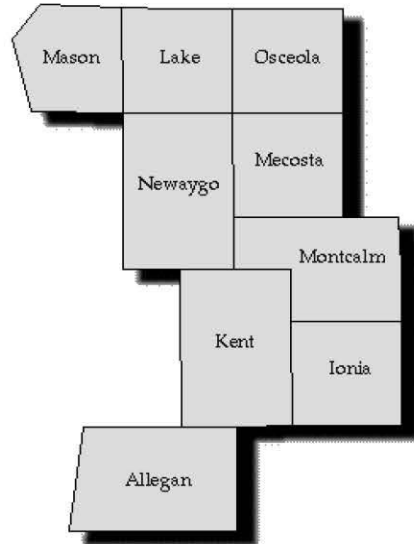


FY 2021 ANNUAL IMPLEMENTATION PLAN

AREA AGENCY ON AGING OF WESTERN MICHIGAN, INC. 8



Planning and Service Area

Allegan, Ionia, Kent, Lake,
Mason, Mecosta, Montcalm,
Newaygo, Osceola

Area Agency on Aging of Western Michigan, Inc.

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Executive Summary

Briefly describe for Commissioners the area agency and the agency's significant FY 2021 updates to the FY 2020 Area Implementation Plan.

Please provide a 2,000 word or less summary in the space provided that describes the planning and service area and significant changes to the current area plan. Include changes, if any, to the Access, In-Home, and Community-based services and supports provided within the plan. Also address the agency's response to the COVID-19 pandemic emergency, including a description of the challenges, changes and continuing needs brought on by this emergency.

The Planning Service Area (PSA) of the Area Agency on Aging of Western Michigan (Region 8) is made up by the following nine counties: Allegan, Ionia, Kent, Lake, Mason, Mecosta, Montcalm, Newaygo, and Osceola.

The mission of the Area Agency on Aging of Western Michigan is to provide older adults and adults living with a disability an array of services designed to promote independence and dignity in their homes and in their communities. AAAM's vision is to be recognized by the West Michigan community as the expert in quality person-centered programs, the leader in older adult service development, and the ultimate informational source for the array of adult services.

The AAAM has a dedicated and experienced staff with expansive knowledge of the aging process and aging network. AAAM staff and service partners are committed to providing high quality, innovative and person centered services to seniors throughout West Michigan.

AAAM has long been a "best kept secret" in West Michigan. It is common for older adults and their families to seek out information about services and supports only after facing a crisis situation. In a continual effort to make West Michigan residents more knowledgeable of services available to older adults, AAAM has embarked on a 12 month partnership with a local television network that has a successful history of engaging older adults. This partnership has facilitated outreach to seniors and their loved ones who otherwise may not have known about AAAM or its service partners.

AAAM's primary focus for FY 2021 has been affected by the Covid-19 pandemic. Whether the pandemic is still evident on October 1, we are dealing with limited service because of the vulnerable population we serve or we are transitioning service back to a new normal, service will continue. AAAM continues to support its service partners as they navigate new and innovative ways to ensure older adults can remain safely in their own homes and communities.

AAAM will continue to focus on those services that are most critical to the health and well-being of older adults. Nutrition, Transportation, and In-Home Services remain priority as well as Caregiver Support and Care Management. AAAM will also continue to seek innovative ideas for service delivery.

Highlighted below are some of the challenges, changes, and adaptations AAAM and its service partners have encountered throughout the COVID crisis.

Before the pandemic, the minimal amount of Personal Protective Equipment (PPE) that was used was readily

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available for those clients who required the use of such equipment in their home. Although in-home caregivers have always practiced safe and sanitary care, more shielding PPE was not required for all tasks/care provided in the home. It is now necessary for all in home care providers to use PPE, regardless of the tasks they are completing, thus increasing the need for PPE for partners. Partners are challenged in acquiring the needed supplies and covering its expense.

Technology has allowed most AAAM staff to work from home; however some staff are working on outdated computers that will need replacement should the crisis continue or reappear in the future. Telephonic systems would also need improvement to employ a fully functional “work from home” workforce. AAAM has received similar reports from Service Partners regarding their staff and the ability to work away from the office. Many have been able to adapt, but some technology upgrades would be needed in the future to sustain working remotely.

While many seniors have at least some experience utilizing technology, many others either lack the knowledge or the resources necessary to use technology to gain access to resources or socialization. Platforms that facilitate social connections such as Zoom, Facetime, or Google Meet have allowed for many people to connect with family and loved ones. However, many older adults in West Michigan do not have access to the internet due to financial limitations or lack of internet connectivity in rural areas. For those who do have access but lack familiarity, it can be challenging to teach new skills virtually.

Isolation and loneliness have been an ongoing issue for older adults. This problem has been exacerbated by the COVID outbreak, confining many to their homes with little opportunity for interaction with others. Additionally, family caregivers are also facing new challenges. Those living with their loved one may feel extra stress and have less access to respite opportunities. Those who care for loved ones and do not share a home face the additional stressors of managing care from a distance and navigating a new and changing system of service delivery.

AAAM Service Partners have adjusted quickly to these challenges. Although there are many unknowns regarding when and how some businesses can return to “normal”, Service Partners are continually developing plans for how to safely return to providing services for older adults. In the meantime, Partners are providing many services in new and creative ways. Highlighted below are some examples:
Transportation partners have adapted and are still providing vital rides for those in needs. Currently rides are limited to one client at a time, with cleaning and sanitizing between each rider. Future plans require all passengers and driver to wear a face mask and limit 3 passengers in vans.

Service Partners are making daily wellness calls to seniors who have requested them. These calls serve to improve the senior’s social and emotional well-being. Many of service definitions have also expanded to allow for staff to deliver essential items to a client’s home.

Many programs for seniors and family caregivers, including Disease Prevention/Health Promotion, Family Caregiver University, Diversity Academy, and Dementia Friends have adapted and are offering on-line or virtual programming.

Many seniors have opted to not receive the in-home care they were receiving prior to the COVID crisis for fear of contracting the virus. This has left many direct care workers with additional time in their schedules. Some

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have been able to offer grocery shopping, pharmacy pickups, and other delivery services for seniors in need. Ensuring older adults have access to healthy, nutritious food has remained a top priority. Meal programs have seen significant changes as a result of this crisis. The system was designed to provide food to older adults in need – those who could get out could visit meal sites and those who could not, could get meals delivered at home. The system was not funded or intended to provide food to all older adults who live at home. COVID has changed that as all older adults are “at-risk” and are encouraged to stay at home. This has significantly increased the number of people who qualify for nutrition services. Meal programs are responding in the following ways:

Home delivered meals previously guaranteed a visual check on clients and social interaction through conversation. Now, food is left at doorsteps and the client is called to make sure they are okay. This helps to keep both the client and the driver safe.

Congregate meals offered social interaction and activities along with a meal. Some counties are now offering grab and go meals or clients have been added to home delivered meal routes. Many congregate hosts are calling clients to provide them with social interaction.

The system has encountered capacity issues both in procuring food as well as delivering increased amounts of food. This has led to some decrease in client choice; however meal programs remain committed to providing meals that offer each food group and meet nutrition meal plans.

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County/Local Unit of Government Review

County and local government review of the Area Agency on Aging's FY 2021 substantive updates to the FY 2020 AIP updates are not required and do not need to be described as part of the FY 2021 AIP updates.

