# PROGRAM DEVELOPMENT INITIATIVES

## Area Agency: Valley Area Agency on Aging – Region 5
### Annual Implementation Plan
#### FY 2015

## State Goal 1: Work to Improve the Health and Nutrition of Older Adults.

### AAA Goal: Work to Improve the Health and Nutrition of Older Adults within PSA 5
### AAA Objective: To positively impact chronic disease, and related issues, through programs.

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<tr>
<th>Desired Outcome</th>
<th>Activities</th>
<th>Timeline</th>
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<tbody>
<tr>
<td>A) Increase evidence based programming participation throughout Region 5 by 10%</td>
<td>1. Increased implementation of: Creating Confident Caregivers, Diabetes PATH, Chronic Pain Self-Management PATH, Matter of Balance and Arthritis Foundation Program</td>
<td>FY 2015</td>
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<td>2. Develop the Medicare billing portion of the Diabetes PATH program in order to generate additional revenue.</td>
<td>FY 2015</td>
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<td>3. Develop a fee for service breakdown in order to develop EBCD programs for potential private pay resource to business (such as health care providers and hospitals).</td>
<td>FY 2014/2015</td>
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<td>B) To institute an evidence based model within each of the hospitals located within the tri-county area with the overall goal of reducing hospitalizations and Medicare readmissions by 20% over a 30 day period</td>
<td>1. To train all area hospitals in the implementation of the BOOST model.</td>
<td>FY 2014-2015</td>
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<td>2. To train and utilize the expertise of a Transition Specialist to work with the patient once discharged from the hospital in order to provide the support needed to prevent readmission within a 30-day period.</td>
<td>FY 2014/2015</td>
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<td>3. To review the initial data in order to determine the number of patient readmissions prevented, the cost of services used to prevent the hospitalizations, and the amount saved in the reduction of readmissions due to the program.</td>
<td>FY 2015-2016</td>
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<td>4. To achieve the CMS benchmark for the CT Program.</td>
<td>FY 2015/2016</td>
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<td>5. To expand the CT Program to include ECF’s and pneumonia as a diagnosis.</td>
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State Goal 2: Ensure that older adults have a choice in where they live through increased access to information and services.

AAA Goal: Increase the number of Nursing Facility Transitions in Region 5
AAA Objective: Involve the provider network in identifying NFT participants.

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| A). Develop NFT Collaboration | 1. Identify 1-2 Home Health Care Providers to partner with VAAA.  
2. Identify Nursing Homes to partner with the providers.  
3. Develop a (Nursing Facility Transition) Collaboration with Home Health Agencies. | FY 2015      |
| B). Provide training, policy, procedures and forms | 1. Train the providers in completing the Level of Care (LOC) tool, and Medicaid Applications.  
2. Develop Policy and procedures for providers to identify persons, private pay customers who end up going into the nursing home.  
3. Develop referral process. | FY 2015      |
| C). Implementation of pilot program | 1. Pilot the collaboration beginning with Genesee County. | FY 2015      |
| D). Increase participation in the NFT program by 10% | 1. Increase number of Home Health Providers involved in order to increase NFT transitions.  
2. Implement in Lapeer and Shiawassee counties. | FY 2015-2016 |

State Goal 3: Protect older adults from abuse and exploitation.

AAA Goal: Protect older adults from abuse and exploitation within PSA 5
### State Goal 4: Improve the effectiveness, efficiency and quality of services provided through the Michigan Aging Network and its partners.
AAA Goal: Improve the effectiveness, efficiency and quality of services provided through the Regional Aging Network and its partners.

AAA Objective: To collaborate and partner with other agencies in order to make the community aware of senior services within Region/PSA 5.

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| A). To assist organizations who develop innovative ideas by providing “mini-grants” (up to $500.00) to assist in implementation of ideas | 1. Review the ideas via an application.  
2. Send approval letters (must not duplicate current services).  
3. Must include sign-in sheets.  
| B). Develop the Community Living Program                                         | 1. Define the program.  
2. Develop partnerships.  
3. Identify participants.  
4. Begin Implementation. | FY 2014  
FY 2015  
FY 2015  
FY 2016 |
| C). To develop a long range business strategic plan in order to prepare and position the organization to be a participant in the delivery of long term care products and services | 1. Work with Area Agency on Aging leadership and Board members to develop the plan.  
2. Communicate the plan agency wide.  
3. Implement the plan. | FY 2015  
FY 2015/2016  
FY 2015/2016 |