Band of Odawa Indians, the Grand Traverse Band of Ottawa and Chippewa Indians and the Little River Band of Ottawa Indians.*

*Virtual Session: Minimal discussion was had with one comment made agreeing with the regional needs outlined in the plan.*

*Kalkaska County Commission on Aging input and feedback: Very good discussion was had with comments on the following needs: direct care workers, caregiver support, initiatives to reduce social isolation, internet access and affordability, training opportunities for using technology, and the hardships that the Michigan Auto No-Fault Reform legislation is causing.*

**Public input opportunities to gather data for the MYP/AIP and identify needs:**

*For the FY2022-25 MYP, AAANM used focused groups with Commissions and Councils on Aging and local human service leaders (n=45) to validate previous needs assessments and to assess what has changed since those studies given the dynamic nature of the pandemic.*

*Additionally, AAANM received survey feedback from 15 LGBTQI individuals living in northwest lower Michigan (Antrim, Benzie, Charlevoix, Emmet, Grand Traverse, Kalkaska, Leelanau, Manistee, Missaukee, and Wexford counties) in February 2022. AAANM also hosted a focus group of 4 LGBTQI individuals living in northwest lower Michigan conducted March 2, 2022. The purpose and goal of the survey and focus group was to learn about unique needs and issues facing older adults who are LGBTQI.*

*AAANM then used the public hearings as opportunities to validate identified needs and to gather input about AAANM's 2023-2025 MYP priorities.*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

**Regional Service Definitions**

If the area agency is proposing to fund a service category that is not included in the *Operating Standards for Service Programs*, then information about the proposed service category must be included under this section. Enter the service name, identify the service category and fund source, unit of service, minimum standards, and rationale for why activities cannot be funded under an existing service definition.

**Service Name/Definition**

Special Needs Gap Filling (Individual, community or nutrition)

Rationale (Explain why activities cannot be funded under an existing service definition.)

This service category allows for flexibility should an unforeseen unmet need present itself which is causing a barrier to an individual's independence and/or an organization's ability to serve older adults/caregivers and no other resources are available.

Service Category	Fund Source	Unit of Service
<input type="checkbox"/> Access <input checked="" type="checkbox"/> In-Home <input checked="" type="checkbox"/> Community	<input checked="" type="checkbox"/> Title III PartB <input type="checkbox"/> Title III PartD <input checked="" type="checkbox"/> Title III PartE <input type="checkbox"/> Title VII <input checked="" type="checkbox"/> State Alternative Care <input checked="" type="checkbox"/> State Access <input checked="" type="checkbox"/> State In-home <input checked="" type="checkbox"/> State Respite <input checked="" type="checkbox"/> Other <u>          Title III-C1, Title III-C2          </u>	One unit of goods or services purchased

**Minimum Standards**

Provision of services or goods (individually or through an organization) that would alleviate a barrier crucial to older adults' or caregivers' well-being or independence when no other resources are available to address the need.

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

<b>Service Name/Definition</b>		
Self-Determination Option (for Case Coordination & Support or Care Management) with Fiscal Intermediary		
Service Definition: Supports participants to directly acquire and control needed services and supports using funds allotted in an individual budget.		
Rationale (Explain why activities cannot be funded under an existing service definition.)		
ACLS Bureau currently does not have an existing service definition that supports participants to directly acquire and control needed services and supports using funds allotted in an individual budget.		
<b>Service Category</b>	<b>Fund Source</b>	<b>Unit of Service</b>
<input checked="" type="checkbox"/> Access <input type="checkbox"/> In-Home <input type="checkbox"/> Community	<input checked="" type="checkbox"/> Title III PartB <input type="checkbox"/> Title III PartD <input type="checkbox"/> Title III PartE <input type="checkbox"/> Title VII <input checked="" type="checkbox"/> State Alternative Care <input checked="" type="checkbox"/> State Access <input checked="" type="checkbox"/> State In-home <input type="checkbox"/> State Respite <input checked="" type="checkbox"/> Other <u>State Care Management and State Aging Network Serv</u>	CCS-SD or CM-SD: One unit per month

**Minimum Standards**

Minimum Standards:

1. Participants choosing the self-determination option may directly manage service providers for the following home and community-based services i.e. personal care, homemaking, transportation and including respite services.

2. Supervision of Direct Care Workers

The participant, or designated representative, acts as the employer and provides direct supervision of the chosen workers for self-determined services in the participant's PCSP. The participant, or designated representative, directly recruits, hires, and manages employees.

3. Use of a Fiscal Intermediary

Participants choosing the self-determination option must use an approved fiscal intermediary agency. The fiscal intermediary agency will help the individual manage and distribute funds contained in the participant's budget. The participant uses the funds in the budget to purchase goods, supports, and services authorized in the participant's PCSP. The Fiscal Intermediary holds the liability insurance and indemnifies the Area Agency on Aging.

4. Reference and Criminal History Screening Checks

The participant, or fiscal intermediary chosen by the participant, must conduct reference checks and a criminal history screening through the Michigan State Police ICHAT and Public Act 28 of 2021 for each paid staff person who will be entering the participant's home. The participant or fiscal intermediary must conduct the criminal history screening before authorizing the employee to furnish services in the participant's home. AAANM must also check the Michigan Medicaid sanctioned provider list to determine if the provider is on the list; these providers must be excluded from providing any services.

5. Provider Qualifications

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

**FY2023-2025 Multi Year Plan**

**FY 2023 Annual Implementation Plan**

---

**Area Agency On Aging of Northwest MI, Inc.**

**FY 2023**

Providers of self-determined services must minimally:

- a. Be 18 years old.
- b. Be able to communicate effectively both orally and in writing and follow instructions .
- c. Be trained in universal precautions and blood-borne pathogens. AAANM must maintain a copy of the employees' training record in the participant's case file .
- d. Providers of self-determined services cannot also be the participant's spouse , guardian, legally responsible decision maker, or designated representative.

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

<b>Service Name/Definition</b>				
Private Duty Nursing Services				
Service Definition: Nursing services may include, but are not limited to, tasks such as monitoring and evaluation, occasional blood draws, wound care, training of informal caregivers and other treatments consistent with physician orders.				
Rationale (Explain why activities cannot be funded under an existing service definition.)				
This service does not duplicate skilled nursing services and falls outside of current ACLS Bureau service standards.				
Service Category	Fund Source			Unit of Service
<input type="checkbox"/> Access <input checked="" type="checkbox"/> In-Home <input type="checkbox"/> Community	<input checked="" type="checkbox"/> Title III PartB <input type="checkbox"/> Title VII <input checked="" type="checkbox"/> State In-home <input type="checkbox"/> Other _____	<input type="checkbox"/> Title III PartD <input checked="" type="checkbox"/> State Alternative Care <input type="checkbox"/> State Respite	<input type="checkbox"/> Title III PartE <input type="checkbox"/> State Access	One hour spent performing allowable nursing serv.

**Minimum Standards**

Minimum Standards:

1. Nursing services must be provided by a registered nurse (RN) or a licensed practical nurse (LPN) under the supervision of an RN. All nurses must meet licensure requirements and maintain a current State of Michigan nursing license.
2. Service providers are expected to maintain close communication with the participant's health care professional and the AAANM supports coordinator in order to assure the nursing needs of the participant are being met and that changes in condition are being reported.
3. Nursing services shall not duplicate any skilled nursing services available through other payers (i.e., Medicare, Medicaid, etc.).

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

**Access Services**

Access services may be provided to older adults directly by the area agency without a Direct Service Provision Request. Approved access services are Care Management, Case Coordination and Support, Options Counseling, Disaster Advocacy and Outreach Programs, Information and Assistance, Outreach, and Merit Award Trust Fund (MATF)/State-Caregiver-Support-Program-funded Transportation with specific attention to outreach with underserved populations. If the area agency is planning to provide any access services directly during FY 2023-2025, complete this section.

Select from the list of all access services the ones the area agency plans to provide directly during FY 2023-2025, and provide the information requested. Specify, in the appropriate text box for each service category, the planned goals and activities that will be undertaken to provide the service.

Direct service budget details for FY 2023 are to be included under the appropriate tab in the Area Plan Grant Budget. The funding identified in this tab should correspond to the funding (Federal OAA Title III or VII and State funds) identified in the Area Plan Grant Budget, Direct Service Budget details.

**Care Management**

<u>Starting Date</u>	10/01/2022	<u>Ending Date</u>	09/30/2023
Total of Federal Dollars	\$219,604.00	Total of State Dollars	\$416,125.00

Geographic area to be served  
Region 10

**Specify the planned goals and activities that will be undertaken to provide the service.**

*Goal 1: Provide supports coordination and home and community-based services to adults over the age of 60 who are at high risk of institutionalization.*

*Activities:*

- 1.1. Maintain strong partnerships with county aging units in order to provide a continuum of care as well as effective pairing of ACLS Bureau and millage funded service monies.*
- 2. Outreach to and actively participate in community collaboratives that include American Indian tribes and organizations that serve minorities, low income, and vulnerable older adults.*

*Goal 2: Operate under a robust quality management plan, overseen by the Quality Assurance & Compliance committee.*

*Activities:*

- 1.1. Maintain NCQA accreditation through continued commitment to quality and excellence.*
- 2. Program and service monitoring includes chart reviews, peer reviews, participant satisfaction surveys, staff training and monitoring of quality indicators such as hospitalizations and re-institutionalization rates and social isolation.*
- 3. Support a Consumer Quality Collaborative that provides feedback and has input into program operations*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

**Area Agency On Aging of Northwest MI, Inc.**

**FY 2023**

*and initiatives.*

Number of client pre-screenings:	Current Year:	500	Planned Next Year:	500
Number of initial client assessments:	Current Year:	150	Planned Next Year:	150
Number of initial client care plans:	Current Year:	140	Planned Next Year:	140
Total number of clients (carry over plus new):	Current Year:	400	Planned Next Year:	400
Staff to client ratio (Active and maintenance per Full time care	Current Year:	1:46	Planned Next Year:	1:46

**Case Coordination and Support**

<u>Starting Date</u>	10/01/2022	<u>Ending Date</u>	09/30/2023
Total of Federal Dollars	\$0.00	Total of State Dollars	\$65,000.00

Geographic area to be served  
Region 10

**Specify the planned goals and activities that will be undertaken to provide the service.**

*Goal 1: Implement Case Coordination and Support (CCS) as part of a multi-step effort to tier care management services provided by AAANM to serve more people at the most appropriate level of care.*

*Activities:*

- 1.1. Transition existing Care Management clients who are more appropriate for care under CCS*
- 2. Open individuals on the Care Management wait list to CCS if more appropriate for CCS level of care*
- 3. Monitor and adjust as needed*

**Disaster Advocacy & Outreach**

<u>Starting Date</u>	10/01/2022	<u>Ending Date</u>	09/30/2023
Total of Federal Dollars	\$1.00	Total of State Dollars	\$0.00

Geographic area to be served  
Region 10

**Specify the planned goals and activities that will be undertaken to provide the service.**

*Goal 1: To maintain the Disaster Advocacy and Outreach service definition in anticipation of a natural disaster or other type of emergency as part of AAANM's emergency planning processes.*

*Activities:*

- 1. Identify an emergency should one be present*
- 2. Activate the definition and identify emergency response activities that fall within the service definition*
- 3. Respond to the emergency*
- 4. Shift funding as needed from other service definitions*

**Information and Assistance**

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

**Area Agency On Aging of Northwest MI, Inc.**

**FY 2023**

<u>Starting Date</u>	10/01/2022	<u>Ending Date</u>	09/30/2023
Total of Federal Dollars	\$97,953.00	Total of State Dollars	\$0.00

Geographic area to be served  
Region 10

**Specify the planned goals and activities that will be undertaken to provide the service.**

*Goal 1: Provide high quality Information and Assistance to support older adults, family members, caregivers and healthcare or social service professionals seeking information about community resources for older adults, caregivers, and persons with disabilities.*

*Activities:*

- 1.1. Ensure that staff receive on-going information and education about community resources and aging issues.*
- 2. Outreach to referral sources and the community through brochures, marketing, social media, public speaking, and expos to communicate that Information and Assistance for older adults is available through AAANM.*
- 3. Continue to serve as the "local contact agency" for those in nursing homes who are interested in exploring other options for long-term care.*

**Options Counseling**

<u>Starting Date</u>	10/01/2022	<u>Ending Date</u>	09/30/2023
Total of Federal Dollars	\$97,954.00	Total of State Dollars	\$28,408.00

Geographic area to be served  
Region 10

**Specify the planned goals and activities that will be undertaken to provide the service.**

*Goal 1: Provide unbiased, person-centered options counseling to older adults and caregivers who need assistance understanding and planning for their long-term care options.*

*Activities:*

- 1.1. Ensure that staff receive on-going information and education about community resources and aging issues.*
- 2. Outreach to referral sources and the community through brochures, marketing, social media, public speaking, and expos to communicate that Options Counseling is available through AAANM.*

*Goal 2: Maintain strong referral relationships with county aging units, nursing facilities, Program of All-Inclusive Care for the Elderly (PACE) and other long-term care options in Region 10.*

*Activities:*

- 1.1. Regularly share information and updates between AAANM and other long-term care providers and entities in the region.*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

**Direct Service Request**

It is expected that in-home, community, and nutrition services will be provided under contracts with community-based service providers. However, when appropriate, area agencies may ask to provide these services directly. Direct Service Provision Requests must be approved by the Commission on Services to the Aging (CSA). Direct service provision by the area agency may be appropriate when, in the judgment of the ACLS Bureau: A) provision is necessary to ensure an adequate supply; B) the service is directly related to the area agency's administrative functions; or C) a service can be provided by the area agency more economically than any available contractor and with comparable quality. Area agencies requesting approval to provide an in-home, community, and/or a nutrition service must complete the section below for each service category.