Although this section was not required, a draft copy of the 2021 AIP was sent to all County Chairpersons and Clerks for review on July 9, 2021.

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2021 Plan Highlights

The FY 2021 AIP Highlights should provide a succinct description of the following:

--Any significant new priorities, plans or objectives set by the area agency for the use of Older Americans Act (OAA) and state funding during FY 2021. If there are no new activities or changes planned, note that in your response.

--Current information about contingency planning for potential reduced federal funding (if plans include the pursuit of alternative funding, identify specific funding sources).

--A description of progress made through advocacy efforts to date and focus of advocacy efforts in FY 2021.

Please provide a narrative about what, if anything, the area agency is planning that is new for FY 2021, or that is significantly different from the established FY 2020-22 Multi-Year Plan (MYP). If there are no new activities or changes planned, note that in your response. In addition, include area agency plans to handle the likelihood of reduced federal funding, including any specific alternative funding sources to be pursued. Finally, describe progress made through Multi-Year Plan (MYP) advocacy efforts to date and the area agency's specific planned advocacy focus in FY 2021.

New priorities, plans, or objectives set by the agency for the use of OAA and state funding during FY 2021:

AAAWM will continue the work set out in the MYP for 2021. Anticipated changes are centered around responding to the COVID crisis and ensuring older adults and individuals with disabilities are able to continue to receive supports and services in their own homes and communities safely.

Current Information about contingency planning for potential reduced federal funding:

If AAWM were faced with a reduction in funding, the following steps would be employed:

1. Increase the emphasis on collecting cost share and program income with service partners in an effort to maintain service levels.

Review prioritization protocols to ensure that the most frail, vulnerable and in the greatest economic need receive services, while seeking other options for those who do not score high on prioritization tools.

Review staffing allocations to ensure they are in keeping with the necessary reductions, while ensuring essential functions are unchanged.

Increase awareness of non-AASA funded programs and services throughout the Region, especially those funded by local senior millages.

Advocacy:

AAAWM Executive Director and Advocacy staff continue to meet with local, state and federal legislators and their staff throughout the year to provide information and education regarding the aging network and AAWM programs and services. Throughout the Covid-19 pandemic, advocacy efforts were exclusively made thru electronic means as face to face meetings were not possible. AAWM Advocacy staff provided updates regarding services available to seniors in each Senator and Representative's district throughout the AAWM Planning and Service Area (PSA).

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AAAWM staff meet regularly with Service Partners to identify unmet needs as well as areas of need for increased funding.

AAAWM Advocacy Staff continues to work with the Advisory Council of the AAAWM to prioritize advocacy efforts. Although the Advisory Council was forced to cancel some of their regularly scheduled meetings due to Covid -19, the leadership of the Council continued to meet with AAAWM Advocacy staff and the AAAWM Executive Director to continue advocating for the needs of older adults in West Michigan. In the past year, the Advisory Council has sent nearly 20 advocacy letters to state and national legislators. Moving forward AAAWM will continue to focus advocacy efforts on those issues that are most important to seniors. As it has been in the past, these issues continue to be the caregiver workforce crisis, transportation, access to in-home services, and preserving the MI Choice Waiver program.

AAAWM is proud to partner with the "Advocates for Senior Issues" (AFSI) to provide opportunities for older adults in and around Kent County to meet their legislators and ask questions pertaining to issues that affect older adults. This group typically meets 9 times per year, however the Covid-19 pandemic led to the cancellation of 4 AFSI membership meetings. AAAWM Advocacy Staff and the Executive Committee of AFSI remained committed to helping older adults stay connected to their legislators. Advocacy information was shared with AFSI members, and they were encouraged to engage with their Senators and Representatives throughout the pandemic.

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Public Hearings

All area agencies held public hearings during the development of their FY 2020 AIPs and FY 2020-22 multi-year plans (MYP). Public hearings on substantive updates to the approved plan for FY 2021 are not required and do not need to be described. Public review and approval of the area agency's proposed FY 2021 AIP budget and programmatic updates by the area agency's Policy Board is considered, in this instance, to have met the *AASA Operating Standards C-2, Section (11)(a)*, requirement that *"a proposed addition or deletion of any area plan objective must be presented for public comment within the PSA prior to submission to AASA."*

Public input is always welcome and encouraged. Area agencies holding additional public input forums on their FY 2021 updates are to be commended.

Date	Location	Time	Barrier Free?	No. of Attendees
06/01/2020	Virtual	01:00 PM	Yes	48

A press release/meeting notice (see attached) was shared with the AAAWM Caregiver Resource Network, AAAWM Service Partners, AAAWM Board of Directors and Advisory Council, posted on the AAAWM website, as well as the following newspapers:

Allegan County News
Ionia Sentinel-Standard
Advance Newspapers (mlive)
Grand Rapids Press
Grand Rapids Times
Rockford Squire
Lake County Star
Ludington Daily News
The Pioneer (Big Rapids & Osceola)
The Daily News (Greenville)
The Times Indicator
Pride Source
Hispanic Chamber of Commerce
Native News Online

A public hearing on the AIP for 2021 was held on June 1st, 2020 virtually via Zoom Video and Conference Call. There were 48 people in attendance, 8 of whom are AAAWM staff.

There were no public comments that necessitated a substantial change in the Plan for FY 2021. Below is a list of comments received:

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·Several comments were made in reference to the lack of internet connectivity in parts of the PSA. (Joseph Fox-Newaygo County, Jo VerBeek-Allegan County, Bob Barns – Kent County)

Joseph Fox:

·Indicated their meal delivery numbers have increased significantly and shared that their food box distribution is going well

Requested that all OAA Partners be listed in the Plan

Several Partners shared compliments regarding the quick response of AAAWM to the COVID-19 pandemic

Frank Lynn shared his concerns regarding the state of our healthcare system in the U.S. It has been well documented that the COVID-19 outbreak has disproportionately affected people of color and low income individuals. He also stated he was pleased to see the inclusion of a new goal addressing Diversity, Equity and Inclusion.

Additionally, the 2021 AIP was presented to and approved by the AAAWM Advisory Council on June 1st, 2020. The 2021 AIP was also presented to and approved by the AAAWM Board of Directors on June 22nd, 2020.

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Regional Service Definitions

If the area agency is proposing to fund a new (not previously approved in this multi-year planning cycle) service category that is not included in AASA's *Operating Standards for Service Programs*, then information about the proposed service category must be included in this section.

The AAA must add a Regional Service Definition for any current COVID-19 policy-waiver-approved services that are not included in, or deviate from, AASA's *Operating Standards for Service Programs* that the AAA is planning to continue beyond September 30, 2020. Enter the new regional service name, identify the service category and fund source, include unit of service, minimum standards and an explanation of why activities cannot be funded under an existing service definition.

Service Name/Definition

Dementia Friends

The Dementia Friends (DF) program is designed to accomplish the following goals: raise awareness of dementia, challenge stigma about dementia, help participants understand how dementia affects a person and spread positive messaging and encourage behavior change. One hour DF sessions are conducted in person or virtually by trained Dementia Champions.

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

AAAWM was appointed the Dementia Friends state entity by the National Area Agency on Aging Association in 2017 and is responsible for the delivery and quality of the Dementia Friends program in Michigan.

Service Category	Fund Source	Unit of Service
<input type="checkbox"/> Access <input 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 type="checkbox"/> State Alternative Care <input type="checkbox"/> State Access <input type="checkbox"/> State In-home <input type="checkbox"/> State Respite <input type="checkbox"/> Other _____	Provision of 1 hour of allowable service

Minimum Standards

AAAWM will serve as the Master Dementia Champion and will provide DF Program training to Champions who will provide Dementia Friends sessions to the community, using DF program materials.

AAAWM tracks the numbers of people trained to be a Dementia Friend and reports to National Area Agencies on Aging Association/Dementia Friends USA on a monthly basis.

AAAWM will provide technical support to other Area Agency on Aging regions in Michigan that want to implement a DF program.

AAAWM will provide technical support to counties in Region 8 that want to implement a DF program.

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Service Name/Definition Enhanced Adult Day Services/COVID This service expands the Adult Day service unit definition to include weekly phone calls with family caregivers and clients, weekly "support group" phone calls with family caregivers, and when appropriate, use ADC staff to deliver food, medications, and essential items to clients.				
Rationale (Explain why activities cannot be funded under an existing service definition.) This expanded definition allows service partners to continue providing services throughout the pandemic and/or other emergency.				
Service Category	Fund Source			Unit of Service
<input type="checkbox"/> Access <input 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 type="checkbox"/> State Access <input type="checkbox"/> State In-home <input checked="" type="checkbox"/> State Respite <input checked="" type="checkbox"/> Other MATF, Ft CG Sup., St. ANS			One hour of care provided per client

Minimum Standards

Minimum Standards set for Adult Day Services apply to this expanded definition.

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Service Name/Definition				
Enhanced Transportation/COVID				
This service expands the Transportation service unit definition to allow drivers to get food , medications, and other essential items for clients without actually providing a ride for the client.				
Rationale (Explain why activities cannot be funded under an existing service definition.)				
This expanded definition allows service partners to continue providing services throughout the pandemic and/or other emergency.				
Service Category	Fund Source			Unit of Service
<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 checked="" type="checkbox"/> Title III PartE <input type="checkbox"/> Title VII <input type="checkbox"/> State Alternative Care <input type="checkbox"/> State Access <input type="checkbox"/> State In-home <input type="checkbox"/> State Respite <input checked="" type="checkbox"/> Other MATF, St. CG Sup			one pick up or delivery of meals or supplies

Minimum Standards

Minimum Standards set for Transportation apply to this expanded definition.

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Service Name/Definition Enhanced Respite/COVID This service expands the Respite service unit definition to include weekly wellness checks with family caregivers and clients, weekly "support group" phone calls with family caregivers, and when appropriate, use Respite staff to deliver food, medications, and essential items to clients.				
Rationale (Explain why activities cannot be funded under an existing service definition.) This expanded definition allows service partners to continue providing services throughout the pandemic and/or other emergency.				
Service Category	Fund Source			Unit of Service
<input type="checkbox"/> Access <input checked="" type="checkbox"/> In-Home <input type="checkbox"/> Community	<input type="checkbox"/> Title III PartB <input type="checkbox"/> Title III PartD <input checked="" type="checkbox"/> Title III PartE <input type="checkbox"/> Title VII <input type="checkbox"/> State Alternative Care <input type="checkbox"/> State Access <input checked="" type="checkbox"/> State In-home <input checked="" type="checkbox"/> State Respite <input checked="" type="checkbox"/> Other MATF, Ft CG Sup., St. ANS			one hour of allowable services

Minimum Standards

Minimum Standards set for Respite apply to this expanded definition.

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Service Name/Definition Enhanced Senior Center Staffing/COVID This service expands the Senior Center Staffing service unit definition to include using Senior Center Staffing staff to deliver food, medications, and essential items to their organization's clients. Rationale (Explain why activities cannot be funded under an existing service definition.) This expanded definition allows service partners to continue providing services throughout the pandemic and/or other emergency.				
Service Category	Fund Source			Unit of Service
<input type="checkbox"/> Access <input type="checkbox"/> In-Home <input checked="" type="checkbox"/> Community	<input checked="" type="checkbox"/> Title III PartB <input type="checkbox"/> Title VII <input type="checkbox"/> State In-home <input type="checkbox"/> Other _____	<input type="checkbox"/> Title III PartD <input type="checkbox"/> State Alternative Care <input type="checkbox"/> State Respite	<input type="checkbox"/> Title III PartE <input type="checkbox"/> State Access	one hour of allowable service

Minimum Standards

Minimum Standards set for Senior Center Staffing apply to this expanded definition.

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Service Name/Definition Enhanced Homemaker/COVID This service expands the Homemaker service unit definition to include weekly wellness checks with clients, and when appropriate, use Homemaker staff to deliver food, medications, and essential items to their clients.				
Rationale (Explain why activities cannot be funded under an existing service definition.) This expanded definition allows service partners to continue providing services throughout the pandemic and/or other emergency.				
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 III PartD <input type="checkbox"/> Title III PartE <input type="checkbox"/> Title VII <input checked="" type="checkbox"/> State Alternative Care <input type="checkbox"/> State Access <input checked="" type="checkbox"/> State In-home <input type="checkbox"/> State Respite <input checked="" type="checkbox"/> Other St. ANS			One hour spent performing homemaking activities.

Minimum Standards

Minimum Standards set for Homemaker apply to this expanded definition.

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Service Name/Definition

COVID-19 Gap Filling Needs

This temporary regional service provides AAAs flexibility in utilizing AASA, OAA, and state funding for services that fill unmet needs necessary to protect the health, safety, and well-being of Michigan's older adults and their caregivers, including:

Purchase and delivery of prescriptions, groceries, meals/food, hygiene and personal care supplies including face masks, or other household items that older adults are having trouble getting during the COVID pandemic emergency because they are afraid or unable to go to the store.

Training/education of in-home care workers to care for clients that may be diagnosed with COVID-19.

Telephonic or tele-health wellness checks and friendly reassurance to support older adults and caregivers who are impacted by COVID-19.

Community counseling services via in-person, telephonic, and telehealth to support older adults and caregivers who are impacted by COVID-19.

Alternative disaster meal options for congregate/home delivered meal participants including:

Curb-side congregate meals

Temporary home delivered meals for congregate participants living in senior/disabled housing

Modified temporary meal voucher options

Additional self-stable meals

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

This temporary service allows service partners to continue providing services throughout the pandemic and/or other emergency.

Service Category	Fund Source			Unit of Service
<input checked="" type="checkbox"/> Access	<input checked="" type="checkbox"/> Title III PartB	<input type="checkbox"/> Title III PartD	<input checked="" type="checkbox"/> Title III PartE	One occurrence of service
<input type="checkbox"/> In-Home	<input type="checkbox"/> Title VII	<input checked="" type="checkbox"/> State Alternative Care	<input checked="" type="checkbox"/> State Access	
<input checked="" type="checkbox"/> Community	<input checked="" type="checkbox"/> State In-home	<input checked="" type="checkbox"/> State Respite		
	<input type="checkbox"/> Other _____			

Minimum Standards

The minimum standards will vary dependent upon what service is provided.