Select the service from the list and enter the information requested pertaining to basis, justification, and public hearing discussion for any Direct Service Provision Request for FY 2023-2025. Specify in the appropriate text box for each service category the planned goals and activities that will be undertaken to provide the service.

Direct service budget details for FY 2023 are to be included under the Services Summary tab and Direct Service Budget tabs in the Area Plan Grant Budget. The funding identified should correspond to the funding (Federal OAA Title III or VII and state funds) identified in the Area Plan Grant Budget.

Skip this section if the area agency is not planning on providing any in-home, community, or nutrition services directly during FY 2023.

**Disease Prevention/Health Promotion**

Total of Federal Dollars     \$10,000.00

Total of State Dollars     \$0.00

Geographic Area Served     Region 10

**Planned goals, objectives, and activities that will be undertaken to provide the service in the appropriate text box for each service category.**

*Goal 1: Support opportunities for older adults and caregivers from Region 10 to participate in approved Disease Prevention/Health Promotion virtual programs including A Matter of Balance, Aging Mastery Program, Cancer: Thriving and Surviving, Chronic Disease/Chronic Pain/Diabetes Self-Management Program (PATH), Enhance Fitness, Powerful Tools for Caregivers, Tai Chi for Arthritis, Walk with Ease, and Creating Confident Caregivers.*

**Activities:**

- 1.1. Participate in monthly Statewide AAA Evidence Based Programs (EBPs) Collaborative meetings to stay current on statewide planning activities.*
- 2. Promote virtual programs offered by EBP Collaborative partners via AAANM website, Facebook, regular communications with aging network and community partners.*
- 3. Reimburse EBP Collaborative Partners that host workshops that participants from Region 10 attend*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

*through purchase of service agreements.*

*4. RFP and contract out Title III-D funding for in-person EBPs.*

**Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by an Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions described below. Please select the basis for the direct service provision request (more than one may be selected).**

**(A) Provision of such services by the Area Agency is necessary to assure an adequate supply of such services.**

**(B) Such services are directly related to the Area Agency's administrative functions.**

**(C) Such services can be provided more economically and with comparable quality by the Area Agency.**

*(A) Provision of such services by the Area Agency is necessary to assure an adequate supply of such services.*

*(B) Such services are directly related to the Area Agency's administrative functions.*

*(C) Such services can be provided more economically and with comparable quality by the Area Agency.*

**Provide a detailed justification for the direct service provision request. The justification should address pertinent factors that may include: a cost analysis; needs assessment; a description of the area agency's efforts to secure services from an available provider of such services; or a description of the area agency's efforts to develop additional capacity among existing providers of such services. If the service is considered part of administrative activity, describe the rationale and authority for such a determination.**

*EBPs: For many years AAANM has provided evidence-based programs allowed under Title III-D (PATH, Creating Confident Caregivers, A Matter of Balance) in Region 10 as a direct service (scheduling/promoting workshops, maintaining trainer certifications by utilizing a pool of leaders to conduct workshops, registering participants, and reporting). Prior to the pandemic, AAANM was re-evaluating its use of Title III-D funding (planning to focus on the Care Transitions Intervention to reduce unnecessary re-hospitalizations) and potentially focus on workshops specific to supporting informal caregivers. As a result of the pandemic, in-person programs were shifted to virtual offerings and the Statewide AAA EBP Collaborative was formed, resulting in a statewide coordinated calendar of classes that could be filled more efficiently and more widely across Michigan. This expanded the program offerings available to Region 10 older adults and caregivers, allowed more efficient use of staff time, and helped fill workshops for other AAAs (resulting in less cancelled workshops). AAANM feels it's important to continue participation in the statewide coordinated efforts, focusing staff time on promoting workshops, and purchasing services on behalf of Region 10 participants that attend workshops offered by other AAAs. In-person workshops are still valuable. AAANM will seek to offer workshops through contracting and purchase of service arrangements. AAANM will provide coordination and marketing support for both online and in-person EBPs offered in Region 10.*

**Describe the discussion, if any, at the public hearings related to this request. Include the date of the hearing(s).**

*EBPs: There was discussion regarding the importance of in-person caregiver training at the Kalkaska 2022 public hearing. AAANM will be reviewing opportunities for providing caregiver education, training, and*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

*support during the MYP period and hopes to expand in-person offerings in Region 10 to fill this need.*

**Long Term Care Ombudsman**

Total of Federal Dollars      \$2,148,800.00                      Total of State Dollars      \$3,269,100.00

Geographic Area Served      Region 10

**Planned goals, objectives, and activities that will be undertaken to provide the service in the appropriate text box for each service category.**

*Goal 1: Provide assistance and advocacy to residents of licensed long-term care facilities to resolve complaints through problem identification and definition, education regarding rights, provision of information on appropriate rules, and referrals to appropriate community resources.*

*Activities:*

- 1.1. Visit each nursing facility at least quarterly to distribute Long Term Care Ombudsman information and reinforce residents' understanding of their rights through one-on-one visits.*
- 2. Provide program presentations and regularly attend resident and family council meetings, as applicable.*
- 3. Distribute program materials to residents, family members, and other interested parties.*

*Goal 2: Outreach to the community and referral sources on the Long Term Care Ombudsman Program as well as to provide information and assistance about long-term care aspects and options.*

*Activities:*

- 1.1. Actively participate in community collaboratives as a way to educate referral sources on the Long Term Care Ombudsman role and program.*
- 2. Distribute program information via print and electronic media (AAANM website) as well as in person participation at community expos and events.*

*Goal 3: Begin to build a Long-Term Care Ombudsman program in Region 10 comprised of a volunteer base.*

*Activities:*

- 1. Create implementation plans with timelines for creation of a Long Term Care Ombudsman volunteer program.*
- 2. Recruit and retain active volunteers.*
- 3. Oversee and ensure training of Long Term Care Ombudsman volunteers.*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

**Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by an Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions described below. Please select the basis for the direct service provision request (more than one may be selected).**

**(A) Provision of such services by the Area Agency is necessary to assure an adequate supply of such services.**

**(B) Such services are directly related to the Area Agency's administrative functions.**

**(C) Such services can be provided more economically and with comparable quality by the Area Agency.**

*(A) Provision of such services by the Area Agency is necessary to assure an adequate supply of such services.*

*(B) Such services are directly related to the Area Agency's administrative functions.*

*(C) Such services can be provided more economically and with comparable quality by the Area Agency.*

**Provide a detailed justification for the direct service provision request. The justification should address pertinent factors that may include: a cost analysis; needs assessment; a description of the area agency's efforts to secure services from an available provider of such services; or a description of the area agency's efforts to develop additional capacity among existing providers of such services. If the service is considered part of administrative activity, describe the rationale and authority for such a determination.**

*AAANM issued an RFP in March 2019 for an entity to provide Long Term Care Ombudsman services. There were no applicants proposing to offer this service in Region 10.*

*Since 2010, AAANM has provided Long Term Care Ombudsman services directly after Citizens for Better Care withdrew from providing this service in our region. AAANM employs one Long Term Care Ombudsman whose time is solely devoted to provision of Long Term Care Ombudsman and Elder Abuse Prevention Services in Region 10.*

*AAANM has successfully demonstrated the organizational capacity to support the current established Long Term Care Ombudsman services extensively with its resources. Current funding for the Long Term Care Ombudsman Program is insufficient to maintain the level of presence that is needed for our 10-county region. AAANM subsidizes this program by providing additional funding through Title III-B funds as well as in-kind support in terms of office space, phones, computers, and administrative back-up.*

*The costs, time, and criteria necessary for a new contractor to establish itself as the Long Term Care Ombudsman in Region 10 alone would be an obstacle for a new entity. According to the Michigan Long Term Care Ombudsman policies, an entity would need to have staff certified by the State Long Term Care Ombudsman (SLTCO) following successful completion of the certification training and examination requirements, within 6 months of hire. The transition of services to the new entity would most likely need support from AAANM minimally for the first several months of the fiscal year, which would drain resources from both entities. New relationships would need to be established with the long-term care facilities, awareness for referral purposes would need to be created with current community services agencies, reporting systems and data tracking would be a learning curve, and these foundation building activities*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

*would draw away from time that could be spent performing the Long Term Care Ombudsman responsibilities. AAANM has successfully and efficiently provided a quality Long Term Care Ombudsman program for many years. Prior to that, AAANM supported the Citizens for Better Care Long Term Care Ombudsman staff person on-site with resources.*

*Transitioning such a well-established program at this point does not seem to be an effective use of resources or time, could result in public confusion, and instead could create a lapse in service for long-term care residents or a diminished presence as compared to what already exists through AAANM.*

**Describe the discussion, if any, at the public hearings related to this request. Include the date of the hearing(s).**

*There was no discussion of this request at the 2022 public hearings.*

**Prevention of Elder Abuse, Neglect and Exploitation**

Total of Federal Dollars      \$6,478.00                      Total of State Dollars      \$0.00

Geographic Area Served      Region 10

**Planned goals, objectives, and activities that will be undertaken to provide the service in the appropriate text box for each service category.**

*AAANM combines Elder Abuse Funding with the funding for the Long-Term Care Ombudsman.*

*Goal 1: Increase education and awareness of elder abuse, neglect, and exploitation in long-term care facilities and the community.*

**Activities:**

- 1.1. Provide elder abuse, neglect, and exploitation presentations in long-term care facilities, senior centers, and other venues in the community/Region 10.*
- 2. Be an active participant in community collaboratives that are working to address elder abuse in our region such as the Michigan Vulnerable Populations work group.*
- 3. Provide education to increase awareness that Elder Abuse is an under recognized problem (identify who is at risk, potential warning signs how to report) by distributing information via print and electronic media (AAANM website) as well as in person participation at community expos and events.*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by an Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions described below. Please select the basis for the direct service provision request (more than one may be selected).

(A) Provision of such services by the Area Agency is necessary to assure an adequate supply of such services.

(B) Such services are directly related to the Area Agency's administrative functions.

(C) Such services can be provided more economically and with comparable quality by the Area Agency.

*(A) Provision of such services by the Area Agency is necessary to assure an adequate supply of such services.*

*(C) Such services can be provided more economically and with comparable quality by the Area Agency.*

Provide a detailed justification for the direct service provision request. The justification should address pertinent factors that may include: a cost analysis; needs assessment; a description of the area agency's efforts to secure services from an available provider of such services; or a description of the area agency's efforts to develop additional capacity among existing providers of such services. If the service is considered part of administrative activity, describe the rationale and authority for such a determination.

*AAANM has paired this very limited funding with the Long Term Care Ombudsman funding to maximize these resources throughout Region 10, as well as nearly doubling the funding for the program with supplemental resources (Title III-B and in-kind). This ensures that education and outreach on Elder Abuse is provided throughout our 10-county region as part of the outreach that is being conducted by the LTCO.*

Describe the discussion, if any, at the public hearings related to this request. Include the date of the hearing(s).

*There was no discussion of this request at the 2022 public hearings.*

### Caregiver Education, Support and Training

Total of Federal Dollars     \$1.00                      Total of State Dollars     \$0.00

Geographic Area Served     Region 10

Planned goals, objectives, and activities that will be undertaken to provide the service in the appropriate text box for each service category.

*Goal 1: Offer Caregiver Support, Training and Education for informal caregivers.*

#### Activities:

- 1.1. Evaluate historical engagement of caregiver support opportunities.*
- 2. Develop a marketing strategy to promote engagement in training and education opportunities.*
- 3. Implement a comprehensive approach to support informal caregivers through online tools (Active Daily Living and Trualta) and resources as well as collaborative partnerships.*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

4. *Track and report outcomes.*

**Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by an Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions described below. Please select the basis for the direct service provision request (more than one may be selected).**

**(A) Provision of such services by the Area Agency is necessary to assure an adequate supply of such services.**

**(B) Such services are directly related to the Area Agency's administrative functions.**

**(C) Such services can be provided more economically and with comparable quality by the Area Agency.**

*(A) Provision of such services by the Area Agency is necessary to assure an adequate supply of such services.*

*(C) Such services can be provided more economically and with comparable quality by the Area Agency.*

**Provide a detailed justification for the direct service provision request. The justification should address pertinent factors that may include: a cost analysis; needs assessment; a description of the area agency's efforts to secure services from an available provider of such services; or a description of the area agency's efforts to develop additional capacity among existing providers of such services. If the service is considered part of administrative activity, describe the rationale and authority for such a determination.**

*According to research and the community needs assessment, caregivers report their physical and emotional health is worse than non-caregivers. Typically, only one in five caregivers have been trained. Family caregivers are more technologically savvy than the general population, 84% of caregivers with Internet access use the Internet to research health topics compared to 64% of non-caregivers with Internet access (Family Caregiver Alliance). Providing informal caregivers support will increase their confidence in the care they provide, help their loved one continue to receive optimal care, reduce burn out and stress caregivers experience, helping to extend the length of time they commit to being a caregiver.*

*AAANM currently partners with AAAs across Michigan to promote, provide, and engage caregivers in onsite and web-based training and education opportunities. Additionally, AAANM holds a contract with Active Daily Living (ADL) through April 2023. ADL supports older adults and caregivers by providing free, personalized advice to enhance health, independence, and aging-in-place.*

*AAANM would like to offer informal caregivers a deeper level of support using Trualta, a premier partner of USAgging. Trualta is uniquely different from other support being offered by AAANM. The program uses a web-based training platform built for family and self-directed caregivers. Trualta originates from professional-level training adapted for the untrained audience with skills-based content across critical care competencies. Trualta is available on-demand, offers personalized educational intervention with social features that can be accessed 24/7 from any device: the intervention can be caregiver-led, or driven by case management. Programming incorporates behavior change theory methods into audio, video, and eLearning modules with PDFs available for print/download. Bite-sized modules that roll up into in-depth courses allow for continuous engagement and advanced learning. Trualta content is ADA compliant and*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

*follows health literacy, diversity, and inclusion guidelines.*

**Describe the discussion, if any, at the public hearings related to this request. Include the date of the hearing(s).**

*The Kalkaska Public Hearing on 4/11/22 discussed the need for caregiver education, with particular emphasis on in-person trainings.*

**Nutrition Counselling**

Total of Federal Dollars      \$1.00                      Total of State Dollars      \$0.00

Geographic Area Served      Region 10

**Planned goals, objectives, and activities that will be undertaken to provide the service in the appropriate text box for each service category.**

*Goal 1: Develop and implement a self-sustaining Nutrition Counseling program.*

*Activities:*

- 1.1. Evaluate community needs and research best practices of effective nutrition counseling programs.*
- 2. Develop and pilot a nutrition screening process for current Care Management and Senior Nutrition Program participants.*
- 3. Plan to implement a Nutrition Counseling program in the MYP 2023-2025 cycle.*

**Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by an Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions described below. Please select the basis for the direct service provision request (more than one may be selected).**

**(A) Provision of such services by the Area Agency is necessary to assure an adequate supply of such services.**

**(B) Such services are directly related to the Area Agency's administrative functions.**

**(C) Such services can be provided more economically and with comparable quality by the Area Agency.**

*(A) Provision of such services by the Area Agency is necessary to assure an adequate supply of such services.*

*(C) Such services can be provided more economically and with comparable quality by the Area Agency.*

**Provide a detailed justification for the direct service provision request. The justification should address pertinent factors that may include: a cost analysis; needs assessment; a description of the area agency's efforts to secure services from an available provider of such services; or a description of the area agency's efforts to develop additional capacity among existing providers of such services. If the service is considered part of administrative activity, describe the rationale and authority for such a determination.**

*Older adults rarely access insurance benefits that support their nutritional health. Insurance coverage for*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

*medical nutrition therapy allows a very limited number of visits per year or per lifetime, if offered as a benefit. AAAs have a unique opportunity to provide nutrition counseling to older adults in the community, including Care Management and Senior Nutrition Program participants. The program will give participants the choice of where to have the visit, at home, the AAANM office or virtually. Having the option for a home visit with a Registered Dietitian fills a service gap for those that are homebound or lack transportation. Especially, since medical nutrition therapy is not typically provided in the home setting. AAANM does not currently have Providers that offer medical nutrition therapy but will explore this opportunity further as part of the needs assessment process. We will also consider leveraging the AAANM Registered Dietitian or a subcontractor to provide this service. AAANM will explore billing insurance for medical nutrition therapy services but will likely rely on ACLS Bureau funding for the majority of financial support to operate the program due to limited coverage and fractional reimbursement rates.*

*When income is limited, individuals often must prioritize their care needs. This forces individuals to prioritize medication and other treatments over their nutritional health. A nutrition counseling program provides a holistic approach for managing chronic conditions and removes financial barriers. The nutrition counseling program will center on helping participants understand how to use nutrition as one component of managing their chronic condition(s). Appropriate and timely nutrition support will have a positive impact on slowing disease progression, reducing negative health consequences such as high blood pressure, diabetes, pressure sores, and malnutrition. The program will support quality of life, reduce hospital readmissions, and increase access to nutrition interventions to promote overall health and well-being.*

*AAANM will use a thoughtful approach to program development. A needs assessment will be conducted and research and incorporation of evidenced-based best practices will be used. AAANM will develop protocols that outline the screening process, how to make referrals to the Registered Dietitian, privacy, documentation, data collection, funding, and billing.*

**Describe the discussion, if any, at the public hearings related to this request. Include the date of the hearing(s).**

*There was no discussion of this request at the 2022 public hearings.*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

**Regional Direct Service Request**

It is expected that regionally defined services will be provided under contracts with community-based service providers, but when appropriate, a provision to provide such regional services directly by the area agency may be approved by the CSA. Regional direct-service provision by the area agency may be appropriate when, in the judgment of the ACLS Bureau: A) provision is necessary to ensure an adequate supply; B) the service is directly related to the area agency's administrative functions; or C) a service can be provided by the area agency more economically than any available contractor, and with comparable quality.

Area agencies requesting permission to provide a regional service directly must complete this tab for each service category. Enter the regional service name in the box and click "Add." The regional service name will appear in the dialog box on the left after a screen refresh. Select the link for the newly added regional service and enter the requested information pertaining to basis, justification and public hearing discussion for any regional direct service request for FY 2023-2025. Also specify in the appropriate text box for each service category the planned goals and activities that will be undertaken to provide the service. Since regional service definitions expire with the end of each multi-year plan period, please include any previously approved regional services the agency expects to continue providing directly, including COVID-19 policy-waiver-approved services. Address any discussion at the public hearing related to each regional direct service provision request.

Regional Direct Service Budget details for FY 2023-2025 are to be included under the Direct Service Budget tab and the Support Services Detail tab in the Area Plan Grant Budget. The funding identified in this tab should correspond to the funding (Federal OAA Title III or VII and State funds) identified in the Area Plan Grant Budget.

Please skip this section if the area agency is not planning on providing any regional services directly as of now.

**Gap filling**

Total of Federal Dollars     \$1.00

Total of State Dollars     \$0.00

Geographic Area Served     R10

**Planned goals and activities that will be undertaken to provide the service in the appropriate text box for each service category.**

*Goal 1: Assist with gap filling needs as identified*

*Activities:*

- 1.1. Follow consistent policies/procedures for reviewing/approving requests*
- 2. Track requests for reporting purposes*
- 3. Report expenditures and units of service and clients*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

Section 307(a)(8) of the Older Americans Act provides that services will not be provided directly by an Area Agency on Aging unless, in the judgment of the State agency, it is necessary due to one or more of the three provisions described below. Please select the basis for the direct service provision request (more than one may be selected).

(A) Provision of such services by the Area Agency is necessary to assure an adequate supply of such services.

(B) Such services are directly related to the Area Agency's administrative functions.

(C) Such services can be provided more economically and with comparable quality by the Area Agency.

*(A) Provision of such services by the Area Agency is necessary to assure an adequate supply of such services.*

*(C) Such services can be provided more economically and with comparable quality by the Area Agency.*

**Provide a detailed justification for the direct service provision request. The justification should address pertinent factors that may include: a cost analysis; needs assessment; a description of the area agency's efforts to secure services from an available provider of such services; or a description of the area agency's efforts to develop additional capacity among existing providers of such services. If the service is considered part of administrative activity, describe the rationale and authority for such a determination.**

*AAANM serves as a regional planning entity and is part of many community collaboratives to stay abreast of and advocate for older adults and caregiver needs/gaps in services and supports. AAANM has leveraged relationships with other complimentary organizations that support needs of older adults, including those serving populations to whom services should be targeted. Through these relationships, it is anticipated that these types of community needs will most frequently be identified. It is also through these relationships that resources can be coupled to stretch state/federal funding and AAANM resources to support solutions to needs identified.*

**Describe the discussion, if any, at the public hearings related to this request. Include the date of the hearing(s).**

*There was no discussion of this request at the 2022 public hearings.*

Area Agency On Aging of Northwest MI, Inc.

FY 2023

**Program Development Objectives**

Please provide information for all program development goals and objectives that will be actively addressed for this multi-year period, including the diversity, equity and inclusion goal outlined here.

**Diversity, Equity, and Inclusion Goal**

**Aging and Community Living Services Bureau (ACLS) *Operating Standards for Area Agencies on Aging* have long required that preference be given to serving older persons in greatest social or economic need with particular attention to low-income minority elderly. Please refer to *Operating Standards for Area Agencies on Aging sections C-2 and C-4*.**

**With increased awareness of the effects of racial and ethnic disparities on the health, well-being, and lifespans of individuals, the State Plan on Aging for FY 2023-2025 has implemented goals that relate to identifying and increasing services to black, indigenous and people of color as well as LGBTQ+ adults over age 60.**

**Please assess and summarize how well the area agency is currently addressing accessibility of services for the groups listed above and complete the objective(s), strategies and activities that are indicated for quality improvement in this area. Include planned efforts to:**

- 1. Increase services provided to black, indigenous and people of color and the (LGBTQ+) communities.**
- 2. Increase the number of area agency staff, providers and caregivers trained in implicit bias, cultural competencies, and root causes of racism.**
- 3. Increase availability of linguistic translation services and communications based on the cultural needs in the region in which you serve.**

**Goal: Improve the Accessibility of Services to Michigan’s Communities and People of Color, Immigrants and LGBTQ+ Individuals.**

**The area agency must enter each program development goal in the appropriate text box. It is acceptable, though not required, that some of the area agency’s program development goals correspond to the ACLS Bureau’s State Plan Goals (listed in the Documents Library). There is an entry box to identify which, if any, State Plan Goals correlate with the entered goal.**

**A narrative for each program development goal should be entered in the appropriate text box. Enter objectives related to each program development goal in the appropriate text box. There are also text boxes for the timeline, planned activities and expected outcomes for each objective. Additional instructions on completing the Program Development section can be found in the Documents Library.**

**Area Agency on Aging Goal**

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

**A. Identification of on-going community needs**

State Goal Match: 4

Narrative

*Continue to identify on-going community needs resulting from COVID-19 that AAANM may help address.*

Objectives

1. To meet (where possible) needs of those 60+ and caregivers impacted by the pandemic.  
Timeline: 10/01/2022 to 09/30/2025

Activities

1. *Continue to monitor impacts of COVID-19 on 60+ population*
2. *Implement Goal 2 to support older adults and caregivers seeking Information and Assistance / Options Counseling or in-home services.*
3. *Implement Goal 3 to address direct care worker shortage and caregiver support.*

Expected Outcome

*The needs, where possible, of older adults impacted by the pandemic will be met.*

**B. Maximize funding streams and reduce waitlists**

State Goal Match: 4

Narrative

*Continue to evaluate and implement programming to maximize ACLS Bureau and other funding streams for greatest community benefit and reduce wait times/wait lists.*

Objectives

1. 1. Reduce the cycle time from when someone calls until enrolled in a care management program 2. Reduce wait lists for care management programs 3. Develop plan for use of Title III-D funding that maximizes impact for older adults and caregivers. 4. Evaluate Expansion of nutrition services to support the health and well-being of older adults and caregivers.  
Timeline: 10/01/2022 to 09/30/2025

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

Activities

1. *Restructure Access and Eligibility (Information & Assistance / Intake functions) to reduce call wait time and improve more timely access to services.*
2. *Continue to implement “tiered” care management service levels to reduce wait lists and provide levels of care to meet people where they are.*
3. *Expand the types of Evidence-Based Programs (EBPs) available in NWMI by participating in statewide EBP collaboratives.*
4. *Continue to evaluate use of Title III-D funding including potential implementation of the Evidence-Based Care Transitions Intervention program to reduce unplanned facility transitions among AAANM care management and MI Choice Waiver participants.*
5. *Implement Nutrition Counseling as a direct service*

Expected Outcome

*ACLS Bureau and other funding sources will be maximized for greatest needs and services at AAANM.*

**C. Support paid and unpaid caregivers**

State Goal Match: 3

Narrative

*Maintain and strengthen regional capacity to support paid and unpaid caregivers of older adults and persons with disabilities.*

Objectives

1. Objectives: 1. Promote self-determination as an option 2. Make it as easy as possible for providers to do business with AAANM 3. Support caregivers with a focus on caregivers of persons with dementia  
Timeline: 10/01/2022 to 09/30/2025

Activities

1. *Continue to promote Self-Determination to help alleviate workforce shortage to provide in-home care.*
2. *Evaluate internal business practices to make it as easy as possible for provider agencies to work with AAANM and thereby staff cases.*
3. *Continue to support the work of the Impart Alliance as requested (ongoing).*
4. *Evaluate programming options like Trualta for unpaid caregiver support.*
5. *Continue to ensure AAANM staff are certified to support caregivers of persons with dementia, particularly those caregivers needing support with difficult behaviors.*
6. *Continue to offer dementia options counseling for caregivers of persons with dementia.*

Expected Outcome

1. AAANM will address the paid caregiver shortage to the best of its ability.
2. Unpaid caregivers interacting with AAANM will feel supported.