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Access Services

Some access services may be provided to older adults directly through the area agency without a direct service provision request. These services include: Care Management; Case Coordination and Support; Options Counseling; Disaster Advocacy and Outreach Programs; Information and Assistance; Outreach, with specific attention to outreach with underserved populations, including people of color, people with disabilities, lesbian, gay, bisexual, transgender and other (LGBTQ+) older adults; and Merit Award Trust Fund/State Caregiver Support-funded Transportation. If the area agency is planning to provide any of the above noted access services during FY 2021, complete this section. Some access services may be provided to older adults directly through the area agency without a direct service provision request. These services include: Care Management; Case Coordination and Support; Options Counseling; Disaster Advocacy and Outreach Programs; Information and Assistance; Outreach, with specific attention to outreach with underserved populations, including communities/people of color, persons with disabilities, recent immigrants, lesbian, gay, bisexual, transgender, queer and other (LGBTQ+) older adults; and Merit Award Trust Fund/State Caregiver Support-funded Transportation.

If the area agency is planning to provide any of the above noted access services directly during FY 2021, complete this section.

Select, from the list of access services, those services the area agency plans to provide directly during FY 2021, and provide the information requested. Also 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 2021 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, Support Services Detail page. The Area Plan Grant Budget uploaded and saved in AMPS must include Direct Service Budget details.

Select from the list of access services those services the area agency plans to provide directly during FY 2021, and provide the information requested. Also 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 2021 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, Support Services Detail page. The Area Plan Grant Budget uploaded and saved in AMPS must include Direct Service Budget details.

Care Management

<u>Starting Date</u>	10/01/2020	<u>Ending Date</u>	09/30/2021
Total of Federal Dollars	\$28,575.00	Total of State Dollars	\$451,825.00

Geographic area to be served

All 9 Counties Served by AAAWM

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

Goal: To provide support to frail elderly to prevent or delay institutional placement.

Timeline: Ongoing

Expected Outcome: Serve Care Management (CM) clients and provide Options Counseling from the Community Living Consultant through the Community Living Program.

Goal: To provide a level of care in concert with MI Choice Waiver that results in a continuum of long-term care services.

Timeline: Ongoing

Expected Outcome: Allow for easy access to levels of care as people age in place in the community, maximizing federal, state and local resources.

Goal: Advocate for growth of the MI Choice Waiver Program to ease demand on Care Management and other state and federally funded services.

Timeline: Ongoing

Expected Outcome: Assure Medicaid and long-term care eligible individuals are served in the most appropriate program, resulting in a decreasing number of CM clients waiting for Waiver services.

Goal: Provide information, assistance and support to family caregivers.

Timeline: Ongoing

Expected Outcome: Assure consumers and family members have information necessary to make informed choices reflected in enrollment in CM programs.

Goal: Assure high quality services through continual quality improvement activities.

Timeline: Ongoing

Expected outcome: Achieve 95% or above overall compliance rate on program assessments

Goal: Provide consumers with choice through a broadly based purchase of service provider pool.

Timeline: Ongoing

Expected Outcome: Consumers will receive services in a timely manner and person-centered care plans will be honored.

Goal: Transition CM clients to MI Choice Waiver program as needs eligibility change.

Timeline: Ongoing

Expected Outcome: Assure seamless transition to address changing client needs as people age in place in the community.

Number of client pre-screenings:	Current Year:	90	Planned Next Year:	90
Number of initial client assessments:	Current Year:	50	Planned Next Year:	50
Number of initial client care plans:	Current Year:	50	Planned Next Year:	50
Total number of clients (carry over plus new):	Current Year:	339	Planned Next Year:	300
Staff to client ratio (Active and maintenance per Full time care	Current Year:	1:45	Planned Next Year:	1:45

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Information and Assistance

<u>Starting Date</u>	10/01/2020	<u>Ending Date</u>	09/01/2021
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Total of Federal Dollars	\$74,096.00	Total of State Dollars	\$27,404.00
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Geographic area to be served

All 9 Counties Served by AAAWM

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

Goal: Provide immediate and appropriate information to callers.

Timeline: Ongoing

Outcome: Allow for easy, friendly access to information and referrals as clients and caregivers make contact with AAAWM call center staff members.

Goal: Assure high quality services through continual quality improvement activities

Timeline: Ongoing

Outcome: Caller surveys will reflect a better than 95% satisfaction level with information and referrals received.

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Direct Service Request

This section applies only if the area agency is submitting a new request to provide an in-home, community, or nutrition service directly that was not previously approved in this multi-year planning cycle. It is expected that in-home services, community services, and nutrition services will be provided under contracts with community-based service providers. When appropriate, a direct service provision request may be approved by the CSA. Direct service provision is defined as “providing a service directly to a senior, such as preparing meals, doing chore services, or working with seniors in an adult day setting.” Direct service provision by the area agency may be appropriate when, in the judgment of AASA: A) provision is necessary to assure 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 that have a new request to provide an in-home service, community service, and/or a nutrition service directly must complete the section below for each service category. Include in this section any current COVID-19 policy-waiver-approved direct provision of a service included in the AASA *Operating Standards for Service Programs* that the AAA is planning to continue beyond September 30, 2020.

Select the service from the list and enter the information requested pertaining to basis, justification and public hearing or policy board discussion for any new Direct Service Request for FY 2021. 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 2021 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, Support Services Detail page. The Area Plan Grant Budget uploaded and saved in AMPS must include Direct Service Budget details. Please skip this section if the area agency is not submitting a new request to provide an in-home, community, or nutrition service directly during FY 2021.

Total of Federal Dollars

Total of State Dollars

Geographic Area Served

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

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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.

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.

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

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Regional Direct Service Request

This section applies only if the area agency is submitting a new request to provide a regional service directly that was not previously approved in this multi-year planning cycle. It is expected that regionally defined services will be provided under contracts with community-based service providers. When appropriate, a regional direct service provision request may be approved by the CSA. Regional direct-service provision by the area agency may be appropriate when, in the judgment of AASA: (A) provision is necessary to assure 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.

Include in this section any current COVID-19 policy-waiver-approved direct regional services that have been included in the updated Regional Service Definition section and that the AAA is planning to continue beyond September 30, 2020.

Area agencies that have a new request 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 left after screen refresh. Select the link for the newly added regional direct service and enter the information requested pertaining to basis, justification, and public hearing discussion for any new regional direct service request for FY 2021. Also, specify in the appropriate text box for each service category the planned goals and activities that will be undertaken to provide the service. Regional Direct Service Budget details for FY 2021 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 Older Americans Act Title III or VII and state funds) identified in the Area Plan Grant Budget, Support Services Detail page. The Area Plan Grant Budget uploaded and saved in AMPS must include Direct Service Budget details. Please skip this section if the area agency is not submitting a new request to provide regional services directly during FY 2021.

Dementia Friends

<u>Total of Federal Dollars</u>	\$0.00	<u>Total of State Dollars</u>	\$0.00
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Geographic Area Served All Counties served by AAAM

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

The Dementia Friends (DF) program is designed to accomplish the following goals: raise awareness of dementia, challenge stigma about dementia, help participants understand how dementia affects a person and spread positive messaging and encourage behavior change. One hour DF sessions are conducted in person or virtually by trained Dementia Champions.

1. AAAM will serve as the Master Dementia Champion and will provide DF Program training to Champions who will provide Dementia Friends sessions to the community, using DF program materials.

AAAM tracks the numbers of people trained to be a Dementia Friend and reports to National Area Agencies on Aging Association/Dementia Friends USA on a monthly basis.

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AAAWM will provide technical support to other Area Agency on Aging regions in Michigan that want to implement a DF program and one additional AAA will start the DF program in FY 21.

AAAWM will provide technical support to counties in Region 8 that want to implement a DF program and one new county in Region 8 will start a DF program in FY 21.

Coordinate Dementia Friends sessions to targeted professionals and family caregivers in the greater Grand Rapids region. Twenty DF sessions will be conducted in-person or virtually in FY 21.

Maintain list of Dementia champions and provide support to Dementia Champions as needed; At least two meetings/year will be held for Dementia Champions in Region 8.

DF will be regularly promoted on social media sites (website, Facebook);

Coordinate Dementia Champion volunteers including providing available sessions dates, matching/connecting volunteers to requested sessions, providing support to Champion in reviewing and updating Dementia Champion training and onboarding;

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 .

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.

AAAWM is the state entity for the Dementia Friends program and AAA's and counties in Region 8 must work through AAWM to implement this program. The program has been self-sustaining for several years with limited staff time. As this program complements many OAA funded services, we request the opportunity to minimally fund this program with OAA funds. Staff time is needed to assist other AAA's to develop this program in their regions and also to increase the number of counties in Region 8 that provide this program.

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

N/A

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Approved MYP Program Development Objectives

Progress updates for Program Development Objectives approved in the FY 2020 AIP/MYP, including Communities for a Lifetime Program Development Objectives, are not required and do not need to be described as part of the FY 2021 AIP updates.

Program development goals and objectives previously set by the area agency and approved by the CSA in this multi-year planning cycle are included as read-only. For each of these established program development objectives, a text box is included for the area agency to provide information on progress toward the objectives to date. This text box is editable.

For those area agencies that have an approved Community for a Lifetime (CFL) or aging-friendly goal and objective(s) for FY 2020, the following information should be addressed in the progress to date text box:

- A. Which community achieved CFL or aging-friendly recognition (if any) and if none;
- B. Which communities were the area agency involved with to encourage them to engage in conducting an aging-friendly assessment and/or improvement activities and;
- C. What were the lessons learned for the area agency and other community partners from the process of raising awareness about the value of aging-friendly communities and;
- D. What improvements (if any) were made in communities in the PSA to make them more aging friendly?

Please provide information on progress to date for each established objective under the section tab entitled "Progress."

Area Agency on Aging Goal

- A. Advocate Inform, and Empower those we serve.**

Objectives

1. Teach older adults how to use technology that can help enhance and make their lives easier.
Timeline: 10/01/2019 to 09/30/2020

Progress

Older adult technology classes have continued as in-person class trainings along with posting online lessons to AAAMW's website and YouTube channel. Lessons have included how to be aware of online scams, how to use apps, email and other technology based services. Lessons have taken place at senior centers, social groups and clubhouse forums.

2. Provide resources, education, guidance, training and empowerment to support those caring for older adults, persons with Dementia, Alzheimer's disease or other chronic conditions. The Caregiver Resource Network recognizes that caregivers are a pivotal component of long-term care planning for older adults and that many older adults provide caregiving services to their own families and friends. AARP reports that, "more than 90%

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of persons 65 and older with disabilities who receive assistance receive informal care; nearly two-thirds rely solely on informal caregivers." As a result, the CRN is a vital part of the aging network in Region Eight, providing education and resources through their meetings as well as through their website, caregiverresource.net. The CRN has both enhanced existing and developed new public and private partnerships to better serve older adult caregivers.

Timeline: 10/01/2019 to 09/30/2020

Progress

The Caregiver Resource Network conducted its bi-monthly meetings in November, January and March. In November AAARP presented on their legislative work, the January meeting was the state of the CRN and the efforts of our members. In March we invited a speaker from the new Pine Rest Urgent Care to share about the resources they are providing members with in our community. Due to COVID-19, likely our May meeting will be cancelled or postponed.

The CRN website continued to be updated, and also during the COVID-19 pandemic, additional resources have been uploaded for older adults and their caregivers.

3. Employ a robust advocacy strategy utilizing a wide variety of resources available including but not limited to AAAMW staff, Board, and Advisory Council as well as other partner organizations.

Timeline: 10/01/2019 to 09/30/2020

Progress

AAAMW Executive Director and Advocacy staff continue to meet with local, state and federal legislators and their staff throughout the year to provide information and education regarding the aging network and AAAMW programs and services. Throughout the Covid-19 pandemic, advocacy efforts were exclusively made thru electronic means as face to face meetings were not possible. AAAMW Advocacy staff provided updates regarding services available to seniors in each Senator and Representative's district throughout the AAAMW Planning and Service Area (PSA).

AAAMW staff meet regularly with Service Partners to identify unmet needs as well as areas of need for increased funding.

AAAMW Advocacy Staff continues to work with the Advisory Council of the AAAMW to prioritize advocacy efforts. Although the Advisory Council was forced to cancel some of their regularly scheduled meetings due to Covid-19, the leadership of the Council continued to meet with AAAMW Advocacy staff and the AAAMW Executive Director to continue advocating for the needs of older adults in West Michigan. In the past year, the Advisory Council has sent nearly 20 advocacy letters to state and national legislators. Moving forward AAAMW will continue to focus advocacy efforts on those issues that are most important to seniors. As it has been in the past, these issues continue to be the caregiver workforce crisis, transportation, access to in-home services, and preserving the MI Choice Waiver program.

AAAMW is proud to partner with the "Advocates for Senior Issues" (AFSI) to provide opportunities for older adults in and around Kent County to meet their legislators and ask questions pertaining to issues that affect older adults. This group typically meets 9 times per year, however the Covid-19 pandemic led to the cancellation of 4 AFSI membership meetings. AAAMW Advocacy Staff and the Executive Committee of AFSI remained committed to helping older adults stay connected to their legislators. Advocacy information was shared with AFSI members,

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and they were encouraged to engage with their Senators and Representatives throughout the pandemic.

B. Help older adults maintain their health and independence at home and in their community.

Objectives

1. In FY 2020 and beyond AAAWM will continue building and expanding partnerships within the aging network to disseminate healthy aging programs to older adults. Evidence-based, healthy aging programming is a cornerstone of the array of services offered in Region Eight, the number of classes and participants continues to grow beyond expectations.

Timeline: 10/01/2019 to 09/30/2020

Progress

AAAWM Eaglecrest location along with partner agency Senior Neighbors in Kent County became a SilverSneakers certified agency. This certification allows for 3rd party reimbursement for healthy aging classes offered for SilverSneakers members.

October and November: A Matter of Balance Coach Update meetings were held and an EF instructor Regional Training.

Lake County Senior Services began offering an EnhanceFitness Class in October.