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

**D. Improve the Accessibility of Services to Michigan's Communities and People of Color, Immigrants and LGBTQ+ individuals.**

State Goal Match: 4

Narrative

*Improve the Accessibility of Services to Michigan's Communities and People of Color, Immigrants and LGBTQ+ individuals.*

Objectives

1. 1. Increase services provided to black, indigenous and people of color and the (LGBTQ+) communities. 2. Increase the number of area agency staff, providers and caregivers trained in implicit bias, cultural competencies, and root causes of racism. 3. Increase availability of linguistic translation services and communications based on the cultural needs in the region in which you serve.

Timeline: 10/01/2022 to 09/30/2025

Activities

1. AAANM is working to determine the baseline of BIPOC and LGBTQ+ people currently served
2. AAANM is partnering with the local Pride organization(s) to develop outreach strategies to this population. With the addition of gender preference NAPIS questions, Region 10 will be able to establish a baseline of how we may already be serving this population.
3. AAA staff and subcontractors are trained in diversity, equity and inclusion.
4. All AAANM employees have completed implicit bias and cultural diversity training annually.
5. In addition to Spanish speaking staff, AAANM utilizes a translation service to meet the linguistic needs of those in Region 10. The primary second language spoken in Region 10 is Spanish. Continue to use these resources.

Expected Outcome

*Those of BIPOC race/ethnicity and LGBTQ+ will find AAANM to be an organization that is inclusive of diversity.*

Area Agency On Aging of Northwest MI, Inc.

FY 2023

### Scope of Services

The COVID pandemic has highlighted the importance of the aging service network. People over age 65 comprised 75 percent of COVID deaths in the US, or one in 100 people in that age group by the end of 2021. Fear of contracting the virus has caused long-term social isolation, resulting in serious physical and emotional health effects. The growing availability of supports delivered remotely has been of great assistance. Maintaining adequate services for those who are homebound and their caregivers will continue to be essential. Burdens on family caregivers have increased due to the closure of some in-person services because of the pandemic as well as because of the direct care worker shortage.

Most people with dementia live at home, supported by family and friends. Evidence-based interventions are effective methods for supporting both the person living with dementia and their caregivers. Aging service providers can provide services and support to maintain independence with referrals to healthcare professionals as appropriate.

Though we have long known that racial and ethnic minorities, the LGBTQ+ community and other disadvantaged groups have higher rates of disease and early death, the factors that lead to discrimination have not been fully explored. Growing determination to address diversity, equity and inclusion are leading us to look holistically at discrimination concerns with an eye toward eliminating disparities and micro-aggressions.

Constantly changing service demand challenges make it essential that the area agency carefully evaluate the potential, priority, targeted, and unmet needs of its service population(s) to form the basis for an effective PSA Scope of Services and Planned Services Array strategy. Provide a response to the following service population evaluation questions to document service population(s) needs as a basis for the area agency's strategy for its regional Scope of Services.

**1. Describe key changes and current demographic trends since the last MYP to provide a picture of the potentially eligible service population using census, elder-economic indexes or other relevant sources of information.**

***Overall population trends***

*This MYP period (FY2023-2025) will be a significant time for aging services. The youngest of the Baby Boomer population will turn 60 in FY2025. And the oldest of the Baby Boomer population will turn 80 in FY2026. The Baby Boomer bubble has squarely landed upon the aging services network. AAANM knows from internal data that there is an increased need for services (on average) around the age of 75. This MYP will see the growth in the 70+ population at a previously unprecedented rate.*

*The Environmental Systems Research Institute (ESRI) determined that 315,339 individuals resided in the Region 10 service area in FY2021 and projected that this will increase 2% to 322,647 persons by FY2026. The 60+ population is projected to increase 10% during this period, from 100,585 to 110,832 and from 32% of the total population to 34% of the total population. One in three individuals in the Region 10 service area are 60+ years of age.*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

*The net increase in the 60+ population from FY2022 to FY2025 is expected to be 10,247. While this growth is expected to occur throughout the 10-county region, the greatest growth in the 60+ population is projected within Grand Traverse (+3,727), then Wexford (+972) and Benzie (+748) counties.*

**Workforce Issues Continue to Intensify**

*It is important to note that population forecasts, while there is fluctuation by county and by age cohort, continue to project a regional decline in the <60+ population, particularly the working age population (ages 20-59). For Region 10, the overall decline from FY2021 projected to FY2026 projected is -1% or -2,939 individuals. While this does not sound significant, it compounds an already exacerbated labor force shortage in all industries, and particularly the healthcare and direct care workforce sectors. The aging network is already experiencing a severe crisis with a shortage of direct care workers, and there is a shortage of qualified nurses and social workers with home and community-based experience or with interest in working in this sector. The projected population changes during this period will further challenge the network's ability to provide/sustain home and community-based services in Region 10. Focus groups conducted in preparation for this MYP stressed the direct care workforce crisis as one of the greatest issues facing the older adult population at this time.*

**Poverty and Economic Stability**

*2019 American Community Survey estimates, using a weighted average of seven counties, that 7% of the 60+ population lives at or below 100% of poverty. Using ALICE (Asset Limited, Income Constrained, Employed) data for the 65+ population, 2019 statistics indicate that an additional 37% of the 65+ population lives between poverty and 250% of poverty.*

*ESRI estimates indicate that by FY2026, 30% of households age 55+ in Region 10 will be living at or below \$34,999 annual household income. Households with those 75+ are projected to have the greatest decrease in income (compared to FY2021 projected).*

*Focus groups conducted during this MYP preparation period reinforced the challenges of the cost of living increasing (inflation) and the difficulty older adults are having affording necessities, particularly food, housing, and transportation.*

**Minority Population**

*Based on the 2019 American Community Survey, the Region 10 60+ population is comprised primarily of "white" older adults (98%). Minority populations include those of Native American origins especially in counties where Native American Tribes have sovereignty (1%) and "Hispanic or Latino" origin (1%). In reviewing NAPIS data, AAANM found that of the 6,837 individuals reported as served with aging programs in Region 10 (i.e. care management or meal programs), 2% are non-"White." AAANM's service demographics mirror regional demographics.*

Area Agency On Aging of Northwest MI, Inc.

FY 2023

**Survey and focus group results of the LGBTQI population were informative. Key findings include:**

- 1. There has been improvement over time in prevailing attitudes and behaviors toward LGBTQ+ people in Northwest Lower Michigan. Focus group participants mentioned the HIV/AIDS epidemic of the 80s as being a tragic and yet important time for bringing “gay life” and relationships into view and discussed in the mainstream in a significant way.
2. However, negative attitudes and lack of understanding still persist. And issues of bias and/or lack of understanding are most damaging when individuals are stressed out and in need of help, as is often the case when facing health or aging issues. Being older and LGBTQ+ compounds a fear of being dismissed or cancelled for being slower or having needs.
3. In addition, there is some lingering mistrust of institutions because of historical targeting and discrimination. “There were local laws that meant police could come into our bedrooms at any time” and arrest us.
4. Transgender health and rights represent a particular area of opportunity, as there is significant backlash against trans people right now. Trans people have unique health and mental health issues – different and less understood than issues faced by the general population.
5. Other issues related to aging in Northwest Lower Michigan include concerns about a lack of workforce among caregivers and a concern about lack of transportation. Although these issues are not specific to being LGBTQI, participants felt this would create fewer options in finding caregivers who would be supportive of their needs.

**2. Describe identified eligible service population(s) characteristics in terms of identified needs, conditions, health care coverage, preferences, trends, etc. Include older persons as well as caregivers and persons with disabilities in your discussion. Preferences, Community Conditions and Quality of Life**

*The following characteristics have been compiled from three MYP need assessments (FY2015-FY2025) as well as other community need assessments. Because AAANM is funded through the Older Americans Act, we consider anyone over the age of 60 or a caregiver to be eligible for services, particular Information & Assistance and Options Counseling. Other programs may have specific enrollment or targeting criteria applied.*

*The 60+ population encompasses three generations (the Greatest Generation, Silent Generation and Baby Boomers). Each generation has unique values, concerns and preferences for how they want to live. Some observations from community discussions suggest that younger seniors tend to be more tech savvy and seek active lifestyles. This influences how they engage with the community and the strategies they utilize to maintain their health. Older seniors are often reluctant to ask for help. They fear losing their independence and being placed in a nursing facility. They also prefer activities that are more social in nature and less physically intensive.*

**Observations and trends identified:**

- 1.1. A community survey of older adults conducted across Region 10 during the summer of 2018 found distinct concerns by age segment. While most older adults are concerned about maintaining their health, younger seniors are also concerned with having enough money in retirement and obtaining or

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

*understanding benefits like Social Security and Medicare. Older seniors are concerned about memory loss or dementia, falling or the fear of falling, and being able to live independently at home as they grow older.*

*2. Individual rating of health varies in relation to income and living situation (living alone or with a partner/spouse). Those with lower incomes and/or living alone were generally less likely to have healthy lifestyle habits, more likely to have difficulty affording basic needs, and more likely to need assistance with Activities of Daily Living (ADLs) and Independent Activities of Daily Living (iADLs).*

*3. There is increasing awareness of healthy lifestyles and demand for fresh fruits and vegetables, venues for engagement in exercise, social activities, and education for lifelong learning. Maintaining health as long as possible is a priority concern. Barriers to maintaining health include existing health issues, financial resources, and taking care of others.*

*4. Older adults are staying in the workforce longer and are willing to work part-time. Conversely, older adults with expertise and experience in professional careers are retiring and creating a void in the workforce.*

*5. "Loss is an everyday thing" as one ages. Fear of losing independence is a primary concern for older adults and persons with disabilities. Individuals are often unprepared for the life changes that accompany the aging process or living long-term with chronic health conditions and disability. Older adults want to maintain control as long as possible.*

*6. Social isolation is a prevalent issue among older adults that is complicated by rural geography. Many older adults have moved to northwest Michigan to retire and do not have family in the area to support them. Transportation challenges are a contributing factor as well.*

*7. The nature of family structures is changing due to economic and social shifts in our country. Some older adults are finding themselves providing support to adult children with disabilities, grandchildren, or children with spouses and kids who have moved back home due to financial instability.*

*8. Elder abuse and exploitation are an increasing, under-reported issue in the region, including domestic abuse (financial, physical, psychological and sexual), as well as predatory unethical relationships (realtors having themselves declared guardian for older adults with valuable real estate), and financial scamming schemes deliberately targeted at seniors.*

*9. A culture of ageism and viewing seniors as a burden or having limited value influences the quality of life for older adults in our region.*

*10. Electronic communication has become a way of life - to connect with family, to complete applications and do banking, for safety monitoring, and to access telehealth. Landlines for telephone service are less*

**Area Agency On Aging of Northwest MI, Inc.**

**FY 2023**

*prominent. Yet many areas of northwest Michigan do not have consistent cell phone coverage or high-speed broadband. This impacts quality of life for communities in general and for older adults and has become a greater issue over the last few years because of COVID. For example, many services moved to virtual or remote only limiting service provision to those without a way to communicate electronically.*

**Economics**

*Certain counties in northwest Michigan are attractive retirement locations. A proportion of well-off older adults have retired to particular counties in the region, investing in valuable real estate. This dynamic is an important component of the northwest Michigan economy. Many older adults, however, are facing increased financial insecurity - living longer, insufficient savings, increasing contributions to healthcare costs, increasing cost of living, and unexpected costs of long-term care needs. Many older adults live on a fixed income that does not stretch far enough.*

*Observations and trends identified:*

*1. Healthcare, dental and prescription drug costs continue to be a financial challenge for many older adults. Some older adults also struggle to pay for food, housing, and transportation.*

*1. Gaps in affordable programs and services to support older adults to maintain quality of life and live independently were consistently identified for 1) low-to- moderate income disabled individuals under the age of 60/65, and 2) older adults who are above low-income program thresholds yet do not have the financial resources to privately pay for supports and services.*

**Social Determinants of Health**

*It has been established that the Social Determinants of Health can account for up to 50% of our health - quality of life and longevity of life. And yet, residents of northwest Michigan, above and below 60 years of age, struggle to have their basic needs met.*

*Observations and trends identified:*

*1. Affordable housing has become a crisis issue in northwest Michigan, and just as challenging is affordable, accessible housing.*

*2. Workforce and funding for home modifications and home maintenance to support older adults to live in their own homes is an on-going issue in the region.*

*3. Homelessness or near homelessness for older adults, especially with chronic conditions or mental health/behavioral challenges persists for some older adults.*

*4. There is increasing awareness of food insecurity among older adults in northwest Michigan but there has not been a systematic attempt to the issue.*

Area Agency On Aging of Northwest MI, Inc.