2. Help older adults maintain their dental health and raise awareness of the need for quality dental care for seniors.

Timeline: 10/01/2019 to 09/30/2020

Progress

Partnering with the Kent County Oral Health Coalition (KCOHC) and Grand Rapids Community College (GRCC), AAAWM was coordinating a senior dental day where about 30 Kent County seniors over 60 years old would be able to attend the event on March 20, 2020 to get free dental cleaning and exams from GRCC dental staff and students. Due to the COVID-19 Stay Home Order from the Governor, the event had to be cancelled for this spring. AAAWM is still in communication with GRCC and the KCOHC to see if we can reschedule this event after the orders have lifted and gatherings are allowed.

C. Promote elder and vulnerable adult rights and justice.

Objectives

1. Members of the Lesbian, Gay, Bisexual, and Transgender (LGBT) older adult community are not as likely to access healthcare services, due to fears of being mistreated and discriminated against. Many come from a generation where society operated under a "don't ask, don't tell" mindset. AAAWM will look to educate older adults on LGBT affirming services available to them, so that they have better access to aging services. Working on a grant funded by the Michigan Health Endowment Fund, AAAWM, in collaboration with the Grand Rapids Pride Center, created a LGBT Resource Guide that lists different organizations who are LGBT affirming. By being a part of the guide, organizations are stating that all older adults who access their services, will be treated the same and members of the LGBT community will not be discriminated against. AAAWM will

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ensure older adults are aware of the LGBT Resource Guide and the services it can provide to help them age in place.

Timeline: 10/01/2019 to 09/30/2020

Progress

AAAWM provides LGBT resources to clients, via phone and by mail. We advertise so clients know we have an LGBT Resource Guide, which lists LGBT affirming resources, we distribute the guide and other LGBT affirming information at booth events and onsite presentations that AAWM performs. New AAWM staff members go through Advocacy & Services for LGBT Elders (SAGE) training modules which educate them on caring for LGBT older adults and the importance of making sure they know of affirming resources available to them.

2. Coordination of the Kent County Elder Abuse Coalition

Timeline: 09/30/2019 to 10/01/2020

Progress

AAAWM coordinates the Kent County Elder Abuse Coalition, which consists of over 100 members representing over 50 local nonprofit, profit, legal, and government agencies. The monthly coalition meetings comprise of a training on an elder abuse-related topic from a community professional and following the training, there is time for coalition updates and collaboration on elder abuse cases. For the 2020 fiscal year the follow trainings have been provided to the coalition; the effects of marijuana and the new law, opioid crisis and our seniors, medication management and proper disposal resources, collaboration with other Michigan elder abuse prevention groups, and cybercrime. Coalition meetings for March and April have been cancelled due to the COVID-19 Stay Home order from the governor. The topics scheduled for these meetings were updates from the Michigan Attorney General Elder Abuse Taskforce and Financial Exploitation in which information and resources were sent to coalition members until we can reschedule the speakers for a later date.

D. Conduct responsible quality management and coordination of West Michigan's aging network.

Objectives

1. Care Management participants reporting social isolation with distress will not exceed 9%

Timeline: 10/01/2019 to 09/30/2020

Progress

11% of AAWM Care Management participants reported social isolation with distress.

2. 95% of Care Management participants will report they either agree or strongly agree to the statement "The services I receive are helping me remain at home".

Timeline: 09/30/2019 to 10/01/2020

Progress

99% of AAWM Care Management participants reported they agree or strongly agree with the statement "The services I receive are helping me remain at home".

3. 90% of Care Management participants will show a higher self-rating of their quality of life after receiving community based services.

Timeline: 09/30/2019 to 10/01/2020

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Progress

94% of AAAWM Care Management participants reported a higher quality of life after receiving services.

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2021 Program Development Objectives

The Michigan Department of Health and Human Services' (MDHHS) Diversity, Equity and Inclusion (DEI) Council was formed in May of 2018 around this mission statement: *"To promote and foster a culture that values diversity, equity and inclusion throughout MDHHS and the diverse communities we serve in order to achieve our highest potential."*

Historical biases such as economic deprivation, social ostracization (exclusion), and inequitable exposures to occupational and environmental hazards have resulted in lower health outcomes for Michigan's communities/people of color, persons with disabilities, recent immigrants and lesbian, gay, bisexual, transgender, queer and other (LGBTQ+) persons.

Effects of such bias have been shown to result in poorer health outcomes because of limits on access to social programs, in-home support services and health care, as well as physiological responses to living with chronic discrimination. Mortality rates and chronic health conditions are higher among these population groups. AASA supports the Department's DEI mission and is committed to advocating for diversity, equity, and inclusion.

Events in 2020 have again focused a spotlight on racial injustice and inequality in the world around us. Now, more than ever, the aging network has an opportunity to bring change that is so desperately being sought and lead the way in the work we do to reflect diversity, equity, and inclusion. For FY 2021 AASA requires the following new Program Development Objective be added to each area agency's Annual Implementation Plan.

Goal: Improve the accessibility of services to Michigan's communities and people of color, persons with disabilities, recent immigrants and LGBTQ+ individuals

This new goal is required for FY 2021. Please assess and describe how the area agency is currently addressing accessibility for the groups listed above and complete the objectives, strategies and activities that are indicated for quality improvement in this area. Include planned efforts to:

- Ensure that AAA staff and subcontractors are trained in diversity, equity, and inclusion.
- Ensure that AAA staff and subcontractors are trained on how to recognize and address unconscious bias.
- Ensure that programming and outreach is culturally sensitive and welcoming to all.
- Ensure that culturally and linguistically appropriate outreach is directed to non-English-speaking persons and that providers are trained to adapt to diverse cultural needs.

An explanation of DEI and a list of available trainings are included in the Document Library.

The area agency must enter each new program development goal in the appropriate text box. It is acceptable, though not required, if some of the area agency's program development goals correspond to AASA's State Plan Goals. There is an entry box to identify which, if any, State Plan

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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. Complete the information in the text boxes for the timeline, planned activities and expected outcomes for each objective. (See Document Library for additional instructions on completing the Program Development section.)

Area Agency on Aging Goal

A. Improve the accessibility of services to Michigan's communities and people of color, immigrants and LGBTQ+ individuals

State Goal Match: 1

Narrative

AAAWM recognizes the need to improve accessibility of services to all older adults, particularly people of color, immigrants and LGBTQ+ individuals as they have been historically underserved. AAAWM requires Service Partners to conduct outreach to these communities and requires each partner to track demographics of the clients they serve.

AAAWM has provided training for all Service Partners within Region 8 on serving the LGBTQ+ population. AAAWM also collaborated on an LGBTQ+ guide for older adults who are seeking services from organizations who identify as LGBTQ+ affirming.

AAAWM and its Service Partners will continue to place emphasis on ensuring those persons with the greatest social and/or economic need will receive services, with special focus given to underserved and underrepresented communities.

Additionally, the Area Agency on Aging of Western Michigan continues to contract with Senior Neighbors, Inc. to provide service to Elder Refugees, 60 and older, throughout Kent County. Some of the countries that client's lived in before coming to Kent County are the Democratic Republic of Congo, Bhutan, Burma, Somali, Burundi, Sudan and Liberia. Senior Neighbors helps Elder Refugees navigate medical systems, apply and maintain benefits attend social gatherings, get access to transportation, interpretation and ESL classes. They frequently refer clients for home care through DHHS or International Home Care services for clients who need help bathing dressing etc. There are many resources in Kent County for elderly residents, and Senior Neighbors utilizes these resources when they fit the needs of Elder Refugee Clients.