FY 2023

5. Multiple studies and workgroups reaffirm that transportation challenges continue in northwest Michigan including non-emergency medical and quality of life (shopping, socialization) transportation needs. Strides have been made in some counties in the last three years to increase availability of transportation. Transportation is a complex issue. Among younger seniors the issue may be the financial costs associated with transportation while among older seniors the issue may be having a transportation option that does not involve driving oneself.

#### **Accessing / Using Healthcare**

There are an increasing number of older adults living with multiple chronic conditions. Analysis of Medicare claims data for Region 10 residents quantifies that chronic diseases include diabetes, arthritis, heart disease and depression are prevalent conditions. Analysis of publicly available hospitalization data also confirms that falls among the older adult population in northwest Michigan is a population health concern. Dementia and other cognitive impairments are increasing conditions where navigation of healthcare and community care resources is particularly challenging, especially when medical, financial, long-term care and advanced care planning has not taken place before the individual becomes incapacitated.

Observations and trends identified:

1. Access to medical care is determined by income, insurance, and geographic location with significant inequities across the region.
2. Medication management and access to/navigation of healthcare providers are cited frequently as challenges for older adults.
3. In northwest Michigan there is a need for more healthcare providers with expertise in geriatric medicine in general, a shortage of neuropsychologists, and a complete lack of geriatric psychiatric specialists.
4. Access to affordable mental health services is a gap.
5. Advances in medical care have created complex ethical issues for older adults, families, and healthcare providers. Older adults and families would benefit from proactive planning while healthy to articulate desired quality of life and end of life wishes.
6. Coordination of care among healthcare providers and with community organizations to support older adults is difficult and contributes to frustration and health complications for older adults.
7. Accessing and understanding healthcare (Medicare and Medicaid) and Social Security benefits can be challenging for seniors. In the community survey conducted in 2018, this was rated within the top three concerns of younger seniors.

#### **Accessing / Using Long-Term Care Services and Supports**

Societally there are many different and conflicting values (and misinformation) about funding long-term care for older adults. Often older adults believe Medicare will cover long-term care costs and are surprised to find there is no coverage for this care. There is often reluctance to spend retirement monies for long-term care (or families refuse to spend the money). Long-term care insurance policies have varied benefits and are not widely used. Availability of in-home support through senior millage varies from county to county and can provide foundational in-home support to meet the early service needs of individuals who are on the verge of

**Area Agency On Aging of Northwest MI, Inc.**

**FY 2023**

*losing their independence. This allows older adults to maintain or even improve health and delay their need to utilize more costly resources; but millage funded services do not meet the needs of individuals with higher acuity requiring additional or more frequent services. Those who need additional services are placed on the ACLS Bureau funded Care Management list and/or are forced to spend down their assets to qualify for long-term care Medicaid (home and community-based services like MI Choice Waiver or nursing facility care) or privately pay for care. This conundrum of mixed systems and funding streams leave many older adults unprepared for their long-term care needs.*

*Observations and trends identified:*

- 1. The rural nature of the region contributes to inconsistent availability of long-term supports and services for older adults. This contributes to situations of compromised health, accelerated decline and decreased quality of life, and use of expensive healthcare resources including emergency room visits and hospitalizations.*
- 2. Older adults, family members and caregivers are often unaware of resources available to support quality of life and living independently long-term. Navigating programs and services was cited as a concern, particularly services that have complicated application or qualification processes.*
- 3. Funding for long-term services and supports and other public programs that support older adults and persons with disabilities requires vigilant advocacy.*

**Caregiving (paid and unpaid)**

*As older adults decline and need more support with activities of daily life, informal caregivers become emotionally and physically overwhelmed with caregiving responsibilities. Caregivers need more education and support. There is also a dire shortage of paid caregivers in the region to provide home- and community-based services. Reasons for this include shrinking workforce overall, low wages, lack of benefits, and difficult, unpredictable work that is not always respected.*

*Observations and trends identified:*

- 1. A thoughtful strategy for increased Medicaid MI Choice Waiver reimbursement rates passed through to direct care wages is necessary to impact the direct care workforce crisis.*
- 2. The critical lack of childcare in the region also contributes to the dire shortage of paid caregivers. Parents are increasingly choosing between staying at home to care for children and working because of the childcare shortage.*
- 3. Caregiver education, for both informal and paid caregivers, has been consistently identified as a valuable support that improves quality of life for older adults and reduces stress and burden for caregivers.*

Area Agency On Aging of Northwest MI, Inc.

FY 2023

**3. Describe the area agency's Targeting Strategy (eligible persons with greatest social and/or economic need with particular attention to low-income minority individuals) for the MYP cycle including planned outreach efforts with underserved populations and indicate how specific targeting expectations are developed for service contracts.**

*AAANM regularly engages with the Department of Health and Human Services, Community Mental Health agencies, the Community Action Agency, county aging units, human service agencies, healthcare providers and Native American tribes to maintain a visible presence in the community and encourage referral to AAANM of individuals with greatest social or economic need and low-income minority populations in the planning and service area. This outreach will continue during the FY2023-2025 MYP cycle. AAANM has staff that routinely identify opportunities to reach underserved populations, either directly or through referral relationships.*

*Service providers awarded ACLS Bureau grant funding by AAANM are required to target those with greatest social or economic need and low-income minority populations. They do this through outreach and coordination as well. As participants seek and receive services from these service providers, the service providers ensure that funding supports those in highest need. Should demand exceed funding for these funded services, service providers have written criteria that allows them to prioritize their services and funding to those in highest need first. In general, service providers should be targeting to the same level of poverty, minority, and frailty (those in the oldest age category and those with the highest health care needs) as identified in the most recent census data.*

**4. Describe the agency's past practices, current activities and plans for addressing the needs of people living with dementia and their caregivers.**

*AAANM has invested significant organizational time to build dementia capability internally and to thoughtfully examine what are the most significant levers for systems change in northwest Michigan to support persons with dementia and their caregivers. Some of this work fits within ACL Bureau definition of a dementia capable service system while other components more strongly relate to an aging friendly health system. The two must work hand in hand if we are to truly impact quality of life for this population.*

*AAANM conducted a population assessment of current persons being served through internal programs and identified nearly 20% of the population being served by AAANM has a formal diagnosis related to cognitive impairments. Further analysis identified nearly 75% of the population opened to a program at AAANM report some sort of cognitive impairment, new or declining, and not formally diagnosed. The data identified opportunities at AAANM to improve upon the resources and ability for staff to meet the needs of this population, and their caregivers, through focused training. All case management staff at AAANM are trained and certified in Dementia Capable Care through Crisis Prevention Institute. Additionally, AAANM has 3 certified instructors on staff to serve as a resource and support for staff to use the tools and skills learned through the program to impact the population served. The intent and purpose of the training is to enhance the knowledge base and skillset of staff in efforts to better serve and work with participants, and their caregivers, who are experiencing cognitive decline, including dementia related cognitive decline.*

*Current processes include the use of ACL's Dementia Capability Assessment Tool in the screening process*

**Area Agency On Aging of Northwest MI, Inc.**

**FY 2023**

*for people reaching out to AAANM inquiring about resources and assistance in the area. AAANM has implemented regular screening and created more standardization in how staff work with this population - information, options counseling, dementia education and coaching on behaviors. AAANM's staff use the AD8 dementia assessment when screening and assessing potential participants. When the AD8 is completed on a person going on the waiting list or a current client, the AD8 is uploaded into their electronic medical record in Compass. AAANM has integrated this work into the organization, so it is standard practice rather than a special project or focus.*

*AAANM plans to expand resources and develop support and tools specific to caregivers who are caring for those with dementia, in a form of Caregiver Options Counseling. If time and resources permit, AAANM will expand these efforts to work with interested service providers in the network to offer foundational dementia trainings and an introduction to how community organizations can partner to increase opportunities for dementia trainings throughout Region 10.*

**5. When a customer desires services not funded under the MYP or available where they live, describe the options the area agency offers.**

*In cases where an individual desires services not funded under the MYP, AAANM's Access and Eligibility Specialists make referrals to other community resources that can meet these needs. Using a person-centered planning approach, Access and Eligibility Specialists may offer Options Counseling to help individuals identify their needs/goals and create a plan that taps a variety of community resources, including private pay options.*

*When no service is available, AAANM advocates for community initiatives that will help address these unmet needs.*

**6. Describe the area agency's priorities for addressing identified unmet needs within the PSA for FY 2023-2025 MYP.**

*AAANM's priorities to address unmet needs within the PSA for the FY2023-2025 MYP include:*

- 1.1. Supporting advocacy efforts to preserve or increase funding for programs that benefit older adults, especially home delivered meals, care coordination and in-home support; and*
- 1.2. Participating in community-based discussions and collaboratives seeking to address needs that impact older adults (i.e., transportation, access, and delivery of health care, improved inter-agency coordination).*

**7. Where program resources are insufficient to meet the demand for services, reference how your service system plans to prioritize clients waiting to receive services, based on social, functional and economic needs.**

*When program resources are insufficient to meet the need for services, particularly Care Management, a wait list is carefully maintained and regularly monitored.*

*Using a person-centered planning process, AAANM refers individuals to services available through millage*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

*funded county aging units or private pay options.*

*Those placed on the wait list have been assessed and prioritized based on frailty (those in the oldest age category and those with the highest health care needs), availability of support systems, income-level, and minority classification.*

**8. Summarize the area agency Advisory Council input or recommendations (if any) on service population priorities, unmet needs priorities and strategies to address service needs.**

*The Advisory Council had one comment agreeing with the identified service population priorities and needs assessment. This was gathered during a public hearing with the Advisory Council present. The Advisory Council voted to recommend the MYP as written to the Board of Directors for approval on May 5, 2022. During that discussion it was noted that the priorities feel on track, and that the MYP is thorough and ambitious.*

**9. Summarize how the area agency utilizes information, education, and prevention to help limit and delay penetration of eligible target populations into the service system and maximize judicious use of available funded resources.**

*AAANM diligently works to prevent or delay the use of publicly funded resources using a variety of strategies:*

- 1.1. Staff receives ongoing information and education about resources, programs and supports in the community that may be accessed.*
- 2. Options Counseling is available to any individual to identify goals and create a plan for long-term care needs including identification of personal supports and private pay options.*
- 3. AAANM works to promote and create awareness about health education offerings provided by other organizations like, Michigan State University Extension and Area Agencies on Aging (AAA) across Michigan. Healthy aging programs like Matter of Balance: Managing Concerns About Falls, Personal Action Toward Health (PATH) and Creating Confident Caregivers (CCC) are offered virtually throughout the region to support healthy lifestyles and delay health complications if possible. AAANM also offers Active Daily Living online resources for older adults and caregivers to provide education and support on a variety of topics.*

**10. Identify the five service categories receiving the most funds and the five service categories with the greatest number of anticipated participants.**

*Of the service array planned, Older Americans and Older Michiganians Act funding is most significant for the following programs:*

- 1.1. Home Delivered Meals*
- 2. Congregate Meals*
- 3. Care Management*
- 4. Respite Care*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

*5. Personal care*

*The following programs serve the greatest number of participants:*

- 1.1. Home Delivered Meals*
- 2. Congregate Meals*
- 3. Information and Assistance and Options Counseling*
- 4. Care Management (including services purchased on behalf of Care Management participants – Respite Care, Personal Care and Homemaking)*
- 5. Legal Assistance*

**11. Describe the area agency's efforts to ensure diversity, equity, and inclusion, including how the agency ensures that staff at their agency and subcontracting agencies is diverse, equitable, inclusive and knowledgeable of the harms of implicit bias?**

*AAANM staff have participated in several trainings including ageism, cultural competency, implicit bias, and trainings with SAGE on LGBTQ+ sensitivity. In addition, AAANM is participating in the ACLS Bureau sponsored Advancing Equity workshops. Perhaps most impactful is the focus group conducted with the local Up North Pride and their sharing of results with staff about what it is like to be an LGBTQ+ individual in this region.*

*Planned activities include:*

- Ensure marketing materials are representative of different populations.*
- Continue to ensure we are able to address language barriers through interpreters and Spanish speaking staff.*
- Continue to train AAANM staff in cultural competency and implicit bias.*
- Provide cultural competency training for the provider network.*
- Implement question sets to identify LGBTQ+ populations through Compass and NAPIS to allow AAANM to be more culturally sensitive and inclusive.*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

**Planned Service Array**

Complete the FY 2023-2025 MYP/AIP Planned Service Array form for your PSA. Indicate the appropriate placement for each ACLS Bureau service category and regional service definition. Unless noted otherwise, services are understood to be available PSA-wide.

	Access	In-Home	Community
<b>Provided by Area Agency</b>	<ul style="list-style-type: none"> <li>• Care Management</li> <li>• Case Coordination and Support</li> <li>• Disaster Advocacy and Outreach Program</li> <li>• Information and Assistance</li> <li>• Options Counseling</li> </ul>	<ul style="list-style-type: none"> <li>• Special Needs Gap Filling (Individual, community or nutrition)</li> </ul>	<ul style="list-style-type: none"> <li>• Nutrition Counseling</li> <li>• Disease Prevention/Health Promotion</li> <li>• Long-term Care Ombudsman/Advocacy</li> <li>• Programs for Prevention of Elder Abuse, Neglect, and Exploitation</li> <li>• Caregiver Education, Support and Training</li> <li>• Special Needs Gap Filling (Individual, community or nutrition)</li> </ul>
<b>Contracted by Area Agency</b>	<ul style="list-style-type: none"> <li>• Transportation *</li> <li>• Self-Determination Option (for Case Coordination &amp; Support or Care Management) with Fiscal Intermediary Service Definition: Supports participants to directly acquire and control needed services and supports using funds allotted in an individual budget.</li> </ul>	<ul style="list-style-type: none"> <li>• Chore</li> <li>• Home Injury Control</li> <li>• Homemaking</li> <li>• Home Delivered Meals</li> <li>• Medication Management</li> <li>• Personal Care</li> <li>• Assistive Devices &amp; Technologies</li> <li>• Respite Care</li> <li>• Friendly Reassurance</li> <li>• Private Duty Nursing Services</li> </ul> <p>Service Definition: Nursing services may include, but are not limited to, tasks such as monitoring and evaluation, occasional blood draws, wound care, training of informal caregivers and other treatments consistent with physician orders.</p>	<ul style="list-style-type: none"> <li>• Adult Day Services *</li> <li>• Congregate Meals</li> <li>• Disease Prevention/Health Promotion</li> <li>• Home Repair</li> <li>• Legal Assistance</li> <li>• Counseling Services</li> <li>• Caregiver Supplemental Services</li> </ul>
<b>Local Millage Funded</b>	<ul style="list-style-type: none"> <li>• Information and Assistance</li> <li>• Transportation *</li> </ul>	<ul style="list-style-type: none"> <li>• Chore</li> <li>• Homemaking</li> <li>• Home Delivered Meals</li> <li>• Medication Management</li> <li>• Personal Care</li> <li>• Assistive Devices &amp; Technologies</li> <li>• Respite Care</li> <li>• Friendly Reassurance</li> </ul>	<ul style="list-style-type: none"> <li>• Adult Day Services</li> <li>• Congregate Meals</li> <li>• Senior Center Operations</li> <li>• Senior Center Staffing</li> <li>• Caregiver Education, Support and Training</li> </ul>

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

<b>Participant Private Pay</b>	<ul style="list-style-type: none"> <li>• Transportation</li> </ul>	<ul style="list-style-type: none"> <li>• Chore</li> <li>• Homemaking</li> <li>• Home Delivered Meals</li> <li>• Medication Management</li> <li>• Personal Care</li> <li>• Assistive Devices &amp; Technologies</li> <li>• Respite Care</li> </ul>	<ul style="list-style-type: none"> <li>• Adult Day Services *</li> </ul>
<b>Funded by Other Sources</b>	<ul style="list-style-type: none"> <li>• Transportation</li> </ul>	<ul style="list-style-type: none"> <li>• Home Delivered Meals</li> <li>• Assistive Devices &amp; Technologies</li> <li>• Respite Care</li> <li>• Friendly Reassurance</li> </ul>	<ul style="list-style-type: none"> <li>• Adult Day Services *</li> <li>• Disease Prevention/Health Promotion *</li> <li>• Legal Assistance</li> <li>• Caregiver Education, Support and Training</li> </ul>

\* Not PSA-wide

Area Agency On Aging of Northwest MI, Inc.

FY 2023

**Planned Service Array Narrative**

**Describe the area agency's rationale/strategy for selecting the services funded under the MYP/AIP in contrast to services funded by other resources within the PSA, especially for services not available PSA-wide.**

**Instructions**

**Use the provided text box to present the Planned Service Array narrative.**

***Prioritization of Services for Funding by AAANM***

*There are a variety of factors taken into consideration when determining which services will be funded by AAANM.*

***Funding source:***

*AAANM receives a majority of its funding through the Older Americans Act (federal) and Older Michiganians Act (state). These funding sources are specific as to which services can be supported.*

***Needs of Older Adults:*** *AAANM performs an analysis of the needs of older persons in Region 10 prior to the development of each multi-year plan. Consumers, program participants, caregivers, service providers, and AAANM staff all provide input into the types of services that are needed.*

***History:***

*Services that have been funded by AAANM in the past, that are still determined to be a priority, and that continue to meet the needs of older adults in the most effective way, are maintained.*

***Community Resources/Collaborations:***

*AAANM works closely with a variety of community agencies to identify existing services and resources and gaps.*

***Serving the frailest, socially isolated, lowest income, and minorities:*** *As funding becomes more limited and demand exceeds supply, AAANM has re-directed funding toward services for those with the highest needs – individuals who require services to support them in their home (such as respite, personal care, and homemaking).*

***Prioritization of Services for Funding by AAANM***

*There are a variety of factors taken into consideration when determining which services will be funded by AAANM.*

***Funding source:***

*AAANM receives a majority of its funding through the Older Americans Act (federal) and Older Michiganians Act (state). These funding sources are specific as to which services can be supported.*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

---

Area Agency On Aging of Northwest MI, Inc.

FY 2023

**Needs of Older Adults:** AAANM performs an analysis of the needs of older persons in Region 10 prior to the development of each multi-year plan. Consumers, program participants, caregivers, service providers, and AAANM staff all provide input into the types of services that are needed.

**History:**

Services that have been funded by AAANM in the past, that are still determined to be a priority, and that continue to meet the needs of older adults in the most effective way, are maintained.

**Community Resources/Collaborations:**

AAANM works closely with a variety of community agencies to identify existing services and resources and gaps.

**Serving the frailest, socially isolated, lowest income, and minorities:** As funding becomes more limited and demand exceeds supply, AAANM has re-directed funding toward services for those with the highest needs – individuals who require services to support them in their home (such as respite, personal care, and homemaking).

Area Agency On Aging of Northwest MI, Inc.

FY 2023

### Strategic Planning

Strategic planning is essential to the success of any area agency on aging to carry out its mission, remain viable and capable of being customer sensitive, demonstrate positive outcomes for persons served, and meet programmatic and financial requirements of the ACLS Bureau. Agencies must be proactive in establishing safeguards in case of internet failure, hacking, or other connectivity issues. The increasing frequency of climate-related disruptions make emergency planning a priority.

All area agencies are engaged in some level of strategic planning, especially given the changing and competitive environment that is emerging in the aging and long-term-care services network. Provide responses below to the following strategic planning considerations for the area agency's MYP.

#### 1. Describe your process to analyze your agency's strengths, weaknesses, opportunities and threats.

AAANM combined retreat sessions with county aging units, AAANM staff and leadership discussions to develop a robust SWOT analysis in 2019. It was refreshed with the Leadership team and staff in 2022.

**Strengths:** Region 10 has a strong aging network dedicated to providing quality Long-Term Services and Supports (LTSS). The changing landscape with a focus on health and social determinants of health, as well as evolving payment models is creating new or different relationships and efforts to impact the lives of older adults in northwest Michigan. The organization has a strong commitment to technology, increasing visibility, implementing process improvements, and using data to drive decisions. Achieving NCQA accreditation demonstrates AAANM's commitment to quality and excellence. AAANM's greatest assets are its experienced, talented employees, and strong partnerships with county aging units and other providers/agencies that support vulnerable populations.

**Weaknesses:** Sufficient and sustainable funding is a continued concern for AAANM and many other organizations in northwest Michigan that are heavily dependent upon governmental payment sources and grants. Additionally, the lack of sophisticated IT systems (and interoperability with other health and community service systems) has become an evident weakness of AAANM. This impacts AAANM's ability to maximize operational efficiency and clinical care quality. Staff have identified that existing workflows need to be analyzed and adapted to successfully position AAANM to manage the rapid growth in staff and service needs. The Direct Care Worker (DCW) shortage is making it increasingly difficult for providers to staff in-home services, creating unfilled care plans. Constant changes in program standards, rules, regulations, and priorities make it challenging to keep pace with growing service needs. The lack of understanding of who AAANM is and what we do negatively impacts the amount of services provided and collaboration that could be achieved. Finally, there are numerous areas within the region that do not have internet access and many that we serve cannot afford the service when it is available. This impacts access to services for older adults that are homebound or do not have transportation. Lack of internet access creates gaps in access to telemedicine, purchasing groceries for home delivery and socializing using social media.

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

**Opportunities:** AAANM has an opportunity to strengthen its internal operations, to diversify funding streams, and to build upon its relationships and collaborations in the community to impact older adults while preparing for changes in the delivery/payment of LTSS. There are opportunities to build AAANM's branding and reputation, reduce wait times, increase referrals, services, participants, and revenue. Additionally, there are opportunities to maximize operational efficiencies, further leverage technology, and diversify funding streams. There is also room for AAANM to use the flexibilities and new ways of doing business learned throughout the pandemic that can help expand programs, strengthen relationships with providers and increase the morale of staff experiencing burn out. Importantly, there is also opportunity to build on the skills and knowledge learned through process mapping to refine key areas and practices internally.

**Threats:** There are significant factors that pose substantial risk for AAANM and the aging network in northwest Michigan. The aging Baby Boomers will have a dramatic effect on the increased need for supports and services this MYP cycle. There is a chronic and increasing shortage of workers, most significantly the direct care workforce but also including nurses, social workers, and other talent necessary for the successful delivery of AAANM programs and services. The ambiguous political climate and limited direction from the State of Michigan about plans to integrate physical, behavioral, and long-term care, changes that could have irreversible impacts to AAANM's scope and presence in Region 10 is a continued threat. Keeping pace with changing program requirements, market dynamics, and organizational best practices, is consuming and pressing. Staff burnout and risk of possible turnover is a threat to AAANM. Not keeping pace with IT interoperability advances is a threat during a time when the federal and state governments are calling for integration of services and care plans.

**2. Describe how a potentially greater or lesser future role for the area agency with the Home and Community Based Services (HCBS) Waiver and/or managed health care could impact the organization.**

AAANM is a significant player in the provision of home and community-based services in Region 10. The agency operates the MI Choice Waiver, Care Management and Caregiver Respite. AAANM is a recognized focal point for information and assistance, options counseling, benefit and Medicaid eligibility assistance as well as housing information. The programs of AAANM are successful because of experienced staff, strong relationships with county aging partners and contracts with a large network of private service providers. AAANM is prepared to accept an expanded role under Integrated Care or other like models. This expansion would require AAANM to continue some of the work and discussions that have already started such as creating more flexible service options, setting up assessment teams to ensure a timely response, creating easier access and payment options for things like home delivered meals and supporting beneficiaries through options counseling and transition support. The agency already has pieces in place that can be expanded upon as more information becomes available.

A lesser role for AAANM will impact the agency in terms of needed staff. But most importantly it will impact the people seeking services who are now able to access a wide range of services and supports through a single access point.

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

**3. Describe what the area agency would plan to do if there was a ten percent reduction in funding from the ACLS Bureau.**

*If the ACLS Bureau were to implement a ten percent funding reduction, AAANM would carefully evaluate existing programs and services and prioritize with emphasis on serving those that are most frail, socially, or economically in need or of low-income minority status.*

*If service reductions were made, AAANM would convene partners within the aging network to explore what other resources might exist or might help to compensate for reductions in AAANM services.*

**4. Describe what direction the area agency is planning to go in the future with respect to pursuing, achieving or maintaining accreditation(s) such as National Center for Quality Assurance (NCQA), Commission on Accreditation of Rehabilitation Facilities (CARF), Joint Commission on Accreditation of Hospitals (JCAH), or other accrediting body, or pursuing additional accreditations**

*AAANM achieved NCQA accreditation in FY 2021. The renewal cycle for accreditation is every 3 years. AAANM plans to maintain this accreditation in future years.*

**5. Describe in what ways the area agency is planning to use technology to support efficient operations, effective service delivery and performance, and quality improvement.**

*AAANM recently upgraded to Microsoft Office 365, added a new accounting system and payroll system for efficiencies and compliance. AAANM is reviewing a Microsoft compatible application to automate data collection for Information & Assistance and service authorizations. In addition, we are investing in data mining activities that will allow us to build out PowerBI dashboards for operational monitoring.*

*AAANM is participating in Area Agency on Aging Association of Michigan (4AM) efforts to enhance operational data collection, usage, and evaluation of potential electronic health record optimizations. We also continue to work with providers to streamline data collection and importation of NAPIS data.*

**6. Describe your agency's emergency planning system, how planning is updated and whether back-up systems are adequate to maintain services during potential disruptions.**

*AAANM uses the Leadership Team as "incident command" structure during emergencies. All members of the Leadership team convene electronically to assess situations and create plans. During the COVID-19 pandemic early phases, AAANM established emergency communication channels through Microsoft Teams for immediate planning updates and to ensure there is real time communication with all staff. As a result of the pandemic and transition to remote environment (and to ensure HIPAA compliance), all staff have company issued laptops and cell phones (with hotspots) loaded with Microsoft Teams. This system has proved invaluable for real time planning and to communicate updates as plans and conditions change during emergencies. Post emergencies, incident command conducts debrief sessions to assess lessons learned for continued planning and process improvement.*

*AAANM operates in a hybrid cloud and server-based environment. This arrangement ensures we are*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

**FY2023-2025 Multi Year Plan**

**FY 2023 Annual Implementation Plan**

---

**Area Agency On Aging of Northwest MI, Inc.**

**FY 2023**

*able to maintain services during potential disruptions. AAANM maintains an IT disaster recovery plan in the event of a disabling emergency. IT planning is an on-going activity to ensure that the organization is up to speed with latest concerns and threats.*

Area Agency On Aging of Northwest MI, Inc.