Objectives

1. AAAWM will offer unconscious bias as well as diversity, equity and inclusion training to staff and Older Americans Act Service Partners.

Timeline: 10/01/2020 to 09/30/2021

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Activities

AAAWM will train all staff in Diversity, Equity and Inclusion at it's annual all-staff meeting - Summer 2021.

AAAWM will offer training on the Social Determinants of Health to all OAA Service Partners.

AAAWM Care Management Department Leadership will ensure all Care Managers receive additional training related to Diversity, Equity and Inclusion.

Expected Outcome

AAAWM staff and Service Partners will be better prepared to offer programming and outreach that is culturally sensitive and welcoming to all.

2. AAWM Outreach Specialist will ensure culturally and linguistically appropriate outreach .

Timeline: 10/01/2020 to 09/30/2021

Activities

AAAWM Outreach Specialist will reach minorities by partnering with local churches, Hispanic and Latinx centers, Pride Centers, Community Mental Health organizations, as well as other organizations who serve minority populations.

Expected Outcome

Communities and people of color, immigrants and LGBTQ+ individuals will have increased knowledge of AAWM and its available services.

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Supplemental Documents

This year, the completion of the Quality Outcome Measures Reporting Form (six-month report) and the Emergency Management and Preparedness document are required and may be found in the Document Library.

Supplemental Documents A through G are presented in the list below. Select the applicable supplemental document(s) from the list on the left. Provide all requested information for each selected document. Note that older versions of these documents will not be accepted and should not be uploaded as separate documents.

- A. Policy Board Membership – *not required for the FY 2021 AIP*
- B. Advisory Council Membership – *not required for the FY 2021 AIP*
- C. Proposal Selection Criteria - *should only be completed if there are new or changed criteria for selecting providers*
- D. Cash-In-Lieu-Of-Commodity Agreement - *should be completed if applicable to the area agency's 2021 AIP*
- E. Waiver of Minimum Percentage of a Priority Service Category - *should be completed if applicable to the area agency's 2021 AIP*
- F. Request to Transfer Funds - *should be completed if applicable to the area agency's 2021 AIP*
- G. 2021 Evidence Based Programs Document - *required to be completed for each Title III-D funded EBDP program and uploaded into AMPS*
(The form to be used is located in the Documents Library)

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SUPPLEMENTAL DOCUMENT D

**Agreement for Receipt of Supplemental Cash-In-Lieu of Commodity Payments for the
Nutrition Program for the Elderly**

The above identified agency, (hereinafter referred to as the GRANTEE), under contract with the Aging and Adult Services Agency (AASA), affirms that its contractor(s) have secured local funding for additional meals for senior citizens which is not included in the current fiscal year (see above) application and contract as approved by the GRANTEE.

Estimated number of meals these funds will be used to produce is:

40,000

These meals are administered by the contractor(s) as part of the Nutrition Program for the Elderly, and the meals served are in compliance with all State and Federal requirements applicable to Title III , Part C of the Older Americans Act of 1965, as amended.

Therefore, the GRANTEE agrees to report monthly on a separate AASA Financial Status Report the number of meals served utilizing the local funds, and in consideration of these meals will receive separate reimbursement at the authorized per meal level cash-in-lieu of United States Department of Agriculture commodities, to the extent that these funds are available to AASA.

The GRANTEE also affirms that the cash-in-lieu reimbursement will be used exclusively to purchase domestic agricultural products, and will provide separate accounting for receipt of these funds.

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SUPPLEMENTAL DOCUMENT E

Waiver of Minimum Percentage For a Priority Service Category

Priority Service Category for which Waiver is being requested:		Legal Services
Source of Funds	Amount of Funds	Amount of Title III-B
3E and Senior Millage	78,000	63,000
Rationale Statement: Explain how waiving the respective required minimum percentage will enhance the service delivery system to be implemented under this plan. (For additional context, refer to AASA Transmittal Letter 2005-107, July 27, 2005.)		
<p>AAAWM administers the Kent County Senior Millage (KCSM), which funds Legal Aid of West Michigan for legal services in the amount of \$70,000. Currently the amount allocated of 3B for legal services is over the required 6.5%, however we do not have a cost allocation for FY2021. 3B funds are used to support other services that have limited funding streams and we may need to redistribute 3B funding once we have the final cost allocation.</p> <p>Because of these various sources of funds, we respectfully request a waiver from the required amount of 6.5 percent of IIIB funds to be allocated for legal services. IIIB funds are used to support other services that have limited funding streams</p>		

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Approved Multi-Year Plan Highlights

The Multi-Year Plan Highlights provide an overview of the FY 2020-2021 MYP priorities set by the area agency as approved by the Commission on Services to the Aging. These highlights serve to provide an overall reference for the established three-year planning period. They also help to provide a framework and context for activities planned during the FY 2021 AIP. The FY 2020-2022 MYP Highlights are included as a read-only section. No further entry by the area agency is necessary.

1. A brief history of the area agency and respective PSA that provides a context for the MYP. It is appropriate to include the area agency's vision and/or mission statements in this section.

The Area Agency on Aging of Western Michigan (AAAWM) was established in April of 1974, one of thirteen regional Area Agencies on Aging on Michigan at that time and one of over 600 area agencies in the nation.

AAAWM's mission is to provide older adults and adults living with a disability an array of services designed to promote independence and dignity in their homes and their communities. AAWM is the Source for Seniors in Allegan, Ionia, Kent, Lake, Mason, Mecosta, Montcalm, Newaygo, and Osceola counties.

AAAWM connects individuals to quality services that promote and preserve their dignity, independence, and well-being, coordinates support and education for caregivers and leads advocacy efforts on behalf of older adults.

2. A summary of the area agency's service population evaluation from the Scope of Services section.

The Public Service Area (PSA) of the Area Agency on Aging of Western Michigan (Region Eight) consists of the following nine counties: Allegan, Ionia, Kent, Lake, Mason, Mecosta, Montcalm, Newaygo and Osceola. According to the 2017 American Community Survey 5-year estimates, 209,313 adults aged 60+ live in Region 8, representing 20.3 percent of the total PSA population. Nearly 45 percent of the PSA population live outside of Kent County. When compared to population statistics from the previous MYP (2017-2019), the 60+ population has grown by 11,531 or 5.83%.

3. A summary of services to be provided under the plan which includes identification of the five service categories receiving the most funds and the five service categories with the greatest number of anticipated participants.

AAAWM provides the following services directly:

Care Management
Information and Assistance
Disease Prevention/Health Promotion
Long Term Care Ombudsman/Advocacy
Programs for Prevention of Elder Abuse, Neglect, and Exploitation
Caregiver Focal Point (Caregiver Resource Network)
Home Support

AAAWM develops contracts and/or purchase of service agreements with local agencies that provide home and community based services such as:

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

FY2020-2022 Multi Year Plan

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Home Injury Control
Homemaking
Home Delivered Meals
Medication Management
Personal Care
Assistive Devices & Technologies
Respite Care
Adult Day Services
Community Living Supports
Congregate Meals
Nutrition Counseling
Nutrition Education
Disease Prevention/Health Promotion
Legal Assistance
Senior Center Staffing
Programs for Prevention of Elder Abuse, Neglect, and Exploitation
Counseling Services
Caregiver Supplemental Services
Kinship Support Services
Caregiver Education, Support and Training

The five service categories receiving the most funds are:

- 1.1. Congregate and Home Delivered Meals
2. Care Management
3. Adult Day Services
4. Respite
5. Homemaker

The five service categories with the greatest number of anticipated participants are:

- 1.1. Information and Assistance
2. Congregate and Home Delivered Meals
3. Caregiver Services
4. Homemaker
5. Transportation

4. Highlights of planned Program Development Objectives.

AAAWM has aligned its main goals to fall in line with the goals set forth by the Aging and Adult Services Agency in their "Michigan State Plan on Aging". Below are brief overviews of each goal and main objectives.

Goal #1

Advocate, Inform, and Empower those we serve.

AAAWM will continue to advocate for older adults and individuals with disabilities by working collaboratively with legislators, local collaboratives, partners, and community stakeholders to ensure individuals are able to age in their own homes and communities successfully. Additionally, AAWM will strive to continuously educate and empower individuals to advocate for themselves and be educated and aware of the services and programs that

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are available to them.

- Provide resources, education, guidance, training and empowerment to support those caring for older adults, persons with Dementia, Alzheimer's disease or other chronic conditions.(Caregiver Resource Network)

Teach older adults how to use technology that can help enhance and make their lives easier .

Employ a robust advocacy strategy utilizing a wide variety of resources available including but not limited to AAAWM staff, Board, and Advisory Council as well as other partner organizations .

Goal #2

Help older adults maintain their health and independence at home and in their community.

AAAWM will support, promote, and provide programs that help older adults stay in their own homes and communities.

- AAAWM will continue building and expanding partnerships within the aging network to disseminate healthy aging programs to older adults.Evidence-based, healthy aging programming is a cornerstone to the array of services offered in Region Eight.

Help older adults maintain their dental health and raise awareness of the need for quality dental care for seniors.

Goal #3

Promote elder and vulnerable adult rights and justice.

AAAWM will support, promote and create programs that protect the rights of vulnerable adults in Region Eight.

- AAAWM will continue to educate older adults on Lesbian, Gay, Bisexual, and Transgender (LGBT) affirming services.

AAAWM will continue to support the Kent County Elder Abuse Coalition.

Goal #4

Conduct responsible quality management and coordination of West Michigan's aging network.

AAAWM is committed to ensuring good stewardship of finances and quality management of programs and services.

- Care Management Participants will report lower levels of social isolation with distress.

Care Management Participants will report their services are helping them remain in their homes.

Care Management Participants will show a higher rating of their quality of life after receiving community based services.

5. A description of planned special projects and partnerships.

AAAWM plans to continue to embed Evidence Based Health Promotion (EBHP) programs throughout the PSA. Additionally, AAAWM continues to work with American Speciality Health through their Silver and Fit program , on a project which will cover the cost of EnhanceFitness, Matter of Balance and Tai-Chi for members aged 60+, of Priority Health.

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In 2017, the National Association of Area Agencies on Aging (N4A) appointed AAAWM as the state entity for the Dementia Friends USA program. That includes training Dementia Champions and facilitating Dementia Friend (DF) Sessions under a sub-license agreement with N4A, as well as the gradual expansion of the DF training to other AAAs in Michigan and additional counties in Region 8. For FY 20-22 we plan to train additional AAAs and also increase the number of counties in Region 8 that are providing the Dementia Friends program. These classes educate the community on the basics of Alzheimer's disease and other dementias, how to better communicate with persons with dementia, and how to help persons with dementia and their family caregivers better navigate through the community.

Other plans for the future are to continue efforts to better connect with the Lesbian, Gay, Bisexual and Transgendered (LGBT) population, which is often isolated, as well as to raise awareness with the aging network of the needs of this segment of the population. Healthy Aging programming is also being targeted toward the LGBT population. In addition, AAAWM will continue the outreach of the Kent County Elder Abuse Prevention Coalition to address issues of elder abuse and exploitation; speakers for this organization are available to speak throughout Region Eight.

The City of Grand Rapids is pursuing the Age Friendly Community designation from the World Health Organization (WHO), which is being coordinated by AARP in the United States. AAAWM has partnered with the City on the effort by being involved in the transportation committee as well as the communications committee. Achieving the designation will take several years to complete and AAAWM will be involved in various components throughout the process. The Age Friendly Community designation will help make Grand Rapids become a great place for all ages by adopting such features as safe, walkable streets; better housing and transportation options; access to key services; and opportunities for residents to participate in community activities.

6. 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.

AAAWM just received its second seal of a three year accreditation under CARF for case management services. We will be pursuing accreditation under NCQA in 2020 to better align case management practices with Center for Medicare Medicaid Core Quality Indicators and managed Long Term Care Services and Support.

The direct care worker crisis has resulted in excessive time that care managers put into finding staffing for care plans. We are investigating numerous ideas on how to streamline this process and help the service partners consolidate their staff in geographic areas to minimize travel time and distance. We hope to start some of these ideas in 2020.

AAAWM will participate in the process of integrating the Connect2Care Health Endowment funded program into Care Management practice. This will achieve real time information on participant hospital admissions and discharges allowing for more efficient process to both adhere to program requirements, address changes in person centered care plans and assure proper oversight of Medicaid funded services.

The Care Management (CM) Department is undergoing a restructuring of Management positions. We are currently hiring for three Care Management Managers who will replace the Registered Nurse (RN) CM Manager and the Social Work (SW) CM Manager. The new managers will actually supervise a blend of SW and RN care

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managers in a certain geographic area. The plan is that care managers in a similar area can more easily connect with the issues and resources in that area.

7. A description of how the area agency's strategy for developing non-formula resources, including utilization of volunteers, will support implementation of the MYP and help address the increased service demand.

Volunteers with the AAAWM are talented and experienced adults looking for meaningful ways to give back to their community. They come from all backgrounds and have in common a passion for the areas in which they serve and a strong desire to help others. Opportunities through AAAWM focus on civic engagement activities that educate and empower older adults to maintain independent healthy lifestyles. The AAAWM strategy for developing non-formula resources includes utilization of volunteers which will support implementation of the MYP by reducing the amount of operating funds necessary to run programs and services. Specifically, AAAWM uses volunteers in the Disease Prevention/Health Promotion programs to disseminate the evidence-based programs throughout the Region, to accomplish goals and outcomes identified by the Caregiver Resource Network Steering Committee, and to advocate for legislation and funding that addresses the myriad needs of older adults. Additionally, AAAWM uses a cadre of volunteers in the Medicare Medicaid Assistance Program (MMAP) to educate and inform older adults of the available and most appropriate health care choices available to them.

8. Highlights of strategic planning activities.

AAAWM continues to work with a consultant to update and refine its Strategic Plan. Staff from every department within the agency meet regularly to discuss and update the Strategic Plan. Status updates are given to the AAAWM Board of Directors on a bi-annual basis to ensure priorities and goals are being met.

In the next three to five years, AAAWM will work toward achieving the following goals: Increasing Waiver Clients to 1,000, Securing Medicare and third party funding, achieving National Committee for Quality Assurance (NCQA) accreditation in Managed Long Term Care Supports and Services, become an active member of the statewide Area Agencies on Aging Association of Michigan's LLC, and fully utilizing electronic health records.