FY 2023

### Advocacy Strategy

Describe the area agency's comprehensive advocacy strategy for FY 2023-2025. Describe how the area agency's advocacy efforts will improve the quality of life of older adults within the PSA. Also give an update on current advocacy efforts. See *Operating Standards for Area Agencies on Aging* section C-6.

Include initiatives, if any, the area agency is pursuing regarding recruitment, training, wages, diversity and inclusion, credentialing, etc. related to the direct care workforce shortage. Also identify area agency best or promising practices, if any, that could possibly be used in other areas of the state. Enter your advocacy strategy in the dialogue box.

*The AAANM Board of Advisors (BOA) actively drives advocacy both locally and at the State level.*

*Two to three BOA members serve as delegates on the Michigan Senior Advocates Council (MSAC). The delegates regularly share State advocacy issues with both the BOA and the AAANM Board of Directors (BOD).*

*Annually, BOA members promote attendance by older adults from across Region 10 for Older Michiganian's Day in Lansing (and virutally). AAANM supports Older Michiganian's Day by participating on the planning committee, mailing advocacy letters to participants to engage Legislators, promoting Senior Action Week on our web and social media sites, and participating in the advocacy event held in Lansing which gives us the opportunity to engage with Legislators on behalf of those we serve.*

*The BOA also takes on special advocacy projects to educate older adults about issues affecting this population and opportunities to increase awareness of aging issues with local and State representatives.*

*AAANM also has representation on the Silver Key Coalition and participates in advocacy efforts of 4AM.*

*AAANM staff also participates in a variety of human services and senior services collaboratives to bring attention to aging issues.*

*Overall, advocacy efforts will benefit older adults by securing funding for needed services at the State and Federal level, as well as county senior millages. Advocacy efforts also help pass laws that protect seniors.*

Area Agency On Aging of Northwest MI, Inc.

FY 2023

### Leveraged Partnerships

Describe the area agency's strategy for FY 2023-2025 to partner with providers of services funded by other resources, as indicated in the PSA Planned Service Array.

1. Include, at a minimum, plans to leverage resources with organizations in the following categories:
  - a. Commissions Councils and Departments on Aging.
  - b. Health Care Organizations/Systems (e.g. hospitals, health plans, Federally Qualified Health Centers)
  - c. Public Health.
  - d. Mental Health.
  - e. Community Action Agencies.
  - f. Centers for Independent Living.
  - g. Other

*Region 10 is comprised of a well-established aging services system. Aging network partners and organizations and the resources they bring, are critical to serving the needs of older adults and their family caregivers. The following partners, and their working relationship with AAANM, are key to achieving our mutual goal of helping adults continue to live in the community with the support of a wide array of services.*

*County Commissions/Councils on Aging serve as visible focal points for aging services in their county, deliver a variety of home- and community-based services to older adults, and advocate on aging issues and funding for senior services.*

*Disability Network/Northern Michigan (DN/NM) works closely with AAANM to share information and resources. DN/NM also coordinates Nursing Facility Transition Navigation Services with AAANM and Northern Healthcare Management.*

*The Northwest Michigan Community Action Agency (NMCAA) is currently the largest meal provider/contractor of AAANM and has performed in that role for many years. In addition, a close client referral relationship exists between AAANM and NMCAA, utilizing the other organization's programs to effectively serve respective clients.*

*The Public Health Alliance (PHA) is an association of the Public Health departments in northern Michigan. AAANM partners with the health departments and the PHA on multiple initiatives and efforts. The PHA is the backbone organization for the Northern Michigan Community Health Innovation Region (CHIR). AAANM is a Steering Committee member on the CHIR and participates in various workgroups and projects associated with this effort.*

*AAANM supports local transportation initiatives including Wexford New Freedom Advisory and the Grand Traverse/Leelanau Bay Area Transportation Authority senior transportation advisory committee. These efforts are working diligently to address transportation needs of older adults in these communities.*

*United Way of Northwest Michigan (UWNM) "connects and mobilizes the caring power of our local*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

*communities to advance the common good” and during the pandemic, has partnered with AAANM to distribute KN-95 mask; promote, schedule and address barriers to receiving COVID-19 vaccinations; and other projects where our missions intersect to promote community problem solving and well-being.*

*AAANM is represented on a variety of regional committees and collaboratives including but not limited to:*

- Michigan Model Vulnerable Adult program (MYP)*
- Family Support Team (FST)*
- Partners and Collaboration for Kalkaska Seniors (PACKS)*
- BATA Local Advisory Committee*
- Antrim COA Advisory Committee*
- Elder Death Review Team*
- Manistee HSCB, Human Services Leadership Council (HSLC)*
- Grand Traverse Community Collaborative*
- ACES (Antrim, Charlevoix, Emmet County) Collaborative*
- Senior Networking Advocacy Group (SNAG)*
- Bay Area Senior Advocates (BASA)*
- Northern Michigan Community Health Innovation Region (NMCHIR)*
- Area Agency on Aging Association of Michigan (4AM)*
- Regional Quality Collaborative*
- Silver Key Coalition*

**2. Describe the area agency’s strategy for developing, sustaining, and building capacity for Evidence-Based Disease Prevention (EBDP) programs including the area agency’s provider network EBDP capacity.**

*AAANM has a program development goal to offer Evidence-Based Programs (EBPs) available in NWMI by participating in statewide EBP collaborative sponsored by the Area Agencies on Aging of Northwest Michigan. Additionally, AAANM will RFP Title III-D money to entities willing to offer face-to-face EPS in northwest MI. AAANM will take responsibility for some coordination and marketing.*

**3. Describe the agency’s strategy for developing non-formula resources and use of volunteers to support implementation of the MYP and increased service demand.**

*Non-formula resources are vital to sustaining a comprehensive system of aging services in Region 10. All ten counties in the Region have approved senior millages. These resources help stretch state and federal funding to meet the service needs identified in the MYP, as well as sustain additional services that are not funded under the MYP (senior centers, information and assistance, Medicare/Medicaid assistance, tax preparation, Senior Project FRESH, transportation, home chore/repair, and more). In addition, senior millages allow Commissions and Councils on Aging to meet the early service needs of individuals who are on the verge of losing their independence, allowing these service recipients to maintain or even improve health, delaying their need to utilize more costly resources, and sustaining them until they can be served by AAANM Care Management.*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

**FY2023-2025 Multi Year Plan**

**FY 2023 Annual Implementation Plan**

---

**Area Agency On Aging of Northwest MI, Inc.**

**FY 2023**

*Additionally, AAANM participates in a variety of collaboratives, workgroups, and initiatives across the region to effectively target those most in need of service and to create linkages with other community resources.*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

**Community Focal Points**

**Community Focal Points are visible and accessible points within communities where participants learn about and gain access to available services. Community Focal Points are defined by region. Please review and update the listing of Community Focal Points for your PSA below and edit, make corrections and/or update as necessary. Please specifically note if updates have been made.**

**Describe the rationale and method used to assess the ability to be a community focal point, including the definition of community. Explain the process by which community focal points are selected.**

*AAANM defines community geographically by the ten counties in Region 10, all of which are rural in nature. Each county differs in its population size and the availability of resources and services within its boundaries. Within counties are smaller communities defined by the needs of a particular group, such as senior centers, for more active older adults, and nursing/assisted living facilities for older adults and persons with disabilities who are physically less independent. Communities not only include the target population that is dictated by state and federal funding sources as the service recipient, but also those individuals that are connected to the target population (family, friends, service providers, etc.).*

*A community focal point is a facility or entity designated to encourage the maximum co-location and coordination of service for older individuals in the Region. The Area Agency on Aging of Northwest Michigan (AAANM) relies heavily on contract agencies, especially County Commissions and Councils on Aging, to serve as a trusted and visible point for older adults and their families to obtain information and to access services.*

*AAANM uses the following criteria as a guide for assessing the ability of an organization to be designated as a community focal point. Not all criteria apply to each of the selected focal points. It is preferred that designated focal points:*

*1. Have a formal, contractual relationship with AAANM*

*Provide Information and Assistance Services*

*Serve as senior centers or nutrition sites that operate 5 days per week*

*Have accessibility, availability and/or co-location of a broad spectrum of services*

*Serve a community defined by county boundaries*

*Are visible agencies in their community (county or Region)*

*There is not a formal assessment process used by AAANM to assess designated community focal points. For those focal points that are funded by AAANM, AAANM monitors and assesses them regularly. For those not funded by AAANM, communication through attending board meetings, participation on AAANM boards, etc. are the methods for monitoring and assessing their ability to be designated as a focal point in Region 10.*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

**Provide the following information for each focal point within the PSA. List all designated community focal points with name, address, telephone number, website, and contact person. This list should also include the services offered, geographic areas served and the approximate number of older persons in those areas. List your Community Focal Points in this format.**

---

Name:	Grand Traverse County Commission on Aging
Address:	520 W Front St, Ste B, Traverse City, MI 49684
Website:	<a href="https://www.gtcountymi.gov/2207/Commission-on-Aging">https://www.gtcountymi.gov/2207/Commission-on-Aging</a>
Telephone Number:	231-922-4688
Contact Person:	Lana Payne
Service Boundaries:	Grand Traverse County
No. of persons within boundary:	27,818
Services Provided:	Information and Assistance, Chore Services, Homemaking, Personal Care, Respite Care, Foot Care

---

Name:	Grand Traverse County Senior Center Network
Address:	801 E Front St, Traverse City, MI 49686
Website:	<a href="https://www.gtcountymi.gov/712/Senior-Network">https://www.gtcountymi.gov/712/Senior-Network</a>
Telephone Number:	231-922-4911
Contact Person:	Michelle Krumm
Service Boundaries:	Grand Traverse County
No. of persons within boundary:	27,818
Services Provided:	Senior Center Operations/Staffing

---

Name:	Kalkaska County Commission on Aging
Address:	303 S Coral St, PO Box 28, Kalkaska, MI 49646
Website:	<a href="https://www.kalkaskacounty.net/government/commission_on_aging/index.php">https://www.kalkaskacounty.net/government/commission_on_aging/index.php</a>
Telephone Number:	231-258-5030
Contact Person:	Jodi Magee
Service Boundaries:	Kalkaska County
No. of persons within boundary:	5,466

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

**Area Agency On Aging of Northwest MI, Inc.**

**FY 2023**

Services Provided: Information and Assistance, Congregate Meals, Home Delivered Meals, Personal Care, Homemaking, Respite Care, Senior Companion, Assistive Devices, Senior Center Activities, Medicare/Medicaid Assistance, Foot Care, Senior Project FRESH, Transportation, Dining Out, Assistance with hearing devices, Tax Assistance, Retired Senior Volunteer Program, Food Pantry, Commodities, Assistance with unmet needs, Senior Expo, Senior Newsletter, Medication Management, Personal Emergency Response Systems, Dementia Support, Physical activity programs, Social activities, Health Screening, Support Groups, Education

Name: Antrim County Commission on Aging  
 Address: 308 E Cayuga, PO Box 614, Bellaire, MI 49615  
 Website: <https://www.antrimcounty.org/coa.asp>  
 Telephone Number: 231-533-8703  
 Contact Person: Judy Parliament  
 Service Boundaries: Antrim County  
 No. of persons within boundary: 9,265  
 Services Provided: Information and Assistance, Home Delivered Meals, Personal Care, Respite Care, Congregate Meals, Disease Prevention/Health Promotion (Chronic Pain and Diabetes PATH), Senior Center Operations/Staffing, Medicare/Medicaid Assistance Counseling, Foot Care, Senior Project FRESH

Name: Area Agency On Aging of Northwest MI, Inc.  
 Address: 1609 Park Drive, PO Box 5946, Traverse City, Michigan 49696  
 Website: [aaanm.org](http://aaanm.org)  
 Telephone Number: 231-947-8920  
 Contact Person: Heidi Gustine  
 Service Boundaries: Region 10  
 No. of persons within boundary: 100,585  
 Services Provided: Information and Assistance, Options Counseling, Care Management, MI Choice Waiver, Caregiver Respite, T-CARE, Creating Confident Caregivers, Nursing Facility Transition, Veteran's Directed Home and Community-Based Services, Medicare/Medicaid Assistance Program, LTC Ombudsman, Elder Abuse Awareness, Evidence-Based Disease Prevention Programs (PATH; A Matter of Balance)

Name: Benzie Senior Resources  
 Address: 10542 Main St, Honor, MI 49640  
 Website: <https://benzieseniorresources.org/>  
 Telephone Number: 231-525-0600

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

**Area Agency On Aging of Northwest MI, Inc.**

**FY 2023**

Contact Person: Doug Durand  
Service Boundaries: Benzie County  
No. of persons within boundary: 6,486  
Services Provided: Information and Assistance, Congregate Meals, Home Delivered Meals, Personal Care, Homemaking, Respite Care, Senior Companion, Assistive Devices, Senior Center Activities, Medicare/Medicaid Assistance, Foot Care, Senior Project FRESH, Transportation, Dining Out, Assistance with dental care, Tax Assistance, Commodities, Assistance with unmet needs, Senior Expo, Senior Newsletter, Medication Management, Personal Emergency Response Systems, Wandering Alert Bracelets, Physical activity programs, Social activities, Health Screening, Chore Services, Snow Removal, Lawn Care, Education, Volunteer Opportunities, Estate Planning, Hearing Clinic

---

Name: Charlevoix County Commission on Aging  
Address: 218 W Garfield Ave, Charlevoix, MI 49720  
Website: [https://www.charlevoixcounty.org/Commission\\_on\\_Aging/](https://www.charlevoixcounty.org/Commission_on_Aging/)  
Telephone Number: 231-237-0103  
Contact Person: Amy Wieland  
Service Boundaries: Charlevoix County  
No. of persons within boundary: 8,857  
Services Provided: Information and Assistance, Congregate Meals, Home Delivered Meals, Personal Care, Homemaking, Respite Care, Senior Center Activities, Medicare/Medicaid Assistance, Foot Care, Senior Project FRESH, Charlevoix County Free Senior Transportation, Dining Out – Beaver Island only, Emergency Assistance, Tax Assistance, Retired Senior Volunteer Program, Commodities, Senior Expo, Senior Newsletter, Physical activity programs, Social activities, Health Screening, Snow Removal, Education

---

Name: Disability Network/Northern Michigan  
Address: 415 E Eighth St, Traverse City, MI 49686  
Website: <https://www.disabilitynetwork.org/>  
Telephone Number: 231-922-0903  
Contact Person: Jim Moore  
Service Boundaries: Region 10  
No. of persons within boundary: 100,585  
Services Provided: Information and Assistance, Options Counseling, Nursing Facility Transition Services, Medicare/Medicaid Assistance Counseling

---

Name: Friendship Centers of Emmet County  
Address: 1322 Anderson Rd, Petoskey, MI 49770

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

**FY2023-2025 Multi Year Plan**

**FY 2023 Annual Implementation Plan**

**Area Agency On Aging of Northwest MI, Inc.**

**FY 2023**

Website: <https://emmetcoa.org/>  
Telephone Number: 231-347-3211  
Contact Person: Denneen Smith  
Service Boundaries: Emmet County  
No. of persons within boundary: 10,501  
Services Provided: Information and Assistance, Transportation, Homemaking, Home Delivered Meals, Medication Management, Personal Care, Assistive Devices and Technologies, Respite Care, Congregate Meals, Disease Prevention/Health Promotion (A Matter of Balance), Health Screening, Senior Center Operations/Staffing, Support Groups, Medicare/Medicaid Assistance Counseling, Foot Care, Senior Project FRESH, Retired Senior Volunteer Program

---

Name: Leelanau County Senior Services  
Address: 8527 E Governmental Center Dr, Ste 106, Suttons Bay, MI 49682-9718  
Website: <https://www.leelanau.gov/seniorservices.asp>  
Telephone Number: 231-256-8121  
Contact Person: April Missias  
Service Boundaries: Leelanau County  
No. of persons within boundary: 9,203  
Services Provided: Information and Assistance, Medical Transportation, Homemaking, Medication Management, Personal Care, Assistive Devices and Technologies, Respite Care, Senior Project FRESH

---

Name: Manistee County Council on Aging  
Address: 457 River St, Manistee, MI 49660  
Website: [www.manisteecountycoa.com](http://www.manisteecountycoa.com)  
Telephone Number: 231-723-6477  
Contact Person: Sarah Howard  
Service Boundaries: Manistee County  
No. of persons within boundary: 8,856

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

**Area Agency On Aging of Northwest MI, Inc.**

**FY 2023**

Services Provided: Information and Assistance, Congregate Meals / Offered at the Senior Center through NMCAA, Home Delivered Meals / prepared at the Senior Center / by NMCAA, Homemaking / Senior Reimbursement Program, Senior Companion / Seniors Visiting Seniors / Centra Wellness, Assistive Devices, Senior Center Activities, Medicare/Medicaid Assistance, Foot Care, Senior Project FRESH, Transportation / Senior Reimbursement Program, Dining Out, Assistance with dental care, hearing devices / Eyeglass Assistance, Tax Assistance, Retired Senior Volunteer Program / Seniors Visiting Seniors program / Centra Wellness, Food Pantry / Senior Food Bank, Commodities / Emergency Senior Food Pantry, Assistance with unmet needs, Senior Newsletter, Wandering Alert Bracelets / City and County Police, Dementia Support, Physical activity programs, Social activities, Health Screening, Support Groups, Chore Services / Senior Reimbursement Program, Snow Removal / Senior Reimbursement Program, Lawn Care / Senior Reimbursement Program, Education

---

Name: Missaukee County Commission on Aging  
Address: 105 S Canal St, PO Box 217, Lake City, MI 49651  
Website: <http://missaukeeco.org/>  
Telephone Number: 231-839-7839  
Contact Person: Heather Harris-Bryant  
Service Boundaries: Missaukee County  
No. of persons within boundary: 4,653  
Services Provided: Information and Assistance, Homemaking, Personal Care, Respite, MMAP, Medication Management, Foot Care, Chore, Transportation

---

Name: Wexford County Council on Aging  
Address: 117 W Cass St, Cadillac, MI 49601  
Website: <http://wexfordcoa.org/>  
Telephone Number: 231-775-0133  
Contact Person: Erin Brotherton  
Service Boundaries: Wexford County  
No. of persons within boundary: 9,480  
Services Provided: Information and Assistance, Adult Day Services, Transportation, MMAP, Chore, Personal Care, Homemaking, Respite, Medication Management, Foot care, Senior Project FRESH, Senior Center Staffing, Veteran's Services

Area Agency On Aging of Northwest MI, Inc.

FY 2023

### Other Grants and Initiatives

Use this section to identify other grants and/or initiatives that your area agency is participating in with the ACLS Bureau and/or other partners. Grants and/or initiatives to be included in this section may include, but are not limited to:

- Tailored Caregiver and Referral® (TCARE)
- Creating Confident Caregivers® (CCC)
- Evidence Based Disease Prevention (EBDP) Programs (see Doc Library for listing)
- Building Training...Building Quality (BTBQ)
- Powerful Tools for Caregivers®
- PREVNT Grant and other programs for prevention of elder abuse
- Programs supporting persons with dementia (such as Developing Dementia Dexterity and Dementia Friends)
- Medicare Medicaid Assistance Program (MMAP)
- MI Health Link (MHL)
- Respite Education & Support Tools (REST)
- Care Transitions Project

**1. Briefly describe other grants and/or initiatives the area agency is participating in with ACLS Bureau or other partners.**

*AAANM participates in the Statewide AAA Evidence Based Programs (EBP) Collaborative to stay current on statewide planning activities for offering Disease Prevention/Health Promotion virtual programs including A Matter of Balance, Aging Mastery Program, Cancer: Thriving and Surviving, Chronic Disease/Chronic Pain/Diabetes Self-Management Program (PATH), Enhance Fitness, Powerful Tools for Caregivers, Tai Chi for Arthritis, Walk with Ease, Creating Confident Caregivers. 4AM, Region 2 AAA, and ACLS Bureau coordinate the activities of the collaborative. Efforts have expanded EBP virtual program offerings statewide, offering more coordination/planning to fill workshops more effectively, develop standard data collection processes, and reporting of outcomes.*

*AAANM is part of the IMPART Alliance, a coalition of researchers, Direct Care Workers (DCW), clients, and agencies working together to develop a competent direct care workforce, improve the lives of DCWs and the clients they serve, and be a model for the nation.*

*SNP-AL is a Michigan Health Endowment Fund project led by Michigan State University. AAANM has served as an Advisory Group member since the project began in January 2021. The project is intended to develop a roadmap that acts as a facilitation guide for communities to use when forming collaboratives to address the nutrition needs of their residents. Starting in 2022, the project entered the implementation phase, where two pilot regions (Northwest MI Region and Capital Area Region) will be awarded a portion of the funding to address a food equity issue, utilizing the SNP-AL Roadmap (website) tools to aid in successful collaborative building. The project will continue into 2023.*

*MMAP is a popular program offered at AAANM. The agency has a regional coordinator who is focused on*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**BUREAU OF AGING, COMMUNITY LIVING, AND SUPPORTS**

FY2023-2025 Multi Year Plan

FY 2023 Annual Implementation Plan

Area Agency On Aging of Northwest MI, Inc.

FY 2023

*building the volunteer pool of MMAP counselors in the region.*

**2. Briefly describe how these grants and other initiatives will improve the quality of life of older adults within the PSA.**

*AAANM seeks to provide information, resources and support to older adults and caregivers to help them maintain their health, quality of life and independence as long as possible. Through these grants and initiatives (see above) we hope to further our impact in reaching more older adults and caregivers through provision of information, resources, support, and services. Our focus is on increasing capacity, revenue, access to services, education and support to help those we serve.*

**3. Briefly describe how these other grants and initiatives reinforce the area agency's planned program development efforts for FY 2023-2025.**

*The direct care workforce crisis is a significant threat to AAANM 's ability to carry forth its mission and programs. This is a systems issue with many tentacles requiring many different approaches. AAANM supports the work of the IMPART Alliance because we realize that this issue is bigger than one organization can impact.*

*MMAP is a core mission service. Older adults need affordable health insurance and prescription drugs to maintain their health and live independently with quality and dignity of life. MMAP is one of the programs that assists AAANM in actively living our mission.*

*Title III-D evidence-based programs have been proven to support older adults and caregivers to manage chronic health conditions, build healthy habits, increase safety and independence, improve self-efficacy and confidence, reduce stress, problem-solve and develop effective decision-making, and support caregivers in their role. AAANM is focused on making these proven programs available both in-person and online.*

*SNP-AL fits closely with AAANM's mission to support the nutritional needs of older adults, specifically through building relationships with various community partners that provide services and supports to address food insecurity, healthy food access, nutrition education and identifying/treating malnutrition. The efforts of this grant allow for expanded relationships/connections and working on a common goal to improve food and nutrition resources for all ages in our community.*

STATE OF MICHIGAN  
Michigan Department of Health & Human Services  
**AGING & ADULT SERVICES AGENCY**

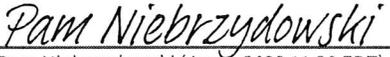
FY 2023-2023 Multi Year Plan

FY 2023 Annual Implementation Plan

**SIGNATURES**

This document covers Fiscal Year 2023. This document becomes valid upon approval by the Michigan Commission on Services to the Aging. It may be conditionally approved subject to all general and/or special conditions established by the Commission on Services to the Aging. This signature page may substitute for required signatures on documents within the documents if those documents are specifically referenced on this signature page.

The signatories below acknowledge that they have reviewed the entire document including all budgets, assurances, and appendices and they commit to all provisions and requirements of this Annual Implementation Plan.

Signature of Chairperson, Board of Directors  <small>Pam Niebrzydowski (Jun 1, 2022 11:28 EDT)</small>	Date <div style="font-size: 1.5em; font-weight: bold;">Jun 1, 2022</div>
Print Name Pam Niebrzydowski, Chairperson	
Signature of Area Agency on Aging Director 	Date <div style="font-size: 1.5em; font-weight: bold;">Jun 1, 2022</div>
Print Name Heidi Gustine, Executive Director	
Area Agency on Aging Area Agency on Aging of Northwest Michigan	
Documents referenced by the signature page: <ul style="list-style-type: none"> <li>▪ FY 2023 Area Plan Grant Budget</li> <li>▪ FY 2023 Direct Service Budgets</li> <li>▪ Request to Transfer Funds</li> <li>▪ Waiver for Direct Service Provision</li> <li>▪ Assurances and Certifications</li> <li>▪ Assurance of Compliance with Title VI of Civil Rights Act of 1964</li> <li>▪ Regional Service Definitions</li> <li>▪ Agreement for Receipt of Supplemental Cash-in-Lieu of Commodity Payments for the Nutrition Program for the Elderly</li> <li>▪ Waiver of Minimum Percentage for a Priority Service Category</li> </ul>	